

COMAT Psychiatry Practice Test (Sample)

Study Guide



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Questions

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- 1. Which feature defines a psychotic depressive disorder?**
 - A. Presence of hallucinations/delusions**
 - B. Reactive mood with hypersensitivity**
 - C. Complete immobility**
 - D. Excessive energy levels**
- 2. Which type of hallucination is MOST commonly associated with seizure disorders?**
 - A. Visual**
 - B. Gustatory**
 - C. Olfactory**
 - D. Tactile**
- 3. Which type of delusion has the individual believing they are in a romantic relationship with someone famous?**
 - A. Persecutory delusion**
 - B. Grandiose delusion**
 - C. Somatic delusion**
 - D. Erotomanic delusion**
- 4. How does cocaine overdose most commonly lead to death?**
 - A. Fatigue**
 - B. Respiratory depression**
 - C. Fever**
 - D. Severe anxiety**
- 5. Which of the following is a characteristic of Major Depressive Disorder's diagnostic criteria?**
 - A. No prior history of hypomanic episodes.**
 - B. At least one manic episode is required.**
 - C. Only minor depressive episodes count for diagnosis.**
 - D. Only psychotic features must be present.**

- 6. At what age is urinary continence typically established?**
- A. Before age 2**
 - B. Before age 3**
 - C. Before age 4**
 - D. Before age 5**
- 7. Individuals with which personality disorder often display submissive and clingy behaviors?**
- A. Histrionic Personality Disorder**
 - B. Antisocial Personality Disorder**
 - C. Dependent Personality Disorder**
 - D. Narcissistic Personality Disorder**
- 8. Which of the following is NOT a characteristic of Axis III in the DSM-IV?**
- A. Personality disorders**
 - B. Medical conditions**
 - C. Mental retardation**
 - D. General medical conditions**
- 9. Which gender is more commonly affected by Rett's Disorder?**
- A. Boys**
 - B. Girls**
 - C. Both genders equally**
 - D. Neither gender**
- 10. What is a defining feature of Narcissistic Personality Disorder?**
- A. Fear of abandonment**
 - B. Lack of empathy**
 - C. Excessive emotionality**
 - D. Impulsive behavior**

Answers

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1. A
2. C
3. D
4. B
5. A
6. C
7. C
8. A
9. B
10. B

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Explanations

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1. Which feature defines a psychotic depressive disorder?

A. Presence of hallucinations/delusions

B. Reactive mood with hypersensitivity

C. Complete immobility

D. Excessive energy levels

A psychotic depressive disorder is primarily characterized by the presence of hallucinations or delusions, which are indicative of psychosis. In this context, psychosis refers to a disconnection from reality, resulting in symptoms such as false beliefs (delusions) or perceptual disturbances (hallucinations) that occur alongside the depressive symptoms. This condition signifies a more severe form of depression, often requiring different treatment approaches compared to non-psychotic depression. The other options reflect features that do not align with the essential characteristics of a psychotic depressive disorder. Reactive mood suggests a situational trigger for depression, which does not encompass the psychotic element. Complete immobility could occur in various contexts, such as in severe depression or catatonia, but it is not a defining feature of psychotic depressive disorder. Excessive energy levels are more characteristic of mania or hypomania, which are not typical of depressive disorders. Thus, the defining aspect of this disorder is indeed the presence of hallucinations or delusions.

2. Which type of hallucination is MOST commonly associated with seizure disorders?

A. Visual

B. Gustatory

C. Olfactory

D. Tactile

The type of hallucination most commonly associated with seizure disorders is indeed olfactory hallucinations. This is particularly significant in the context of temporal lobe seizures, which are often linked to the limbic system's functioning. Olfactory hallucinations occur when individuals perceive smells that are not present in the environment, and they can reflect abnormal temporal lobe activity during a seizure. Olfactory hallucinations can serve as an aura for seizures, alerting the individual that a seizure may occur shortly after the onset of these unusual sensory experiences. The brain regions involved in olfaction are closely associated with emotion and memory, which can explain why these hallucinations can be particularly vivid and impactful for those experiencing them. Other types of hallucinations, such as visual, gustatory, or tactile, do occur in various contexts but are less specifically tied to seizure disorders. Visual hallucinations may be more commonly associated with psychiatric conditions or organic brain syndromes, gustatory hallucinations typically appear in discussions related to medications or lesions affecting taste pathways, and tactile hallucinations often arise in cases of substance use, withdrawal, or specific neurological conditions. This differentiation emphasizes why olfactory hallucinations hold the strongest correlation with seizure activity.

3. Which type of delusion has the individual believing they are in a romantic relationship with someone famous?

- A. Persecutory delusion**
- B. Grandiose delusion**
- C. Somatic delusion**
- D. Erotomanic delusion**

The type of delusion where an individual believes they are in a romantic relationship with someone famous is known as an erotomanic delusion. This specific delusional belief involves a conviction that another person, typically someone of higher status or fame, is in love with the individual or has a special relationship with them. It often leads to the person pursuing or fantasizing about romantic interactions, despite clear evidence to the contrary. Erotomania can occur in the context of various psychiatric conditions, including schizophrenia or mood disorders. This delusion is characterized by the individual's strong and persistent belief regardless of the reality or feedback from the environment, which distinguishes it from more common beliefs or whims people may have in everyday life about romance or celebrity.

4. How does cocaine overdose most commonly lead to death?

- A. Fatigue**
- B. Respiratory depression**
- C. Fever**
- D. Severe anxiety**

Cocaine overdose most commonly leads to death through respiratory depression, which occurs as a result of the drug's effects on the central nervous system. Cocaine is a powerful stimulant that can cause increased heart rate, hypertension, and vasoconstriction. In cases of overdose, these effects can lead to severe cardiovascular complications, including arrhythmias and myocardial infarction. However, respiratory depression is particularly critical because it can compromise the body's ability to oxygenate blood, leading to hypoxia and potentially fatal outcomes. The overstimulation caused by cocaine can also lead to a decreased level of consciousness, impairing the individual's protective reflexes and further contributing to respiratory failure. While fatigue, fever, and severe anxiety may occur with cocaine use or overdose, they are not the direct causes of death in the way respiratory depression is. Understanding the mechanisms of cocaine toxicity is essential for recognizing the serious risks associated with its use and overdose.

5. Which of the following is a characteristic of Major Depressive Disorder's diagnostic criteria?

- A. No prior history of hypomanic episodes.**
- B. At least one manic episode is required.**
- C. Only minor depressive episodes count for diagnosis.**
- D. Only psychotic features must be present.**

Major Depressive Disorder (MDD) is characterized by specific diagnostic criteria outlined in the DSM-5, one of which is the absence of a prior history of hypomanic or manic episodes. This criterion is crucial because it differentiates MDD from Bipolar Disorder, where manic or hypomanic episodes are present. The requirement ensures that a diagnosis of MDD is appropriate, as the presence of manic episodes would suggest a different disorder. Additionally, for a diagnosis of MDD, the individual must exhibit a certain number of symptoms (such as persistent sadness or loss of interest) for a minimum duration. This ensures the diagnosis reflects a significant impact on functioning or well-being, distinct from other mood disorders. Therefore, the absence of a history of hypomanic episodes is a key characteristic in confirming the diagnosis of Major Depressive Disorder rather than a bipolar condition.

6. At what age is urinary continence typically established?

- A. Before age 2**
- B. Before age 3**
- C. Before age 4**
- D. Before age 5**

Urinary continence is generally established before the age of 4. By this age, most children have developed the physiological and neurological maturity necessary to recognize the urge to void and control their bladder function effectively. This developmental milestone is influenced by several factors, including the child's cognitive understanding, motor skills, and readiness to engage in toilet training. While some children may achieve continence earlier, around ages 2 or 3, it is more common for mastery of bladder control to occur by age 4, where accidents become significantly less frequent and the child can consistently use the toilet independently. By age 5, children are generally expected to be fully continent and toilet trained, which aligns with common developmental expectations in early childhood.

7. Individuals with which personality disorder often display submissive and clingy behaviors?

- A. Histrionic Personality Disorder**
- B. Antisocial Personality Disorder**
- C. Dependent Personality Disorder**
- D. Narcissistic Personality Disorder**

Individuals with Dependent Personality Disorder exhibit submissive and clingy behaviors as a core feature of their personality. This disorder is characterized by an excessive need to be taken care of, leading to a dependent and submissive demeanor in relationships. People with this disorder often fear abandonment and may go to great lengths to secure and maintain the support and approval of others, which can manifest as clinginess or difficulty in making decisions without excessive reassurance. This need for dependency can result in a lack of self-confidence and a tendency to prioritize the needs of others over their own. As a result, individuals with Dependent Personality Disorder may experience challenges in asserting themselves or taking initiative, reinforcing their dependent behaviors. Understanding this condition helps in recognizing the dynamics within relationships involving individuals with this personality disorder, as they may struggle to function independently and often compromise their own desires to avoid conflict or rejection.

8. Which of the following is NOT a characteristic of Axis III in the DSM-IV?

- A. Personality disorders**
- B. Medical conditions**
- C. Mental retardation**
- D. General medical conditions**

Axis III in the DSM-IV focuses specifically on general medical conditions that may be relevant to understanding an individual's mental health. This axis is designed to provide insight into physical health issues that could influence mental disorders or treatment. Medical conditions and general medical conditions are explicitly included under Axis III, as they may interact with or exacerbate psychiatric symptoms. Mental retardation, which is now more appropriately referred to as intellectual disability in current diagnostic terminology, is actually classified under Axis II, which encompasses personality disorders and intellectual disabilities. Personality disorders, while related to mental health, are categorized under Axis II as well. Therefore, identifying personality disorders as part of Axis III is a misunderstanding of how the DSM-IV organizes its axes for mental health diagnosis. This distinction underscores the importance of recognizing how various conditions are classified within the DSM framework to ensure accurate diagnosis and treatment planning in psychiatric care.

9. Which gender is more commonly affected by Rett's Disorder?

- A. Boys
- B. Girls**
- C. Both genders equally
- D. Neither gender

Rett's Disorder, also known as Rett Syndrome, predominantly affects girls. The condition is caused by mutations in the MECP2 gene, which is located on the X chromosome. Because girls have two X chromosomes, they have a backup copy of the gene; however, when the MECP2 gene is mutated, it can lead to severe neurodevelopmental issues primarily in females. Boys are rarely affected by Rett's Disorder and tend to have more severe outcomes if they do inherit the mutation, often resulting in early lethality. This gender disparity is a significant aspect of the disorder, solidifying that girls are the primary demographic affected.

10. What is a defining feature of Narcissistic Personality Disorder?

- A. Fear of abandonment
- B. Lack of empathy**
- C. Excessive emotionality
- D. Impulsive behavior

A defining feature of Narcissistic Personality Disorder is the lack of empathy. Individuals with this disorder typically have a diminished ability to recognize or identify with the feelings and needs of others. This lack of empathy contributes to their interpersonal difficulties and can lead to a pattern of exploitative relationships where they prioritize their own needs and desires over those of others. This absence of empathy is fundamental to the disorder and manifests in various ways, such as a disregard for others' feelings, an inability to understand social cues, and a tendency to react insensitively to the emotional states of others. This characteristic helps distinguish Narcissistic Personality Disorder from other personality disorders, which may feature different emotional responses or relationship dynamics. In contrast, features such as fear of abandonment are more typical of Borderline Personality Disorder, while excessive emotionality is often associated with Histrionic Personality Disorder. Impulsive behavior is a hallmark of disorders like Borderline Personality Disorder or Antisocial Personality Disorder, rather than Narcissistic Personality Disorder, which is more characterized by grandiosity and a focus on self.