

# Mental Health Nursing Psychosis Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

**This is a sample study guide. To access the full version with hundreds of questions,**

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**SAMPLE**

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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. Don't worry about getting everything right, 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, and take breaks to retain information better.**

## **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.**

## **7. Use Other Tools**

**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!**

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## **Questions**

- 1. What is the most therapeutic response by the nurse when a client demonstrates sudden emotional outbursts?**
  - A. Ignoring the behavior to prevent reinforcement**
  - B. Calling for assistance immediately**
  - C. Walking to the end of the hallway where the client is standing**
  - D. Offering reassurance from a distance**
- 2. What characterizes delusions of persecution in psychotic disorders?**
  - A. Believing one is a powerful figure**
  - B. Assuming others are plotting harm**
  - C. Experiencing auditory hallucinations**
  - D. Expressing feelings of grandiosity**
- 3. If a client with schizophrenia refuses to take a shower, what should the nurse's intervention be?**
  - A. Allow the client to go without bathing**
  - B. Encourage group participation**
  - C. Provide a gentle basin wash for face and hands**
  - D. Force the client into the shower**
- 4. A client with schizophrenia mentions, "My legs are turning to rubber because I have an incurable disease." What symptom does this statement illustrate?**
  - A. Hallucination**
  - B. Delusional thinking**
  - C. Depersonalization**
  - D. Thought disorder**
- 5. What is a key approach for the nurse in managing hallucinations in a client?**
  - A. Encouraging the client to confront the hallucinations.**
  - B. Suggesting the use of relaxation techniques.**
  - C. Providing a competing stimulus that is stronger than the hallucinations.**
  - D. Offering medications only to manage severe episodes.**



- 6. Which class of drugs is most likely to be prescribed for anxiety disorders?**
- A. Antidepressants**
  - B. Antipsychotics**
  - C. Stimulants**
  - D. Antidepressants and anxiolytics**
- 7. Which neurotransmitter is primarily targeted by medications used to treat schizophrenia?**
- A. Serotonin**
  - B. Dopamine**
  - C. Norepinephrine**
  - D. Gamma-aminobutyric acid (GABA)**
- 8. What is the most important aspect of initial care for a client diagnosed with paranoid schizophrenia?**
- A. Providing a nonthreatening environment**
  - B. Offering medication immediately**
  - C. Encouraging group therapy participation**
  - D. Establishing a daily routine**
- 9. Which condition could be compromised in a client with prostatic hypertrophy taking antipsychotic medication?**
- A. Urinary retention**
  - B. Kidney stones**
  - C. Frequent urination**
  - D. Incontinence**
- 10. What could be a reason for a client's aggressive behavior in response to the nurse's presence?**
- A. The client feels insulted.**
  - B. The client feels confined or threatened.**
  - C. The client is experiencing severe paranoia.**
  - D. The client desires attention.**

## **Answers**

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

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## **Explanations**

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**1. What is the most therapeutic response by the nurse when a client demonstrates sudden emotional outbursts?**

- A. Ignoring the behavior to prevent reinforcement**
- B. Calling for assistance immediately**
- C. Walking to the end of the hallway where the client is standing**
- D. Offering reassurance from a distance**

When a client demonstrates sudden emotional outbursts, the most therapeutic response is to walk to the end of the hallway where the client is standing. This approach signifies the nurse's willingness to engage and assess the situation while maintaining a safe distance initially, allowing the client space while still being present. By moving closer to the client, the nurse demonstrates attentiveness and concern, which can help establish a connection and provide comfort. This response allows for non-verbal communication, such as body language and facial expressions, which can be calming. It also signals to the client that they are not alone and that the nurse is available to support them when they are ready. This presence can help de-escalate the emotional outburst by providing a sense of safety and validation, which is essential in therapeutic relationships. The options that involve ignoring the behavior or calling for assistance immediately lack the direct engagement and support that can be crucial in managing emotional outbursts. Offering reassurance from a distance might not effectively address the immediate emotional needs of the client, as it may create a barrier rather than foster connection. Thus, approaching the client with an open and attentive demeanor is key to facilitating de-escalation and providing support in a therapeutic manner.

**2. What characterizes delusions of persecution in psychotic disorders?**

- A. Believing one is a powerful figure**
- B. Assuming others are plotting harm**
- C. Experiencing auditory hallucinations**
- D. Expressing feelings of grandiosity**

Delusions of persecution are characterized by the belief that others are conspiring or plotting to cause harm to the individual. This can manifest as a deep-seated fear or feeling of being targeted, which may lead individuals to interpret benign actions or events as threatening. The essence of this type of delusion lies in the conviction that one is under constant threat from external forces, whether they be people, organizations, or even entities that may not actually exist. This belief system can significantly influence a person's behavior and emotional state, leading to heightened anxiety, mistrust, and social withdrawal. The individual may develop elaborate narratives to support their feelings of being persecuted, which can further entrench their delusional thinking. While the other choices present different types of psychological phenomena, they do not align with the specific characteristics of delusions of persecution. Grandiosity pertains to beliefs about oneself being extraordinarily powerful or important, while auditory hallucinations involve hearing voices or sounds that are not present. Both of these aspects represent different forms of psychotic experiences but do not capture the essence of persecutory delusions.

**3. If a client with schizophrenia refuses to take a shower, what should the nurse's intervention be?**

- A. Allow the client to go without bathing**
- B. Encourage group participation**
- C. Provide a gentle basin wash for face and hands**
- D. Force the client into the shower**

The most appropriate intervention when a client with schizophrenia refuses to take a shower is to provide a gentle basin wash for the face and hands. This approach respects the client's autonomy while still promoting personal hygiene. It's important to recognize that individuals experiencing psychosis may struggle with various aspects of self-care due to their mental state, which can lead to aversion to bathing or personal hygiene tasks. By offering a basin wash, the nurse can help maintain the client's dignity and comfort, while also addressing hygiene needs in a less confrontational manner. This intervention can serve as a compromise; it allows for essential care without overwhelming the client. Additionally, it can be a step toward re-establishing routines and encouraging the client to engage in further self-care activities in the future. Other options focus on allowing refusal or more confrontational approaches that could heighten the client's anxiety or defensiveness. Encouraging group participation, while beneficial in some contexts, may not directly address immediate hygiene needs. Forcing the client into the shower could lead to increased resistance and trauma, which may exacerbate their condition. Overall, gentle and supportive methods that respect the client's current state are most effective in promoting their well-being.

**4. A client with schizophrenia mentions, "My legs are turning to rubber because I have an incurable disease." What symptom does this statement illustrate?**

- A. Hallucination**
- B. Delusional thinking**
- C. Depersonalization**
- D. Thought disorder**

The statement made by the client, "My legs are turning to rubber because I have an incurable disease," illustrates depersonalization. Depersonalization is a dissociative symptom where individuals feel detached from themselves or their bodies, often experiencing a sense of unreality regarding their physical form. In this case, the client's perception that their legs are turning to rubber suggests a disconnection from their bodily sensations, indicating a distorted experience of their physical state. This symptom can arise in various psychiatric conditions, including schizophrenia, and reflects an individual's struggle to reconcile reality with their internal experiences. The mention of an "incurable disease" may contribute to feelings of hopelessness or despair, further exacerbating the sensation of detachment from the body. Understanding depersonalization is crucial in mental health nursing, as it can have significant implications for a client's overall well-being and requires targeted therapeutic interventions to address the underlying issues. Recognizing such symptoms helps in providing compassionate and effective care.

5. What is a key approach for the nurse in managing hallucinations in a client?
- A. Encouraging the client to confront the hallucinations.
  - B. Suggesting the use of relaxation techniques.
  - C. Providing a competing stimulus that is stronger than the hallucinations.**
  - D. Offering medications only to manage severe episodes.

Providing a competing stimulus that is stronger than the hallucinations is a key approach in managing hallucinations for several reasons. Hallucinations can significantly impact a person's perception of reality and daily functioning, and giving the client an alternative focal point can help diminish the intensity and clarity of these experiences. By introducing a strong competing stimulus—such as music, conversation, or engaging activities—a nurse can redirect the client's attention away from the distressing hallucinations. This method does not dismiss or minimize the client's experiences but rather acknowledges them while facilitating an environment where the focus can shift. Engaging the client through meaningful interactions can also help improve their sense of agency and connect them back to reality. This approach is often more effective than simply encouraging clients to confront their hallucinations or relying solely on medication, which addresses symptoms but may not offer skills for coping in the moment. Relaxation techniques can also be beneficial but are generally more about reducing anxiety rather than directly competing with the intensity of hallucinations themselves.

6. Which class of drugs is most likely to be prescribed for anxiety disorders?
- A. Antidepressants
  - B. Antipsychotics
  - C. Stimulants
  - D. Antidepressants and anxiolytics**

The most likely class of drugs prescribed for anxiety disorders includes both antidepressants and anxiolytics, making the selection correct. Antidepressants, particularly selective serotonin reuptake inhibitors (SSRIs), are commonly used to treat various anxiety disorders due to their efficacy in increasing serotonin levels in the brain, which can help alleviate symptoms of anxiety. They are often considered a first-line treatment for generalized anxiety disorder, panic disorder, and social anxiety disorder. Anxiolytics, such as benzodiazepines, are another class of medications specifically designed to relieve anxiety. They work by enhancing the effect of the neurotransmitter gamma-aminobutyric acid (GABA) in the brain, leading to a calming effect. While they can be effective for short-term relief of acute anxiety symptoms, they are usually prescribed with caution due to the potential for dependence. In contrast, antipsychotics are typically prescribed for conditions such as schizophrenia and bipolar disorder, rather than anxiety disorders. Stimulants are primarily used to treat attention deficit hyperactivity disorder (ADHD) and are not indicated for managing anxiety. Therefore, the combination of antidepressants and anxiolytics is the most comprehensive approach to treating anxiety disorders, making this option the best choice.

**7. Which neurotransmitter is primarily targeted by medications used to treat schizophrenia?**

- A. Serotonin**
- B. Dopamine**
- C. Norepinephrine**
- D. Gamma-aminobutyric acid (GABA)**

Medications used to treat schizophrenia primarily target dopamine. This is crucial because schizophrenia is believed to be associated with an imbalance in dopamine levels in certain areas of the brain. The dopamine hypothesis suggests that an overactivity of dopaminergic pathways, particularly in the mesolimbic pathway, contributes to the positive symptoms of schizophrenia, such as hallucinations and delusions. Antipsychotic medications, which form the backbone of schizophrenia treatment, are designed to reduce dopamine activity, thereby alleviating these symptoms. They do this primarily by blocking dopamine receptors, especially the D2 subtype, which is particularly relevant in the treatment of acute psychotic episodes and other schizophrenia-related symptoms. Other neurotransmitters mentioned, such as serotonin, norepinephrine, and GABA, play different roles in mood regulation and anxiety but are not the primary focus in the pharmacological treatment of schizophrenia. While some atypical antipsychotics do also affect serotonin pathways, the primary mechanism in treating schizophrenia focuses on dopamine modulation.

**8. What is the most important aspect of initial care for a client diagnosed with paranoid schizophrenia?**

- A. Providing a nonthreatening environment**
- B. Offering medication immediately**
- C. Encouraging group therapy participation**
- D. Establishing a daily routine**

Providing a nonthreatening environment is crucial when caring for a client diagnosed with paranoid schizophrenia. Individuals with this condition often experience intense feelings of suspicion, mistrust, and fear. Therefore, creating a space where they feel safe and secure can significantly help in reducing anxiety and promoting trust between the client and the caregiver. A nonthreatening environment includes factors such as calm interactions, clear communication, and consistent routines, which can help the client feel more at ease. This supportive setting allows the healthcare provider to build rapport, making it easier for the client to express their thoughts and feelings without fear of judgment or misunderstanding. While medication is an important part of treatment, it is not always the first step in initial care. Offering medication immediately may not address the person's immediate need for safety and reassurance, especially in those experiencing acute paranoia. Similarly, encouraging group therapy participation might not be suitable initially, as individuals may not be ready to engage with others while feeling threatened. Establishing a daily routine is valuable for overall stability but is secondary to ensuring that the individual feels secure in their environment. Creating a nonthreatening and trusted atmosphere sets the foundational stage for more comprehensive treatment approaches to follow.



**9. Which condition could be compromised in a client with prostatic hypertrophy taking antipsychotic medication?**

- A. Urinary retention**
- B. Kidney stones**
- C. Frequent urination**
- D. Incontinence**

Prostatic hypertrophy, or benign prostatic hyperplasia (BPH), often leads to urinary symptoms including difficulty initiating urination, weak urine flow, and increased urinary retention. In clients with this condition who are taking antipsychotic medications, the likelihood of urinary retention can be further exacerbated due to the anticholinergic effects of some antipsychotic drugs. These medications can interfere with normal bladder function by reducing detrusor muscle contractility, leading to an increased risk of urinary retention in individuals already predisposed to urinary obstruction from an enlarged prostate. This interaction highlights the importance of monitoring urinary function in clients prescribed antipsychotics, especially those with existing prostatic conditions, to mitigate any potential complications that may arise from both the underlying issue and the pharmacological treatment.

**10. What could be a reason for a client's aggressive behavior in response to the nurse's presence?**

- A. The client feels insulted.**
- B. The client feels confined or threatened.**
- C. The client is experiencing severe paranoia.**
- D. The client desires attention.**

A client's aggressive behavior in response to the nurse's presence can often be linked to feelings of being confined or threatened. This reaction is particularly common in individuals who may be experiencing psychotic episodes or heightened anxiety. When clients perceive their environment or the people within it as threatening, their fight-or-flight response may kick in, leading to aggression as a form of self-defense. In a healthcare setting, a client may feel trapped, especially if they are in a situation where they cannot leave or if their autonomy feels compromised. This perception can trigger an aggressive response as a way to regain a sense of control or safety. Understanding this dynamic is crucial for nurses and mental health professionals, as it emphasizes the importance of creating a therapeutic environment that promotes safety and trust, which may help de-escalate aggression and encourage cooperation. In contrast, while feeling insulted or seeking attention might lead to different behavioral responses, they are not as strongly associated with a defensive reaction as the feeling of confinement or threat. Severe paranoia could also lead to aggression, but it is part of a broader context of fear rather than a direct response to the nurse's physical presence.

## 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](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://mentalhealthnursingpsychosis.examzify.com>**

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