

LIPPINCOTT MOOD DISORDERS PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE**

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. What is the underlying cause of bipolar disorder that should be communicated to the client's family?**
 - A. It is caused by underlying psychological difficulties
 - B. It is caused by disturbed family dynamics in the client's early life
 - C. It is the result of an imbalance of chemicals in the brain
 - D. It is the result of a genetic inheritance from someone in the family
- 2. What is the most appropriate way for a nurse to explain a chest radiograph procedure to a client in the manic phase of bipolar disorder?**
 - A. Give a thorough explanation of the procedure
 - B. Explain the procedure in simple terms
 - C. Call security to be on standby for possible problems
 - D. Cancel the appointment until the client can go unescorted
- 3. What is an effective strategy for managing a manic client in a hospital setting?**
 - A. Encouraging group therapy sessions for social interaction
 - B. Offering unlimited visitation from family
 - C. Establishing routines for eating and sleeping
 - D. Allowing free movement around the hospital
- 4. What is vital counseling for a young woman with bipolar disorder planning to start a family while on divalproex sodium?**
 - A. "Schedule an appointment for a complete gynecological exam if you have not had one in the past year"
 - B. "Pay careful attention to eating healthy from this point on in order to maximize the health of both mother and baby"
 - C. "Check with your prescriber today as Depakote carries an increased risk for birth defects, especially during the first 3 months of pregnancy"
 - D. "It is very important for you to take steps to reduce your stress to help you stay balanced during your pregnancy"
- 5. Which response from a nurse helps a client feel secure when displaying signs of paranoia during a manic episode?**
 - A. "You should not feel that way."
 - B. "It's normal to have those feelings."
 - C. "I am here to protect you."
 - D. "It's just your mood swings."

- 6. What is the most appropriate initial outcome for a client exhibiting psychomotor retardation and withdrawal?**
- A. The client will initiate interactions with peers
 - B. The client will participate in milieu activities
 - C. The client will discuss adaptive coping techniques
 - D. The client will interact with the nurse
- 7. How should a nurse encourage a severely depressed client who has not eaten for two days to eat?**
- A. Serve the meal trays in the client's room.
 - B. Sit with the client and spoon-feed if required.
 - C. Call the family to bring food from home.
 - D. Explain the importance of nutrition in recovery.
- 8. What symptom should a nurse be alert for in a client experiencing anticholinergic effects while on a tricyclic antidepressant?**
- A. Tremors and cardiac arrhythmias
 - B. Sedation and delirium
 - C. Respiratory depression and convulsions
 - D. Urine retention and blurred vision
- 9. What should the nurse inform a client with major depressive disorder regarding medication continuation?**
- A. You may be able to stop your medication after three months.
 - B. You will need to remain on antidepressants indefinitely.
 - C. There is a 70% chance of a third episode after two significant episodes.
 - D. You can manage depression with a healthy lifestyle alone.
- 10. Which of the following activities should a nurse recommend for a client with acute mania?**
- A. Scheduled rest periods
 - B. Watching television
 - C. Aerobic exercises
 - D. Relaxation exercises

Answers

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

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Explanations

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1. What is the underlying cause of bipolar disorder that should be communicated to the client's family?

- A. It is caused by underlying psychological difficulties
- B. It is caused by disturbed family dynamics in the client's early life
- C. It is the result of an imbalance of chemicals in the brain**
- D. It is the result of a genetic inheritance from someone in the family

Bipolar disorder is primarily understood as a biological condition that results from an imbalance of neurotransmitters and other chemical messengers in the brain. These neurobiological factors play a pivotal role in the development and manifestation of the disorder. The imbalance can contribute to the extreme mood swings characteristic of bipolar disorder, including manic and depressive episodes. Communicating this biological understanding to the client's family can help normalize the condition, making it clear that it is not merely a result of personal failings or psychological issues, but rather a complex disorder rooted in neurochemistry. This perspective reinforces the importance of appropriate treatment, which may include medication aimed at correcting these imbalances, as well as therapy. While genetic inheritance and psychological or family dynamics may contribute to the disorder's expression and individual experiences, the core of the condition lies in its biochemical origins, which is why highlighting the role of chemical imbalances is critical for family understanding and support.

2. What is the most appropriate way for a nurse to explain a chest radiograph procedure to a client in the manic phase of bipolar disorder?

- A. Give a thorough explanation of the procedure
- B. Explain the procedure in simple terms**
- C. Call security to be on standby for possible problems
- D. Cancel the appointment until the client can go unescorted

The most appropriate way for a nurse to explain a chest radiograph procedure to a client in the manic phase of bipolar disorder is to explain the procedure in simple terms. During a manic episode, individuals often experience heightened energy, racing thoughts, and decreased attention span. Therefore, complex or detailed explanations may overwhelm or confuse them. By using straightforward language, the nurse can ensure that the client understands the essential aspects of the procedure without adding to their agitation or excitement. Using simple terms helps to maintain the client's focus and reduces the risk of anxiety associated with misunderstandings. It also fosters a more supportive interaction, allowing the nurse to connect with the client effectively, build rapport, and ensure that the client feels informed and empowered about their care. The other approaches either do not address the unique needs of the client in a manic state or might exacerbate the situation. A thorough explanation may not be suitable because it could lead to increased confusion or agitation. Calling security preemptively suggests a lack of trust or an assumption that the client will behave inappropriately, which could escalate their feelings of paranoia or hostility. Cancelling the appointment altogether might deny the client necessary medical care and create additional feelings of frustration or resentment, further complicating their mental state. Keeping communication simple and

3. What is an effective strategy for managing a manic client in a hospital setting?

- A. Encouraging group therapy sessions for social interaction
- B. Offering unlimited visitation from family
- C. Establishing routines for eating and sleeping**
- D. Allowing free movement around the hospital

Establishing routines for eating and sleeping is an effective strategy for managing a manic client in a hospital setting because it helps create a sense of structure and stability, which is crucial for individuals experiencing manic episodes. During mania, clients may exhibit impulsive behavior, heightened energy levels, and disrupted sleep patterns, leading to further exacerbation of their symptoms. By implementing a routine, staff can provide predictable times for meals and rest, which can help regulate the client's sleep-wake cycle and ensure adequate nutrition. This structure can also reduce anxiety and confusion that may arise in a chaotic environment, allowing for better management of manic symptoms. In contrast, encouraging group therapy sessions for social interaction may not be suitable during a manic episode, as social overstimulation can lead to increased agitation rather than healing. Unlimited visitation from family could overwhelm the client and impact their ability to stabilize, especially if family dynamics are complicated or stressful. Allowing free movement around the hospital can result in safety risks or disruptions to the therapeutic environment that is necessary for the client's treatment. Thus, establishing routines is the most appropriate method since it directly addresses the needs of a manic client in a way that promotes safety and stability.

4. What is vital counseling for a young woman with bipolar disorder planning to start a family while on divalproex sodium?

- A. "Schedule an appointment for a complete gynecological exam if you have not had one in the past year"
- B. "Pay careful attention to eating healthy from this point on in order to maximize the health of both mother and baby"
- C. "Check with your prescriber today as Depakote carries an increased risk for birth defects, especially during the first 3 months of pregnancy"**
- D. "It is very important for you to take steps to reduce your stress to help you stay balanced during your pregnancy"

The emphasis on checking with the prescriber regarding divalproex sodium, commonly known as Depakote, is crucial for a young woman with bipolar disorder who is planning to start a family. Divalproex has well-documented risks associated with its use during pregnancy, particularly in relation to potential birth defects and developmental issues for the fetus. The first trimester is especially critical, as this is when the developing fetus is most vulnerable to teratogenic effects from medications. Healthcare providers typically advise women of childbearing age who are taking divalproex to consider alternative treatment options prior to conception and throughout pregnancy due to these risks. This involves an open discussion with the prescriber about the benefits and risks of continuing the medication, and potentially exploring safer alternatives that would manage mood symptoms without posing significant risks to the fetus. Regular gynecological exams and focusing on a healthy diet are important aspects of preconception care but do not specifically address the critical concerns regarding medication safety during pregnancy. Stress management is also vital for overall health, particularly for someone with bipolar disorder, but it is not as urgent as addressing the risks related to medication use. Thus, ensuring that the woman is informed about the increased risk for birth defects while on divalproex and checking

5. Which response from a nurse helps a client feel secure when displaying signs of paranoia during a manic episode?

- A. "You should not feel that way."
- B. "It's normal to have those feelings."
- C. "I am here to protect you."**
- D. "It's just your mood swings."

The response "I am here to protect you" is particularly effective in helping a client who is experiencing paranoia during a manic episode feel secure. When a person is showing signs of paranoia, they often feel threatened and may become anxious about their safety and trust in those around them. By asserting the nurse's role as a protector, the client can experience reassurance and a sense of safety, which is crucial during such a distressing time. This supportive statement can help to create a therapeutic alliance, as it directly addresses the client's need for safety and support without dismissing their feelings. It can also help to mitigate feelings of isolation that often accompany paranoia, reassuring the client that they are not alone in their experience and that there is someone who understands their anxiety. In contrast, the other responses do not effectively validate the client's feelings or provide the necessary reassurance. Telling the client that they should not feel that way can invalidate their experience and potentially escalate their paranoia. Suggesting that it is normal to have those feelings may minimize their distress without offering concrete support. Lastly, attributing the symptoms to mood swings may dismiss the seriousness of the client's experience and fail to provide the needed reassurance and protective stance.

6. What is the most appropriate initial outcome for a client exhibiting psychomotor retardation and withdrawal?

- A. The client will initiate interactions with peers
- B. The client will participate in milieu activities
- C. The client will discuss adaptive coping techniques
- D. The client will interact with the nurse**

Choosing to focus on the client interacting with the nurse as the most appropriate initial outcome aligns with best practices in addressing symptoms such as psychomotor retardation and withdrawal. When a client exhibits these symptoms, they are often experiencing significant social withdrawal and might struggle with initiating interactions. Establishing a connection with a healthcare professional can be a foundational step in re-engaging the client in their care. By aiming for interaction with the nurse, the client is provided with a safe and supportive environment where communication can be gently encouraged. This interaction serves as a preliminary goal that helps in building rapport and trust, which is crucial for the client's recovery process. Once this basic interaction is established, it becomes easier to introduce further social opportunities and activities, such as interacting with peers or participating in group activities. The other options, while beneficial, may be too ambitious as initial goals. For instance, initiating interactions with peers or participating in more structured milieu activities might overwhelm a client who is already struggling with basic engagement. Discussing adaptive coping techniques also generally requires a baseline level of trust and communication, which may not yet be present. Thus, enhancing the client's direct interaction with the nurse is a more suitable starting point to facilitate further engagement and support their overall recovery journey.

7. How should a nurse encourage a severely depressed client who has not eaten for two days to eat?

- A. Serve the meal trays in the client's room.
- B. Sit with the client and spoon-feed if required.**
- C. Call the family to bring food from home.
- D. Explain the importance of nutrition in recovery.

The most appropriate approach in this situation is to sit with the client and spoon-feed if required. This method serves multiple purposes in the context of caring for a severely depressed individual. Firstly, it provides direct support and demonstrates to the client that they are not alone in this challenging time. The presence of the nurse can foster a sense of security and comfort, which can be incredibly beneficial for someone struggling with severe depression. This level of engagement can also help to reduce feelings of overwhelming distress that might accompany eating, as it can be difficult for a depressed person to initiate actions such as preparing or consuming food. Additionally, spoon-feeding can assist in ensuring that the client actually consumes some nutrition, which is vital for both physical health and mental well-being. For individuals in the depths of depression, the motivation to eat may be extremely low, and having a supportive figure help with this basic self-care can even create a routine and introduce structure. This option acknowledges the severity of the client's condition and provides an empathetic, hands-on approach that is more likely to lead to positive outcomes compared to simply serving meal trays or explaining the importance of nutrition, which might not resonate with someone who is currently struggling to engage in everyday activities.

8. What symptom should a nurse be alert for in a client experiencing anticholinergic effects while on a tricyclic antidepressant?

- A. Tremors and cardiac arrhythmias
- B. Sedation and delirium
- C. Respiratory depression and convulsions
- D. Urine retention and blurred vision**

A client experiencing anticholinergic effects from a tricyclic antidepressant may exhibit symptoms such as urine retention and blurred vision. Anticholinergic effects are common side effects of tricyclic antidepressants due to their mechanism of action, which includes blocking acetylcholine neurotransmitter activity. This blocking can lead to decreased activity of the bladder, causing urinary retention, as well as affecting the muscles in the eyes, resulting in blurred vision due to difficulty focusing. Understanding these symptoms is essential for monitoring the client and addressing any potential complications that may arise from these effects. Recognizing and managing anticholinergic effects can greatly enhance patient safety and comfort during treatment with tricyclic antidepressants.

9. What should the nurse inform a client with major depressive disorder regarding medication continuation?

- A. You may be able to stop your medication after three months.
- B. You will need to remain on antidepressants indefinitely.
- C. There is a 70% chance of a third episode after two significant episodes.**
- D. You can manage depression with a healthy lifestyle alone.

The statement indicating a 70% chance of experiencing a third episode after having two significant depressive episodes is particularly significant for clients with major depressive disorder. Research has found that individuals who have experienced multiple episodes of depression are at a higher risk for future episodes. This statistic emphasizes the chronic nature of depression and the importance of ongoing management, which may include medication. Understanding this risk helps clients grasp the need for continued treatment and monitoring even after symptoms improve. It highlights the reality that major depressive disorder can be a recurrent condition, making it essential to adhere to prescribed treatments. The other statements do not accurately reflect best practices regarding the long-term management of major depressive disorder. While some individuals may need to continue their medication for an extended period, usually referring to individualized treatment plans, it is not universally true that they must stay on antidepressants indefinitely or that lifestyle modifications alone are sufficient for managing their condition. Furthermore, stopping medication after just three months may not be appropriate, as many individuals may require a longer duration of treatment before considering discontinuation.

10. Which of the following activities should a nurse recommend for a client with acute mania?

- A. Scheduled rest periods**
- B. Watching television
- C. Aerobic exercises
- D. Relaxation exercises

Recommending scheduled rest periods for a client experiencing acute mania is essential for managing their condition effectively. Acute mania often leads to increased energy levels, racing thoughts, and impulsivity, which can make it difficult for the individual to focus or calm down. Scheduled rest periods provide structured downtime that can help the individual stabilize their mood and reduce the risk of overstimulation. Introducing structured rest helps the client regain some control over their energy levels and allows mental and physical respite. This practice is crucial in a manic episode as it supports the overall treatment plan, including medication management, psychotherapy, and safety interventions. Rest and sleep are fundamental for recovery and can significantly aid in mood stabilization. Active engagement in activities like watching television, aerobic exercises, or relaxation exercises could be too stimulating or distracting for someone in a manic state. While some movement and relaxation can be beneficial in different contexts, during acute mania, prioritizing rest and gradually reintroducing other activities as the client stabilizes is typically the best approach.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

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We wish you the very best on your exam journey. You've got this!

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