

SINGLE CHOICE

1. A boundary violation occurs in all of the following stations EXCEPT

- a) When a doctor accepts tickets to a football game
- b) When a doctor hugs a patient after a session
- c) When confidentiality is breached
- d) When a doctor's needs are gratified at the expense of the patient
- e) When a doctor has sexual relations with a former patient

2. A decline in IQ begins at approximately 10 to 15 years in which of the following disorders?

- a) Fragile X syndrome
- b) Down syndrome
- c) Cerebral pulse
- d) Nonspecific mental retardation
- e) Fetal alcoholic syndrome

3. A good test for memory is to ask patients

- a) What they had to eat for their last meal
- b) To subtract 7 from 100
- c) Their date of birth
- d) How many siblings they have
- e) Who is the president

4. A psychiatric patient who although coherent, never gets to the point has a disturbance in the form of thought called:

- a) Tangentiality
- b) Blocking
- c) Verbigeration
- d) Circumstantiality
- e) Word salad

5. A schizophrenic patient who states that he feels his brain burning is most likely experiencing a:

- a) Kinesthetic hallucinations
- b) Delusional feeling

- c) Gustatory hallucinations
- d) Haptic hallucinations
- e) Hypnopompic hallucinations

6. A young woman presents to you complaining of lack of energy, trouble sleeping, depression, and hopelessness that has been present for the past year. You diagnose her with major depressive disorder. Which of the following would have been Freud's explanation of this disorder?

- a) Her depression is actually internally directed anger.
- b) Her internal good object have been destroyed by aggression and greed.
- c) She never mastered the trust versus mistrust stage of ego development.
- d) She is being persecuted by a tormenting internal object.
- e) She feels despair that her self-object needs will not be met by others.

7. According to Freud, the Oedipus complex is resolved through:

- a) The castration complex
- b) The acting out of symbolic rivalries
- c) Moving on the genital stage of development
- d) The realization of one's gender identity
- e) Identification with the opposite-sex parent

8. After taking the Wechsler Adult Intelligence Scale (WAIS), a patient was found to have poor concentration and attention. Select the WAIS subtest that most likely screened the patient for these symptoms.

- a) Arithmetic
- b) Block design
- c) Comprehension
- d) Digit symbol
- e) Picture completion

9. Alexithymia is:

- a) An inability to describe or to be aware of emotions or mood
- b) An unpleasant mood
- c) A state in which a person is easily annoyed and provoked to anger
- d) A loss of interest in and withdrawal from pleasurable activities
- e) A normal range of mood, implying absence of depressed or elevated emotional state

10. All of the following are vegetative disturbances of depression except:

- a) Hypersexuality
- b) Anorexia
- c) Hypersomnia
- d) Insomnia
- e) Circadian dysregulation

11. All of the following are true statements about the course and prognoses of depression in children and adolescents EXCEPT:

- a) There is no increased risk of later developing bipolar disorder among adolescents with a major depressive episode compared with nondepressed teens
- b) Short-term complications include poor academic achievement
- c) Risk of suicide is significant among adolescents with major depressive disorder
- d) Depressive disorders are associated with long-term peer relationship difficulties
- e) Early onset predicts a poorer prognosis

12. All of the following chromosomal aberrations associated with Down syndrome lead to a phenotypic expression of the disorder except

- a) Patient have 45 chromosomes
- b) Patients have three copies of chromosome 21
- c) Patients have 47 chromosomes
- d) Patients have 46 chromosomes, but two, usually 15 and 21, are fussed
- e) Patients have mosaicism, with normal and trisomic cells in various tissues

13. All of the following mental disorders are frequently seen in patients with somatization disorder (relative to the general population) except

- a) Bipolar I disorder
- b) Generalized anxiety disorder
- c) Major depressive disorder
- d) Obsessive-compulsive personality disorder
- e) Schizophrenia

14. Alzheimer's dementia is:

- a) Associated with hypoactive levels of acetylcholine
- b) Associated with pathognomonic neurofibrillary tangles
- c) More common in men
- d) Linked to chromosome 7
- e) A clinical diagnosis

15. Among all known causes of mental retardation, which of the following syndromes is least associated with comorbid Axis I psychiatric disorder?

- a) Down syndrome
- b) Fragile X syndrome
- c) Nonspecific type
- d) Fetal alcohol syndrome
- e) Prader-Willi syndrome

16. An autonomous choice is:

- a) Made with the informed consent of the patient
- b) Made by the family of the patient
- c) Made by the patient after coercion
- d) Made by the patient who is confused
- e) None of the above

17. Anxiety disorders in elderly adults:

- a) Most commonly present as phobic disorder
- b) Are uncommon
- c) Most commonly present as panic disorder

- d) Are more common in men
- e) Increase in prevalence with increasing age

18. Asking a patient to interpret a proverb is used as a way of assessing:

- a) Abstract thinking
- b) Impulse control
- c) Insight
- d) Intelligence
- e) Judgment

19. Based on degree of severity reflecting level of intellectual impairment in Mild Mental Retardation the Level of IQ is:

- a) 50-55 up to 70
- b) 70-75 up to 80-85
- c) 35-40 up to 50-55
- d) 20-25 up to 35-40
- e) below 20-25

20. Based on degree of severity reflecting level of intellectual impairment in Moderate Mental Retardation the Level of IQ is:

- a) 35-40 up to 50-55
- b) 70-75 up to 80-85
- c) 50-55 up to 70
- d) 20-25 up to 35-40
- e) below 20-25

21. Based on degree of severity reflecting level of intellectual impairment in Severe Mental Retardation the Level of IQ is:

- a) 20-25 up to 35-40
- b) below 20-25
- c) 70-75 up to 80-85
- d) 50-55 up to 70
- e) 35-40 up to 50-55

22. Based on degree of severity reflecting level of intellectual impairment in Profound Mental Retardation the Level of IQ is:

- a) below 20-25
- b) 70-75 up to 80-85
- c) 50-55 up to 70
- d) 35-40 up to 50-55
- e) 20-25 up to 35-40

23. Behavioral syndromes associated with psychological disturbances and physical factors are:

- a) Eating disorders
- b) Psychomotor agitation
- c) Sexual dysfunction, caused by organic disorder or disease
- d) Tourette's syndrome
- e) All statements are correct

24. Behavioral syndromes associated with psychological disturbances and physical factors are:

- a) All statements are correct
- b) Eating disorders
- c) Nonorganic sleep disorders
- d) Sexual dysfunction, not caused by organic disorder or disease
- e) Abuse of non-dependence-producing substances

25. Cardiovascular effects of serotonin reuptake inhibitors:

- a) Are low
- b) Are higher than in tricyclic antidepressants
- c) Prevent from using in patients suffered from cardiovascular disease
- d) Nothing listed above is valid
- e) All listed above is valid

26. Catatonic schizophrenia:

- a) has a sudden onset under the form of excitation or catatonic stupor
- b) access starts with prodrome and aura
- c) occurs due to frequent cerebral-vascular accidents
- d) leads to death within 5-10 years
- e) is a malignant form of schizophrenia

27. Characteristic signs of conversion disorder include all of the following EXCEPT:

- a) Cogwheel rigidity
- b) Astasia-Abasia
- c) Hemianesthesia of the body beginning precisely at the midline
- d) Normal reflexes
- e) Stocking-and-glove anesthesia

28. Childhood schizophrenia

- a) Tend to have a chronic course
- b) Tend to have a better prognosis than adult schizophrenia
- c) Is not diagnosed using the same symptoms as are used for adult schizophrenia
- d) Tend to have an abrupt onset
- e) All of the above

29. Compulsive/purgative type of eating in anorexia nervosa includes:

- a) all the affirmations are correct
- b) abuse of diuretics
- c) abuse of laxatives and enemas.
- d) self-inflicted vomiting
- e) in the current episode of anorexia nervosa a person repeatedly engages in compulsive/purgative behavior

30. Concern for details, rules, lists, order, organization or planning, perfectionism are characteristic of personality disorder:

- a) Anancastic
- b) Dependence
- c) Histrionic
- d) Dissocial
- e) Emotionally unstable (borderline)

31. Conversion disorder

- a) Is associated with antisocial personality disorder
- b) Usually has a chronic course

- c) Is commonly comorbid with a schizoid personality disorder
- d) Responds well to a confrontation of the "false nature" of the symptoms
- e) Is associated with symptoms that conform to known anatomical pathways

32. Creutzfeldt-Jakob disease is characterized by:

- a) All of the above
- b) Postmortem definitive diagnosis
- c) Diffuse, symmetric, rhythmic slow waves and sharp spikes in EEG
- d) Myoclonus
- e) Rapid deterioration

33. Definition of Aborted suicide attempt is:

- a) Potentially self-injurious behavior with evidence (either explicit or implicit) that the person intended to die but stopped the attempt before physical damage occurred.
- b) Self-injurious behavior with a nonfatal outcome accompanied by evidence (either explicit or implicit) that the person intended to die.
- c) Self-inflicted death with evidence (either explicit or implicit) that the person intended to die.
- d) Phenomenon when patients injure themselves by self-mutilation (e.g., cutting the skin) but usually do not wish to die.
- e) Subjective expectation and desire to end one's life.

34. Definition of neurotic disorders:

- a) functional disorders that do not involve organic brain changes and states of psychosis
- b) a state of mental undevelopment
- c) a stable change of personality
- d) a stable intellectual disorder of memory, critical sense
- e) a serious disorder of attention

35. Definition of Parasuicidality is:

- a) Phenomenon when patients injure themselves by self-mutilation (e.g., cutting the skin) but usually do not wish to die
- b) Self-injurious behavior with a nonfatal outcome accompanied by

evidence (either explicit or implicit) that the person intended to die.

c) Self-inflicted death with evidence (either explicit or implicit) that the person intended to die.

d) Potentially self-injurious behavior with evidence (either explicit or implicit) that the person intended to die but stopped the attempt before physical damage occurred.

e) Subjective expectation and desire to end one's life.

36. Definition of Suicidal intent is:

a) Subjective expectation and desire to end one's life.

b) Phenomenon when patients injure themselves by self-mutilation (e.g., cutting the skin) but usually do not wish to die.

c) Potentially self-injurious behavior with evidence (either explicit or implicit) that the person intended to die but stopped the attempt before physical damage occurred.

d) Self-inflicted death with evidence (either explicit or implicit) that the person intended to die.

e) Self-injurious behavior with a nonfatal outcome accompanied by evidence (either explicit or implicit) that the person intended to die.

37. Definition of Suicide attempt is:

a) Self-injurious behavior with a nonfatal outcome accompanied by evidence (either explicit or implicit) that the person intended to die.

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e) Subjective expectation and desire to end one's life.

38. Definition of Suicide is:

a) Self-inflicted death with evidence (either explicit or implicit) that the person intended to die.

b) Self-injurious behavior with a nonfatal outcome accompanied by evidence (either explicit or implicit) that the person intended to die.

c) Potentially self-injurious behavior with evidence (either explicit or implicit) that the person intended to die but stopped the attempt before physical damage occurred.

d) Phenomenon when patients injure themselves by self-mutilation (e.g., cutting the skin) but usually do not wish to die.

e) Subjective expectation and desire to end one's life.

39. Dementia in Pick's disease is manifested by:

a) paraphasia

b) obsession

c) logorrhea

d) contrafabulation

e) somatostatin

40. Dementia is:

a) All listed above is valid

b) Acquired disorder of intellect

c) Originated from organic disorder of CNS

d) Disorder leading to change of personality

e) Remediable in some subjects

41. Dementia of the Alzheimer's type accounts for what percentages of old age dementias?

a) 60 percent

b) 80 percent

c) 30 percent

d) 20 percent

e) 10 percent

42. Diagnostic criteria -A- according to DSM IV-TR, in Childhood Disintegrative Disorder, should include:

a) Apparently normal development for at least the first 2 years after birth or manifested by the presence of age-appropriate verbal and nonverbal communication, social relationships, play, and adaptive behavior.

b) Qualitative impairment in social interaction (e.g., impairment in nonverbal behaviors, failure to develop peer relationships, lack of

social or emotional reciprocity) at list for 4 years

c) Qualitative impairments in communication (e.g., delay or lack of spoken language. inability to initiate or sustain a conversation. stereotyped and repetitive use of language, lack of varied make-believe play) at list for 4 years

d) Restrictive, repetitive, and stereotyped patterns of behavior, interests, and activities, including motor stereotypes and mannerisms at list for 4 years

e) Deceleration of head growth between ages 5 and 48 months

43. Diagnostic criteria -A- according to DSM IV-TR, in Cyclothymic Disorder, should include:

a) For at least 2 years, the presence of numerous periods with hypomanic symptoms and numerous periods with depressive symptoms that do not meet criteria for a major depressive episode

b) Feelings of hopelessness as indicated either by subjective account or observation by others, for at least a month.

c) Insomnia or hypersomnia nearly every day

d) Low energy or fatigue as indicated either by subjective account or observation by others, for at least a month.

e) Delusional thoughts of guilt as indicated either by subjective account or observation by others, for at least 2 weeks.

44. Diagnostic criteria -A- according to DSM IV-TR, in Dysthymic Disorder, should include:

a) Depressed mood for most of the day, for more days than not, as indicated either by subjective account or observation by others, for at least 2 years.

b) Feelings of hopelessness as indicated either by subjective account or observation by others, for at least a month.

c) Low energy or fatigue as indicated either by subjective account or observation by others, for at least a month.

d) Delusional thoughts of guilt as indicated either by subjective account or observation by others, for at least 2 years.

e) Fatigue or loss of energy nearly every day

45. Diagnostic criteria -A- according to DSM IV-TR, in

Generalized Anxiety Disorder, should include the following:

a) Excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).

b) The anxiety, worry, or physical symptoms don't cause clinically significant distress or impairment in social occupational, or other important areas of functioning.

c) Marked and persistent fear that is excessive or unreasonable cued by the presence or anticipation of a specific object or situation (e.g., flying, heights, animals, receiving an injection, seeing blood).

d) A marked and persistent fear of one or more social or performance situations in which the person is exposed to unfamiliar people or to possible scrutiny by others. The individual fears that he or she will act in a way (or show anxiety symptoms) that will be humiliating or embarrassing.

e) The person experiences massive anxiety when exposed to the feared object and tries to avoid it at all costs.

46. Diagnostic criteria -A- according to DSM IV-TR, in Major Depressive Episode, should include at least one of the following:

a) Depressed mood

b) Insomnia or hypersomnia nearly once in a week

c) Fatigue or loss of energy nearly once in a week

d) Delusional thoughts of guilt

e) Psychomotor agitation

47. Diagnostic criteria -A- according to DSM IV-TR, in Major Depressive Episode, should include at least one of the following:

a) Loss of interest or pleasure

b) Insomnia or hypersomnia nearly once in a week

c) Fatigue or loss of energy nearly once in a week

d) Delusional thoughts of guilt

e) Psychomotor agitation

48. Diagnostic criteria -A- according to DSM IV-TR, in Manic Episode, should include at list one of the following:

a) A distinct period of abnormally and persistently elevated,

expansive, or irritable mood, lasting at least 1 week (or any duration if hospitalization is necessary).

- b)** Inflated self-esteem or grandiosity that lasts at least a week
- c)** Delusional grandiose thoughts that lasts at least a week
- d)** Twilight condition that lasts at least a month
- e)** Weight loss, anorexia.

49. Diagnostic criteria -A- according to DSM IV-TR, in Mental Retardation, should include:

- a)** Significantly subaverage intellectual functioning: An IQ of approximately 70 or below on an individually administered IQ test (for infants, a clinical judgment of significantly subaverage intellectual functioning).
- b)** Concurrent deficits or impairments are not present.
- c)** The onset is before age 18 years.
- d)** Delusions and bizarre behavior with an onset prior to 3 years.
- e)** Poor social adaptation and poor learning skills after age 18 years.

50. Diagnostic criteria according to DSM IV-TR, in Posttraumatic stress disorder, should NOT include the following:

- a)** Patient persistently try to find the associated to trauma stimuli, thus filling a relief that they badly need.
- b)** The traumatic event is persistently re-experienced (recurrent and intrusive distressing recollections of the event, including images, thoughts, or perceptions, recurrent distressing dreams of the event etc.) with duration more than 1 month.
- c)** The person's response to trauma, in children, may be expressed by disorganized or agitated behavior.
- d)** The person's response to trauma involved intense fear, helplessness, or horror.
- e)** The person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others

51. Diagnostic criteria for bulimia nervosa in DSM-IV is:

- a)** All affirmations are correct
- b)** Concerns regarding own body shape and weight

c) Inappropriate compensatory behavior designed to prevent weight gain

- d)** Feeling lack of control over excessive eating episodes
- e)** Eating in certain period of time a quantity of food greater than that which would eat one other person in the same time and in similar conditions, compulsive eating.

52. Does not belong to manifestation of manic syndrome:

- a)** Disorders of consciousness
- b)** Elevation of mood
- c)** Overactivity
- d)** Aggressivity
- e)** Insomnia

53. Double agency conflicts arise when psychiatrists have responsibility to whom?

- a)** The patient and the agent who hired them
- b)** The hospital staff and the patient
- c)** The patient and his or her family members
- d)** The parent and the adolescent patient
- e)** None of the above

54. Elderly persons taking antipsychotics are especially susceptible to the following side effects EXCEPT:

- a)** Paresthesias
- b)** Akatisia
- c)** Dry mouth
- d)** Tardive dyskinesia
- e)** A toxic confusional state

55. Erikson differs from Freud by his placing greater emphasis on:

- a)** Cultural factors in development
- b)** Interpersonal relationships
- c)** Instinctual drives
- d)** Psychosexual development
- e)** Object relations

56. Features of anhedonia may include all of the following EXCEPT:

- a) Difficulty describing or being aware of emotions
- b) Derealization
- c) Inability to experience normal emotions
- d) Loss of pleasure
- e) Withdrawal from interests

57. Features weighing toward a good prognosis in schizophrenia include all of the following EXCEPT:

- a) Undifferentiated or disorganized features
- b) An undulating course
- c) Paranoid features
- d) A family history of mood disorders
- e) Depression

58. For the emotional instability type of personality disorder, borderline subtype, the following symptoms are characteristic, with the EXCEPTION of:

- a) Exaggerated attention paid to physical attractiveness.
- b) Perception of the self, goals and internal preferences (including sexual) usually are not clear and troubled
- c) The feeling of internal emptiness is constant.
- d) A tendency to get involved into intense and instable relationships, that might cause repetitive emotional crisis.
- e) Excessive effort to prevent the abandon, and a series of self-harming actions and suicide attempts.

59. For the general population, an intelligence quotient (IQ) of 100 corresponds to intellectual ability in the:

- a) 50th percentile
- b) 65th percentile
- c) 40th percentile
- d) 25th percentile
- e) 20th percentile

60. Generalized anxiety disorder

- a) Has above a 50 percent chance of a recurrence after recovery
- b) Has a low prevalence in primary care settings
- c) Is a mild condition
- d) Has a female-to-male ratio of 1:2
- e) Is least likely to coexist with another mental disorder

61. H2 receptor antagonist nizatidine (Axid) is efficacious as a secondary prevention strategy for associated weight gain in which one of the following antipsychotic drugs?

- a) Olanzapine (Zyprexa)
- b) Quetiapine (Seroquel)
- c) Risperidon (Risperdal)
- d) Clozapine (Clozaril)
- e) Ziprasidone (Geodon)

62. Hallucinations that are commonly seen in alcoholic hallucinosis:

- a) Visual
- b) Tactile
- c) Olfactory
- d) Auditory
- e) Gustative

63. Hormones mostly involved in sleep structure are:

- a) All answers are correct
- b) Corticotropin hormone, prolactin, antidiuretic hormone, melatonin
- c) Gonadotropins, thyroid hormones
- d) Growth hormone
- e) Somatostatin

64. How long does the acute reaction to stress last:

- a) from several hours to several days
- b) 6-8 months
- c) 2-3 months
- d) 5-20 minutes

e) several seconds

65. Huntington's disease:

- a) Is associated with caudate atrophy and characteristic "boxcar" ventricles symptoms
 - b) Is linked to the long arm of chromosome 4
 - c) Is not usually associated with emotional symptoms
 - d) Shows striatal hypermetabolism on positron emission tomography (PET)
 - e) Affects men only
-

66. Hypobulia is disorder of:

- a) Volition
 - b) Sexual instinct
 - c) Personality
 - d) Emotivity
 - e) Nothing listed above is valid
-

67. Illusions are most frequently observed at:

- a) Delirium
 - b) Autistic thinking
 - c) Dissociative disorders
 - d) Nothing listed above is valid
 - e) All listed above is valid
-

68. In general, pooled studies show concordance rates for schizophrenia in monozygotic twins of:

- a) 50 percent
 - b) 40 percent
 - c) 25 percent
 - d) 5 percent
 - e) 0,1 percent
-

69. In terms of pharmacokinetics, compared with adults, children have:

- a) None of the above
- b) Increased half-lives of medications

- c) More fatty tissue
 - d) Lower glomerular filtration rates
 - e) Lower hepatic capacity
-

70. In the treatment of separation anxiety disorder in children, will be given priority to:

- a) mother-child psychotherapy
 - b) tranquilizers
 - c) isolation of baby from his mother
 - d) neuroleptics
 - e) antidepressants
-

71. In the Wechsler Adult Intelligence Scale (WAIS):

- a) digit span is a subtest of the verbal component of the test
 - b) Its latest revision is designed for persons ages 16 to 60
 - c) Mental retardation corresponds to the lowest 1 % of the population
 - d) The average range of IQ is 100 to 120
 - e) The verbal scale is more sensitive to normal aging
-

72. In vascular dementia is prevalent:

- a) amnesic disturbances
 - b) behavioral disturbances
 - c) disturbances of thought
 - d) emotional disturbances
 - e) abuse of diuretics
-

73. In which disorder or syndrome does head growth begin to decelerate between the ages of 6 months and 1 year?

- a) Rett syndrome
 - b) Fragile X syndrome
 - c) Autistic disorder
 - d) Learning disorder
 - e) Asperger's disorder
-

74. Incorrect compensatory behavior, that is recurrent and aimed to prevent body weight growth in bulimia nervosa includes:

- a) All the statements are correct
 - b) Excess of physical exercise
 - c) Diet regimen
 - d) Excessive use of laxatives, diuretic or other medications
 - e) Provoked vomiting
-

75. It belongs to hallucinogens:

- a) Psylocibine
 - b) Flunitrazepam
 - c) Chlorprothixene
 - d) Carbamazepine
 - e) Nothing listed above is valid
-

76. It does not belong to atypical antipsychotics:

- a) Sertraline
 - b) Risperidone
 - c) Clozapine
 - d) Sulpiride
 - e) Olanzapine
-

77. It does not belong to inhibitors of monoaminoxidase:

- a) Alprazolam
 - b) Selegiline
 - c) Moclobemide
 - d) Nialamide
 - e) All listed above is valid
-

78. It does not belong to negative schizophrenic symptoms:

- a) Hallucinatory voices
 - b) Autism
 - c) Abulia
 - d) Affective flattening
 - e) Alogia
-

79. It does not belong to standard symptoms of simple schizophrenia:

- a) Hallucinations

- b) Affective flattening
 - c) Hypobulia
 - d) Loss of interests
 - e) All listed above is valid
-

80. Medical disorders to be considered in a differential diagnosis of somatization disorder include:

- a) All of the above
 - b) Hyperparathyroidism
 - c) Acute intermittent porphyria
 - d) Systemic lupus erythematosus
 - e) Multiple sclerosis
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81. Mild, nonpsychotic depression with predominant anxiety is called:

- a) Dysthymia
 - b) Anxiety disorder
 - c) Chronic depression
 - d) Bipolar disorder
 - e) Endogenomorphic depression
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82. Neuroleptic-induced movement disorders include which of the following movement disorders?

- a) All of the above
 - b) Tardive dyskinesia
 - c) Akathisia
 - d) Neuroleptic malignant syndrome
 - e) Acute dystonia
-

83. Neurological soft signs include all of the following EXCEPT

- a) Learning disabilities
 - b) Contralateral overflow movements
 - c) Asymmetry of gain
 - d) Nystagmus
 - e) Poor balance
-

84. Neurological-biochemical abnormalities associated with

autistic disorder include

- a) All of the above
- b) Increased total brain volume
- c) Electroencephalogram (EEG) abnormalities
- d) Ventricular enlargement on computed tomography (CT) scan
- e) Grand mal seizures

85. Neuropsychological referrals are made for:

- a) All of the above
- b) Planning for rehabilitation
- c) Ascertaining brain impairment
- d) Diagnostic purposes
- e) Establishing a baseline of performance

86. New psychiatry conception prefers:

- a) Integration of biological, psychological and social factors in the development of mental disorders
- b) Nothing listed above is valid
- c) Social factors in the development of mental disorders
- d) Psychological factors in the development of mental disorders
- e) Biological factors in the development of mental disorders

87. Norepinephrine biosynthesis proceeded from:

- a) Tyrosine
- b) Phenylalanine
- c) Tryptophan
- d) Insulin
- e) All listed above is valid

88. Of the following diagnostic laboratory tests used in evaluation of children presenting with psychiatric problems, the one most likely to impact ultimate diagnosis is:

- a) Chromosomal analysis
- b) Positron emission tomography (PET)
- c) Magnetic resonance imaging (MRI)
- d) Thyroid function test
- e) Computer tomography (CT)

89. One of the Diagnostic criteria according to DSM IV-TR, for Autistic Disorder include:

- a) Delays or abnormal functioning in at least one of the following areas, with onset prior to age 3 years: (1) social interaction, (2) language as used in social communication, or (3) symbolic at imaginative play
- b) Presence of delusions and hallucinations till age 3 years
- c) Grand mal seizures, with highly unresponsive seizures
- d) Very high level of intellect, with an IQ more the 120
- e) Delays or abnormal functioning in at least one of the following areas, with onset after 3 years of age: (1) social interaction, (2) mimic as used in social communication, or (3) can't understand stories.

90. Panic attack usually reaches its maximum intensity within approximately:

- a) 10 minutes
- b) 24 hours
- c) 12 hours
- d) 45 minutes
- e) 2 hours

91. Patients with which illness are most likely to have chromosomal abnormalities or mutations involving genes in neurodevelopmental pathways?

- a) Early-onset schizophrenia
- b) Adult-onset bipolar disorder
- c) Obsessive-compulsive disorder
- d) Early-onset bipolar disorder
- e) Adult-onset schizophrenia

92. Physical anomalies with associated mental retardation include all of the following except

- a) Persistent Babinski reflex
- b) Flattened philtrum
- c) High-arched palate
- d) Low-set ears

e) Multiple hair whorls

93. Physiological activity associated with PTSD (posttraumatic stress disorder) include all EXCEPT:

- a) Increased circulating thyroxine
 - b) Increased blood pressure
 - c) Excessive sweating
 - d) Elevated baseline heart rate
 - e) Decreased parasympathetic tone
-

94. Predictors of poor prognosis in schizophrenia with childhood onset include all of the following EXCEPT

- a) Misdiagnosed schizophrenia in a child with bipolar I disorder
 - b) Delayed motor milestones and delayed language acquisition
 - c) Lack of family support
 - d) Premorbid diagnoses of ADHD and learning disorders
 - e) Onset before 10 years of age
-

95. Predisposing factors for alcoholism:

- a) Socio-psychological factors
 - b) Endogenous factors
 - c) Brain Trauma
 - d) Atherosclerosis
 - e) Infections
-

96. Psychomotor retardation is characterized by all of the following EXCEPT:

- a) Restlessness
 - b) Reduced speech amplitude and flow
 - c) Poor concentration
 - d) Paucity of spontaneous movement
 - e) Indecisiveness
-

97. Psychoneurosis includes all of the following disorders EXCEPT:

- a) Delusional disorder
- b) Dysthymia

c) Sexual dysfunction

d) Obsessive-compulsive disorder (OCD)

e) Anxiety disorder

98. Relative strengths of children with autism in psychological testing include which of the following?

- a) Block design and digit recall
 - b) Verbal concept formulation
 - c) Similarities and comprehension
 - d) Integration skills
 - e) Abstract reasoning
-

99. Rett syndrome

- a) None of the above
 - b) Shows no loss of social skills
 - c) Is associated with normal intelligence
 - d) Does not involve motor abnormalities
 - e) Is seen only in boy
-

100. Schizophrenia forms are:

- a) Hebephrenic
 - b) Melancholic
 - c) Ironic
 - d) Posttraumatic
 - e) Symptomatic
-

101. Separation and individuation

- a) Involve a "practicing" sub phase
 - b) Involve attaining a sense of object permanence
 - c) Have no associated anxiety
 - d) Begins at approximately 8 or 9 months of age
 - e) Is based on the work of Dan Stern
-

102. Separation anxiety in children include:

- a) Nocturnal nightmares with scenes of separation
- b) Transitory illusions
- c) Refusal to attend school

- d) Unwillingness to eat in solitude
- e) Fear of injury to the relatives

103. Sexual instinct may be attenuated by:

- a) All listed above is valid
- b) Nothing listed above is valid
- c) Gestagens
- d) Antiandrogens
- e) Antipsychotics

104. Suicide among schizophrenia patients

- a) Is approximately 10 percent
- b) Is most frequently secondary to command hallucinations
- c) Occur most often in the later years of the illness
- d) Is low
- e) Is approximately 40 percent

105. Sundowning:

- a) Is a result of overmedication
- b) Is associated with akathisia
- c) Is associated with stupor
- d) Occurs usually as a function of mania
- e) Usually occurs in young individuals

106. Symptoms that are present in Dementia in Parkinson disease:

- a) decline in thinking and reasoning that develops in someone diagnosed with Parkinson's disease at least a year earlier.
- b) apathy
- c) depression
- d) decline in thinking and reasoning that develops in someone diagnosed with Parkinson's disease at the onset of it.
- e) anxious states

107. Test of concentration include all of the following EXCEPT:

- a) Proverb interpretation
- b) Calculation

- c) Spelling ~word~ backward
- d) Repeating a series of random numbers
- e) Repeating three or four unrelated objects after 5 to 10 minutes

108. The core features of dementia with Lewy bodies include:

- a) Recurrent detailed visual hallucinations
- b) Disturbance of consciousness
- c) Cognitive decline caused by cerebrovascular disease
- d) Progressive language dysfunction
- e) Gradual changes in personality

109. The onset of childhood disintegrative disorder occurs during which age range?

- a) 3 to 4 years
- b) 1 to 2 years
- c) 2 to 3 years
- d) 4 to 5 years
- e) 5 to 6 years

110. The psychiatric history:

- a) Attends to the patient's anamnesis
- b) Does not address medical issues
- c) Has no formal structure
- d) Focuses exclusively on information obtained from the patient
- e) Focuses primarily on symptoms

111. The clinical features at the onset of anorexia nervosa in adolescence period:

- a) All the statements are correct
- b) Laxative use
- c) Excessive physical exercise
- d) Vomiting
- e) Avoiding nutrition

112. The disorder most commonly mistaken for borderline intellectual functioning is:

- a) Attention-deficit hyperactivity disorder

- b) Antisocial personality disorder
- c) Asperger's disorder
- d) Early-onset schizophrenia
- e) Conduct disorder

113. The etiological factors in the organic psychopathological disorders are:

- a) Biological
- b) Constitution
- c) Genetic
- d) Situational
- e) Seizures

114. The first choice drug used for bipolar disorder is:

- a) Lithium
- b) Trazodon
- c) Clorpromazine
- d) Diazepam
- e) Propranolol

115. The first choice drug used for bipolar disorder is:

- a) A mood stabilizer
- b) An anxiolytic
- c) A hypnotic
- d) An antidepressant
- e) A neuroleptic

116. The first choice drug used for bipolar disorder is:

- a) Valproic acid
- b) Sertraline
- c) Clorpromazine
- d) Diazepam
- e) Trazodon

117. The first person that formulated the transactional analysis?

- a) Bern
- b) Beck

- c) Freud
- d) Ellis
- e) Perls

118. The first task in evaluating violent behavior should be:

- a) Determination of the cause
- b) Ascertaining degree of injuries
- c) Admission to a hospital
- d) Establishing a treatment plan
- e) Obtaining information from observers

119. The following affirmations about the epileptic status are correct, with the EXCEPTION of:

- a) Appears usually after petit-mal seizures
- b) The most frequent condition is an abrupt stop of anticonvulsivant treatment.
- c) Epileptic status might appear not only in epilepsy, but also in CNS infections, meningoencephalitis, etc
- d) Represents a major psychiatric emergency, since it might lead to an exitus or determine irreversible neurological consequences.
- e) Is characterized by repeated tonic and clonic seizures, total crisis length might exceed one hour.

120. The highest suicide rates are in which of the following are groups?

- a) Older than age 65 years
- b) 45 to 64 years old
- c) 25 to 44 years old
- d) 15 to 24 years old
- e) Younger than age 15 years

121. The medical record involves:

- a) Is accessible to patients
- b) Cannot be used in malpractice litigation
- c) Is used only by the treating team
- d) Cannot be used by regulatory agencies
- e) Is absolutely confidential

122. The most frequent form of neurotic disorders is:

- a) Neurasthenia
- b) Dysthymia
- c) Somatoform disorder
- d) Phobic anxiety disorder
- e) Conversion disorder

123. The most frequently occurring of the somatoform disorders is

- a) Conversion disorder
- b) Body dysmorphic disorder
- c) Hypochondriasis
- d) Pain disorder
- e) Somatization disorder

124. The Oedipus complex as described by Freud involves all of the following EXCEPT:

- a) Anal phase
- b) Adult sexuality
- c) Rivalries
- d) Intense love relationships
- e) Both mother and father

125. The risk of developing anxiety disorders is enhanced by

- a) All of the above
- b) Allergies
- c) Substance abuse
- d) Depression
- e) Eating disorders

126. The risk to make schizophrenia for person with both parents suffer from it is:

- a) 40-70%
- b) 60-90%
- c) 15-20%
- d) 20-40%

e) 70-90%

127. The time, course, and intensity of a drug's effect are referred to us:

- a) Pharmacodynamics
- b) Pharmacokinetics
- c) Pharmacogenetics
- d) Placebo effect
- e) Idiosyncratic reaction

128. True statements about projective personality tests include

- a) They often focus on latent or unconscious aspects of personality
- b) The variety of responses is limited
- c) They tend to be more direct and structural than objective personality tests
- d) Instructions are usually specific
- e) None of the above

129. Typical symptom of simple schizophrenia is

- a) Autism
- b) Hallucination
- c) Delusions of persecution
- d) Agitation
- e) Nothing listed above is valid

130. Unexpected panic attacks are required for the diagnosis of:

- a) Panic disorder
- b) Generalized anxiety disorder
- c) Social phobia
- d) Specific phobia
- e) All of the above

131. Visual hallucinations, delusions, fluctuating mental status, and adverse reactions to antipsychotic drugs, are all characteristics of which type of dementia?

- a) Lewy body dementia
- b) Vascular dementia

- c) Frontotemporal dementia
- d) Depressive pseudodementia
- e) Alzheimer's disease

132. We distinguish the following types of nervous anorexia, according to age criteria:

- a) All answers are correct
- b) Adolescents' anorexia
- c) Pubertal anorexia
- d) Prepubertal anorexia
- e) Infantile anorexia

133. What are the assumptions on which relies the psychosomatic medicine:

- a) There is a unity of mind and body (reflected in term mind-body medicine); and psychological factors must be taken into account when considering all disease states.
- b) All the disorders are caused by stress and the only way to help is by healing you soul
- c) Although there are conditions that are caused by biological factors, the main problem in all somatic disorders relies on psychological conflicts.
- d) The only way to treat a illness is by understanding the sick soul that is full of negative energy
- e) All the diseases have a pathophysiology that is unclear, but which can be explained by psychological conflict

134. What from below is correct about Autistic Disorder:

- a) Neurodegenerative disease that shows deficits in language development and difficulty using language to communicate, prior to age 3 years. Children do not demonstrate special attention to important people in their lives and have impaired eye contact and attachment behavior to family members and notable deficits in interacting with peers
- b) Neurodegenerative disease that shows characteristic features after a period of at least 7 months of normal function and growth.
- c) Disintegration of intellectual, social, and language function after at

least 2 years of normal development. Normal development for at least 6 years followed by abnormalities in reciprocal social interaction, communication skills, and stereotyped behavior.

- d) Patient shows impairment in social interaction and restricted repetitive patterns of behavior. There are no significant delays in language, cognitive development or age-appropriate self-help skills.
- e) Consists of a persistent pattern of inattention and/or hyperactivity and impulsive behavior that is more severe than expected of children of similar age and level of development.

135. What from below is correct about Rett's Disorder:

- a) Neurodegenerative disease that shows characteristic features after a period of at least 6 months of normal function and growth. Signs include microcephaly, lack of purposeful hand movements, stereotypic motions, and poor receptive and expressive communication, apraxic gait, and poor coordination
- b) Neurodegenerative disease that shows deficits in language development and difficulty using language to communicate, prior to age 3 years.
- c) Disintegration of intellectual, social, and language function after at least 7 years of normal development.
- d) Patient shows impairment in social interaction and restricted repetitive patterns of behavior. There are no significant delays in language, cognitive development or age-appropriate self-help skills.
- e) Consists of a persistent pattern of inattention and/or hyperactivity and impulsive behavior that is more severe than expected of children of similar age and level of development.

136. What from below is the most correct about Asperger's Disorder:

- a) Patient shows impairment in social interaction and restricted repetitive patterns of behavior. There are no significant delays in language, cognitive development or age-appropriate self-help skills. Features include at least two of the following: markedly abnormal nonverbal communicative gestures, failure to develop peer relationships, the lack of social or emotional reciprocity, and an impaired ability to express pleasure in other people's happiness.

Restricted interests and patterns of behavior are always present

- b)** Consists of a persistent pattern of inattention and/or hyperactivity and impulsive behavior that is more severe than expected of children of similar age and level of development.
- c)** Disintegration of intellectual, social, and language function after at least 2 years of normal development.
- d)** Neurodegenerative disease that shows deficits in language development and difficulty using language to communicate, prior to age 3 years.
- e)** Neurodegenerative disease that shows characteristic features after a period of at least 6 months of normal function and growth.

137. What from below is the most correct about Attention-deficit/hyperactivity Disorder:

- a)** Consists of a persistent pattern of inattention and/or hyperactivity and impulsive behavior that is more severe than expected of children of similar age and level of development. Symptoms must be present before the age of 7 years, must be present in at least two settings, and must interfere with the appropriate social, academic, and extracurricular functioning.
- b)** Patient shows impairment in social interaction and restricted repetitive patterns of behavior. There are no significant delays in language, cognitive development or age-appropriate self-help skills.
- c)** Disintegration of intellectual, social, and language function after at least 2 years of normal development.
- d)** Neurodegenerative disease that shows deficits in language development and difficulty using language to communicate, prior to age 3 years.
- e)** Neurodegenerative disease that shows characteristic features after a period of at least 6 months of normal function and growth.

138. What from below is the most correct about Childhood Disintegrative Disorder:

- a)** Disintegration of intellectual, social, and language function after at least 2 years of normal development. Normal development for at least 2 years followed by abnormalities in reciprocal social interaction, communication skills, and stereotyped behavior. Core features include

impaired ability in language, social behavior, adaptive behavior, bowel or bladder control, play, and motor skills. Majority of onset occurs at age 3 to 4 years

- b)** Consists of a persistent pattern of inattention and/or hyperactivity and impulsive behavior that is more severe than expected of children of similar age and level of development.
- c)** Patient shows impairment in social interaction and restricted repetitive patterns of behavior. There are no significant delays in language, cognitive development or age-appropriate self-help skills.
- d)** Neurodegenerative disease that shows deficits in language development and difficulty using language to communicate, prior to age 5 years.
- e)** Neurodegenerative disease that shows characteristic features after a period of at least 7 months of normal function and growth.

139. What is NOT a violation of consciousness:

- a)** Verbigeration
- b)** Delirium
- c)** Obnubilation
- d)** Oneiroid condition
- e)** All listed above is valid

140. What is NOT included in the General Strategy in Evaluating Suicidal Patients:

- a)** Always assume that family or friends will be able to watch a patient 24 hours a day
- b)** Protect yourself
- c)** Prevent harm
- d)** Rule out cognitive disorders
- e)** Rule out impending psychosis

141. What is NOT typical withdrawal symptoms at dependence on heroin:

- a)** High fever
- b)** All listed above are valid
- c)** Mydriasis
- d)** Nausea

e) Tremor

142. Which of the following disorders is the Axis II diagnosis most closely associated with suicide ?

- a) Borderline personality disorder
 - b) Substance abuse disorders
 - c) Schizophrenia
 - d) Antisocial personality disorder
 - e) Mood disorders
-

143. Which statement is true of a person who has acquired a second language during childhood ?

- a) Both language centers appear in the cortical region
 - b) There is only one language center in the cortical region
 - c) There are no language centers in the cortical region
 - d) Language centers do not appear in the cortical region
 - e) Second language centers only appear in an adult's cortical region
-

144. Which clinical features may be associated with delirium?

- a) All of the above
 - b) Mood alterations
 - c) Illusions
 - d) Hallucinations
 - e) Disorganized thought process
-

145. Which is a condition commonly seen in teens that abuse alcohol:

- a) binge drinking
 - b) psychosis
 - c) tics
 - d) oneiroid condition
 - e) obsessive compulsive disorder
-

146. Which neurotransmitters are mostly implied in pathophysiology of psychosomatic disorders as a neurotransmitter response:

- a) Catecholamine, serotonin, dopamine

b) GABA, Na⁺, L-DOPA

c) GABA, noradrenalin, acetylcholine

d) Acetylcholine, dopamine, melatonin

e) Glucocorticoids, T3/T4, Adrenalin

147. Which of the following about confidentiality is true?

- a) Informing one's spouse of the identity of one's patient violates the ethical principle of confidentiality
 - b) A physician is obligated to require such reporting
 - c) Videotaped segments of a therapy session cannot be used at a workshop for professionals
 - d) Confidentiality prevents psychiatrists from releasing information about patients to insurance companies.
 - e) Confidentiality does not need to be maintained other patients are deceased
-

148. Which of the following agents is not a first-generation antipsychotic?

- a) Risperidone (Risperdal)
 - b) Thioridazine (Mellaril)
 - c) Haloperidol (Haldol)
 - d) Perphenazine
 - e) Chlorpromazine (Thorazine)
-

149. Which of the following antipsychotic drugs is considered to relieve the symptoms of tardive dyskinesia:

- a) Clozapine
 - b) Haloperidol
 - c) Trifluoperazine
 - d) Aripiprazole
 - e) Quetiapine
-

150. Which of the following antipsychotic drugs is more likely to cause agranulocytosis:

- a) Clozapine
- b) Haloperidol
- c) Trifluoperazine

- d) Aripiprazol
- e) Quetiapine

151. Which of the following can NOT be used as main treatment of obsessive-compulsive disorder:

- a) Memantine
- b) Clomipramine
- c) Fluoxetine
- d) Quetiapine
- e) Psychotherapy

152. Which of the following chromosomal abnormalities is most likely to cause mental retardation?

- a) Extra chromosome 21 (trisomy 21)
- b) Fusion of chromosomes 21 and 15
- c) X0 (Turner's syndrome)
- d) XXY (Klinefelter's syndrome)
- e) XXYY and XXXY (Klinefelter's syndrome variants)

153. Which of the following conditions is LESS likely to be regarded as a psychosomatic disorder:

- a) Willson-Konovalov disease
- b) Ulcerative colitis
- c) Headaches
- d) Arterial hypertension
- e) Asthma

154. Which of the following disorders is least often associated with fragile X syndrome?

- a) Bipolar disorder
- b) Social anxiety disorder
- c) Attention - deficithyperactivity disorder
- d) Schizotypal personality disorder
- e) Autistic disorder

155. Which of the following explanations is true about agoraphobia:

- a) Morbid fear of open places or leaving the familiar setting of the home. May be present with or without panic attacks.
- b) Morbid fear of closed places or very familiar setting of the home. May be present with or without panic attacks.
- c) Morbid fear of spiders. May be present with or without panic attacks.
- d) Morbid fear of sharp objects and knives. May be present with or without panic attacks.
- e) Morbid fear of height and high positions in space. May be present with or without panic attacks.

156. Which of the following explanations is true about akathisia:

- a) Subjective feeling of motor restlessness manifested by a compelling need to be in constant movement; may be seen as an extrapyramidal adverse effect of antipsychotic medication.
- b) Subjective feeling of calm manifested by a constant position and relaxed body; may be seen as an extrapyramidal adverse effect of antipsychotic medication.
- c) Absence of voluntary motor movement or speech in a patient who is apparently alert (as evidenced by eye movements). Seen in psychotic depression and catatonic states.
- d) Lack of the ability to make gestures or to comprehend those made by others.
- e) State in which one feels little or no pain. Can occur under hypnosis and in dissociative disorder.

157. Which of the following explanations is true about behavior therapy:

- a) A therapy that focuses on overt and observable behavior and uses various conditioning techniques derived from learning theory to directly modify the patient's behavior. This therapy is directed exclusively toward symptomatic improvement, without addressing psychodynamic causation.
- b) A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on

unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.

c) A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world. Maladaptive behavior is secondary to ingrained, stereotyped thoughts, which can lead to cognitive distortions or errors in thinking. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.

d) A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression. Intrapsychic conflicts are not addressed. Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.

e) A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.

158. Which of the following explanations is true about catalepsy:

a) Condition in which persons maintain the body position into which they are placed; observed in severe cases of catatonic schizophrenia. Also called waxy flexibility and cerea flexibilitas.

b) Excited, uncontrolled motor activity seen in catatonic schizophrenia. Patients in catatonic state may suddenly erupt into an excited state and may be violent.

c) Abnormal fear of closed or confining spaces.

d) False perception of orders that a person may feel obliged to obey or unable to resist.

e) Disturbances of consciousness manifested by a disordered orientation in relation to time, place, or person.

159. Which of the following explanations is true about cognitive-behavioral therapy:

a) A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in

the world. Maladaptive behavior is secondary to ingrained, stereotyped thoughts, which can lead to cognitive distortions or errors in thinking. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.

b) A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.

c) A therapy that focuses on overt and observable behavior and uses various conditioning techniques derived from learning theory to directly modify the patient's behavior. This therapy is directed exclusively toward symptomatic improvement, without addressing psychodynamic causation.

d) A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression. Intrapsychic conflicts are not addressed. Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.

e) A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.

160. Which of the following explanations is true about confabulation:

a) Unconscious filling of gaps in memory by imagining experiences or events that have no basis in fact, commonly seen in amnesic syndromes; should be differentiated from lying.

b) Disturbances of consciousness manifested by a disordered orientation in relation to time, place, or person.

c) Illusion of visual recognition in which a new situation is incorrectly regarded as a repetition of a previous experience.

d) False belief, based on incorrect inference about external reality, that is firmly held despite objective and obvious contradictory proof or

evidence and despite the fact that other members of the culture do not share the belief.

e) Gradual or sudden deviation in train of thought without blocking; sometimes used synonymously with loosening of association.

161. Which of the following explanations is true about family therapy:

a) A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.

b) A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression. Intrapsychic conflicts are not addressed. Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.

c) A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world. Maladaptive behavior is secondary to ingrained, stereotyped thoughts, which can lead to cognitive distortions or errors in thinking. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.

d) A therapy that focuses on overt and observable behavior and uses various conditioning techniques derived from learning theory to directly modify the patient's behavior. This therapy is directed exclusively toward symptomatic improvement, without addressing psychodynamic causation.

e) A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.

162. Which of the following explanations is true about flat affect:

a) Absence or near absence of any signs of affective expression.

b) Aimless plucking or picking, usually at bedclothes or clothing, commonly seen in dementia and delirium.

c) Mental state characterized by feelings of sadness, loneliness, despair, low self-esteem and self-reproach; accompanying signs include psychomotor retardation or at times, agitation, withdrawal from interpersonal contact, and vegetative symptoms, such as insomnia and anorexia.

d) Oscillation of a person's emotional feeling tone between periods of elation and periods of depression

e) Depressive delusion that the world and everything related to it have ceased to exist.

163. Which of the following explanations is true about interpersonal therapy:

a) A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression. Intrapsychic conflicts are not addressed. Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.

b) A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.

c) A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world. Maladaptive behavior is secondary to ingrained, stereotyped thoughts, which can lead to cognitive distortions or errors in thinking. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.

d) A therapy that focuses on overt and observable behavior and uses various conditioning techniques derived from learning theory to directly modify the patient's behavior. This therapy is directed exclusively toward symptomatic improvement, without addressing psychodynamic causation.

e) A theory of human mental phenomena and behavior, a method of

psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.

164. Which of the following explanations is true about psychoanalysis:

- a)** A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.
 - b)** A therapy that focuses on overt and observable behavior and uses various conditioning techniques derived from learning theory to directly modify the patient's behavior. This therapy is directed exclusively toward symptomatic improvement, without addressing psychodynamic causation.
 - c)** A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world. Maladaptive behavior is secondary to ingrained, stereotyped thoughts, which can lead to cognitive distortions or errors in thinking. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.
 - d)** A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression. Intrapsychic conflicts are not addressed. Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.
 - e)** A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.
-

165. Which of the following explanations is true about

psychotherapy:

- a)** A treatment for mental illness and behavioral disturbances in which a trained person establishes a professional contract with the patient and through definite therapeutic communication, both verbal and nonverbal attempts to alleviate the emotional disturbance, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.
 - b)** A set of psychological technics offered only for normal people that want to change or solve some habitual problems or emotional disturbance, maladaptive patterns of behavior, and encourage personality growth and development.
 - c)** Is the therapy which aims to resolve psychiatric problems by administering drugs, it is used to alleviate the emotional disturbance, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.
 - d)** A treatment for normal people and behavioral disturbances in which any person could establish a contract with the patient and through communication, both verbal and nonverbal attempts to alleviate the emotional disturbance, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.
 - e)** A set of psychological technics offered for mental illness and behavioral disturbances in which the patient is helped to solve some habitual problems or emotional disturbance, maladaptive patterns of behavior by reading books and forgetting the issues that caused the disturbance in the first place.
-

166. Which of the following functions is usually NOT damaged in schizophrenia:

- a)** Memory
 - b)** Thinking
 - c)** Perception
 - d)** Affect
 - e)** Behavior
-

167. Which of the following functions of psychic is affected in obsessive-compulsive disorder:

- a) Behavior, thought
 - b) Consciousness, emotions, perception
 - c) Conscious, perception
 - d) Emotions, perception
 - e) Thought, consciousness
-

168. Which of the following involves very strong the D2 receptors:

- a) Haloperidol
 - b) Nothing listed above is valid
 - c) Trazodon
 - d) Setraline
 - e) Citalopram
-

169. Which of the following is a condition that most likely can occur in patients in withdrawal after severe chronic alcohol abuse:

- a) Withdrawal seizures
 - b) Tics
 - c) Manic condition
 - d) Pseudohallucinations
 - e) Delusions of being followed/persecuted
-

170. Which of the following is a mood disorder:

- a) Cyclothymic disorder
 - b) Bulimia nervosa
 - c) Somatization disorder
 - d) Panic disorder
 - e) Schizophrenia
-

171. Which of the following is a mood disorder:

- a) Major depressive disorder
 - b) Schizophrenia
 - c) Panic disorder
 - d) Somatization disorder
 - e) Bulimia nervosa
-

172. Which of the following is a mood disorder:

- a) Bipolar disorder
 - b) Schizophrenia
 - c) Panic disorder
 - d) Somatization disorder
 - e) Bulimia nervosa
-

173. Which of the following is a mood disorder:

- a) Dysthymic disorder
 - b) Panic disorder
 - c) Schizophrenia
 - d) Somatization disorder
 - e) Bulimia nervosa
-

174. Which of the following is a Pervasive Developmental Disorder:

- a) Childhood disintegrative disorder
 - b) Schizophrenia
 - c) Mental Retardation
 - d) Epilepsy in children
 - e) Pica
-

175. Which of the following is a Pervasive Developmental Disorder:

- a) Asperger's disorder
 - b) Schizophrenia
 - c) Mental Retardation
 - d) Epilepsy in children
 - e) Pica
-

176. Which of the following is a Pervasive Developmental Disorder:

- a) Autistic disorder
 - b) Schizophrenia
 - c) Mental Retardation
 - d) Epilepsy in children
 - e) Pica
-

177. Which of the following is a Pervasive Developmental Disorder:

- a) Rett's disorder
- b) Schizophrenia
- c) Mental Retardation
- d) Epilepsy in children
- e) Pica

178. Which of the following is an antidepressant drug:

- a) Paroxetine
- b) Ziprazidone
- c) Olanzapine
- d) Alprazolam
- e) Clozapine

179. Which of the following is an antidepressant drug:

- a) Venlafaxine
- b) Ziprazidone
- c) Olanzapine
- d) Alprazolam
- e) Clozapine

180. Which of the following is an antidepressant drug:

- a) Amitriptilin
- b) Aripiprazol
- c) Olanzapine
- d) Alprazolam
- e) Clozapine

181. Which of the following is FALSE about dissociative amnesia:

- a) The amnesia has always an organic trauma background
- b) Dissociative phenomenon is specifically amnesic in that the patient is unable to recall an important memory, which is usually traumatic or stressful, but retains the capacity to learn new material.
- c) The diagnostic criteria for dissociative amnesia emphasizes that the forgotten information is usually of traumatic or stressful nature.

d) Onset of dissociative amnesia is often abrupt, and history usually shows a precipitating emotional trauma charged with painful emotions and psychological conflict.

e) The amnesia is not the result of a general medical condition or the ingestion of a substance. Amnesia may provide a primary or a secondary gain (i.e.. a woman who is amnesic about the birth of a dead infant).

182. Which of the following is FALSE about dissociative fugue:

a) The recovery is not spontaneous and can lead to brain trauma

b) Predisposing factors include borderline, histrionic, schizoid personality disorders; alcohol abuse; mood disorders; organic disorders (especially epilepsy); and a history of head trauma.

c) Once they suddenly return to their former selves, they recall the time antedating the fugue, but they are amnesic for the period of the fugue itself.

d) Memory loss is sudden and is associated with purposeful, unconfused travel, often for extended periods of time.

e) It is characterized by sudden, unexpected travel away from home, with the inability to recall some or all of one's past.

183. Which of the following is FALSE about functional response to stress (George Engel):

a) Number and activity of natural killer cells increases in chronic stress, causing tumors.

b) Immune activation occurs with release of hormonal immune factors (cytokines) in acute stress.

c) Increased dopaminergic transmission.

d) Increased serotonin turnover may result in eventual depletion of serotonin.

e) Increased synthesis of brain norepinephrine.

184. Which of the following is FALSE about functional response to stress (George Engel):

a) Decreased synthesis of brain norepinephrine.

b) Increased dopaminergic transmission.

c) Number and activity of natural killer cells decreased in chronic

stress.

d) Immune activation occurs with release of hormonal immune factors (cytokines) in acute stress.

e) Testosterone decrease with prolonged stress.

185. Which of the following is FALSE about obsessive-compulsive disorder:

a) The person hardly realize that he has a psychiatric problem, denying it, an almost never try to seek help

b) The person recognizes that the obsessional thoughts, impulses, or images are a product of his or her own mind (not imposed from without. as in thought insertion)

c) The person attempts to ignore or suppress such thoughts, impulses, or images, or to neutralize them with some other thought or action

d) The thoughts, impulses, or images are not simply excessive worries about real-life problems

e) Recurrent and persistent thoughts, impulses, or images that are experienced at same time during the disturbance, as intrusive and inappropriate and that cause marked anxiety or distress

186. Which of the following is FALSE about obsessive-compulsive disorder:

a) It usually occurs in adolescence, with high preoccupation and emotional distress, and persists for years as part of patient's personality

b) Involves recurrent intrusive ideas, images, ruminations, impulses, thoughts (obsessions) or repetitive patterns of behavior or actions (compulsions).

c) Both obsessions and compulsions are ego-alien and produce anxiety if resisted.

d) The obsessions or compulsions cause marked distress, are time consuming (take more than 1 hour a day), or significantly interfere with the person's normal routine, occupational (or academic) functioning, or usual social activities or relationships.

e) The person recognizes that the obsessional thoughts, impulses, or images are a product of his or her own mind (not imposed from

without. as in thought insertion)

187. Which of the following is FALSE about phobias:

a) Children must always recognize that the fear is excessive or unreasonable

b) The avoidance, anxious anticipation, or distress in the feared situation(s) interferes significantly with the person's normal routine, occupational (or academic) functioning, or social activities or relationships, or there is marked distress about having the phobia.

c) Exposure to the phobic stimulus almost invariably provokes an immediate anxiety response, which may take the form of a situationally bound or situationally predisposed panic attack.

d) The person experiences massive anxiety when exposed to the feared object and tries to avoid it at all costs.

e) A phobia is an irrational fear of an object (e.g., horses, heights, needles).

188. Which of the following is FALSE about schizophrenia:

a) The main treatment is with antidepressant drugs, which have the mechanism of decreasing the level of dopamine in CNS.

b) Schizophrenic symptoms may result from increased limbic dopamine activity (positive symptoms) and decreased frontal dopamine activity (negative symptoms).

c) Dopaminergic pathology may be secondary to abnormal receptor number or sensitivity, or abnormal dopamine release (too much or too little).

d) Decreased GABA activity results in increased dopamine activity which play it's role in pathogenesis.

e) Serotonin metabolism apparently is abnormal in some chronically schizophrenic patients, with both hyperserotoninemia and hyposerotoninemia being reported.

189. Which of the following is FALSE about schizophrenia:

a) It is a chronic disorder that usually have a good prognostic and no residual symptoms

b) It is a syndrome of unknown etiology characterized by disturbances in cognition, emotion, perception, thinking, and behavior.

- c) It is well established as a brain disorder, with structural and functional abnormalities visible in neuroimaging studies and having a genetic component
- d) The prodromal and residual phases are characterized by attenuated forms of active symptoms, such as odd beliefs and magical thinking, as well as deficits in self-care and interpersonal relatedness.
- e) The disorder is usually chronic, with a course encompassing a prodromal phase, an active phase, and a residual phase.

-
- 190.** Which of the following is FALSE about schizophrenia:
- a) Schizophrenia can be treated with psychotherapy, given strong arguments curing the patient's disbeliefs.
 - b) Higher mortality rate from accidents and natural causes than in general population.
 - c) Leading cause of death in schizophrenic patients is suicide (10% kill themselves).
 - d) Schizophrenic symptoms may result from increased limbic dopamine activity (positive symptoms) and decreased frontal dopamine activity (negative symptoms).
 - e) Dopaminergic pathology may be secondary to abnormal receptor number or sensitivity, or abnormal dopamine release (too much or too little).

-
- 191.** Which of the following is FALSE about schizophrenia:
- a) The main treatment is with antipsychotic drugs which have the mechanism of increasing the level of dopamine in CNS.
 - b) The prevalence of schizophrenia is greater in the biological parents of schizophrenic adoptees than in adoptive parents.
 - c) Increased norepinephrine levels in schizophrenia lead to increased sensitization to sensory input.
 - d) Decreased GABA activity results in increased dopamine activity which play it's role in pathogenesis.
 - e) Serotonin metabolism apparently is abnormal in some chronically schizophrenic patients, with both hyperserotoninemia and hyposerotoninemia being reported.

-
- 192.** Which of the following is less likely to be a sign of organic

- brain damage:
- a) Depression
 - b) Dependent
 - c) The withdrawal
 - d) Seizures
 - e) "Short circuit" states

-
- 193.** Which of the following is NOT a antidepressant drug:
- a) Chlorpromazine
 - b) Venlafaxine
 - c) Clomipramine
 - d) Escitalopram
 - e) Amitriptyline

-
- 194.** Which of the following is NOT a antidepressant drug:
- a) Clozapine
 - b) Fluoxetine
 - c) Escitalopram
 - d) Clomipramine
 - e) Venlafaxine

-
- 195.** Which of the following is not a basic principle of ethics that psychiatrists must show respect for?
- a) Prudence
 - b) Beneficence
 - c) Justice
 - d) Nonmaleficence
 - e) Autonomy

-
- 196.** Which of the following is NOT a criteria for panic attack:
- a) Fear of special places, or having social activities
 - b) Nausea or abdominal distress
 - c) Feeling dizzy, unsteady, lightheaded, or faint
 - d) Derealization (feelings of unreality) or depersonalization (being detached from oneself)
 - e) Fear of losing control or going crazy

-
- 197.** Which of the following is NOT a criteria for panic attack:
- a) Fear of special objects, or being lonely
 - b) Fear of dying
 - c) Palpitations, pounding heart, or accelerated heart rate
 - d) Sweating
 - e) Trembling or shaking
-

- 198.** Which of the following is NOT a dissociative disorder:
- a) dissociative mood disorder
 - b) depersonalization disorder
 - c) dissociative identity disorder
 - d) dissociative fugue
 - e) dissociative amnesia,
-

- 199.** Which of the following is NOT a negative psychiatric symptom?
- a) Disorganized thinking
 - b) Avolition
 - c) Poverty of thought
 - d) Apathy
 - e) Flat affect
-

- 200.** Which of the following is NOT a neuroleptic:
- a) Clomipramine
 - b) Clozapine
 - c) Haloperidol
 - d) Aripiprazol
 - e) Quetiapine
-

- 201.** Which of the following is NOT a neuroleptic:
- a) Sertraline
 - b) Clozapine
 - c) Olanzapine
 - d) Chlorpromazine
 - e) Trifluoperazine
-

- 202.** Which of the following is NOT a neuroleptic:
- a) Imipramine
 - b) Aripiprazol
 - c) Quetiapine
 - d) Clozapine
 - e) Risperidone
-

- 203.** Which of the following is NOT a Pervasive Developmental Disorder:
- a) Schizophrenia
 - b) Autistic disorder
 - c) Rett's disorder
 - d) Childhood disintegrative disorder
 - e) Asperger's disorder
-

- 204.** Which of the following is NOT a Pervasive Developmental Disorder:
- a) Mental Retardation
 - b) Asperger's disorder
 - c) Rett's disorder
 - d) Childhood disintegrative disorder
 - e) Autistic disorder
-

- 205.** Which of the following is NOT a type of schizophrenia according to ICD-10:
- a) Affective
 - b) Disorganized
 - c) Catatonic
 - d) Hebephrenia
 - e) Paranoid
-

- 206.** Which of the following is NOT a type of schizophrenia according to ICD-10:
- a) Negative
 - b) Disorganized
 - c) Catatonic
 - d) Simple

e) Paranoid

207. Which of the following is NOT an antidepressant drug:

- a) Olanzapine
 - b) Paroxetine
 - c) Clomipramine
 - d) Citalopram
 - e) Fluoxetine
-

208. Which of the following is not an indication for the use of psychotropic medication in the psychiatric emergency department?

- a) Anticholinergic intoxication
 - b) Assaultive behavior
 - c) Extrapyramidal reactions
 - d) Massive anxiety
 - e) None of the above
-

209. Which of the following is NOT present in obsessive-compulsive disorder:

- a) The obsessions and compulsions are ego-syntonic
 - b) Repetitive behaviors
 - c) Marked anxiety and distress
 - d) Recurrent intrusive images
 - e) Recurrent intrusive thoughts
-

210. Which of the following is not typically associated with catatonia?

- a) Verbigeration
 - b) Waxy flexibility
 - c) Stereotipies
 - d) Mutism
 - e) Mannerisms
-

211. Which of the following is the definition of Personality disorders:

- a) The term personality is universally used to describe the characteristic behavior responses of an individual, based of his or her

internal or external experiences; it is predictable and stable. A personality disorder is diagnosed when an individual's behavior deviates from the normal range of variation found in the majority of people, resulting in significant impairment of adaptive functioning and/or personal distress.

b) The term personality is universally used to describe the characteristic affective responses of an individual, based of his or her internal or external experiences; it is not very predictable nor stable.

c) The term personality is universally used to describe the characteristic psychomotor and thought responses of an individual, based of his or her internal or external experiences; it is not very predictable nor stable.

d) The term personality is universally used to describe the memory and conscious symptoms of an individual that results in significant impairment of adaptive functioning and/or personal distress.

e) The term personality is universally used to describe the thought and affective symptoms of an individual that results in significant impairment of adaptive functioning and/or personal distress.

212. Which of the following is the most common adverse event of typical antipsychotic drugs:

- a) Extrapyramidal symptoms
 - b) Metabolic changes (X metabolic syndrome)
 - c) Anemia
 - d) Hyponatremia
 - e) Priapism
-

213. Which of the following is the NOT a common adverse event of typical antipsychotic drugs:

- a) Metabolic changes (X metabolic syndrome)
 - b) Extrapyramidal symptoms
 - c) Restlessness
 - d) Hyper salivation
 - e) Tardive dyskinesia
-

214. Which of the following is TRUE about Antisocial personality disorder:

a) They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration. They reject discipline and authority and have an underdeveloped conscience. It should be noted that though this disorder is associated with criminality, it is not synonyms with it.

b) They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image. Suicide attempts and acts of self-mutilation are common occurrences among this patients. These individuals are very impulsive, and suffer from identity problems as well as feelings of emptiness and boredom.

c) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long- lasting relationships.

d) Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success, exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships.

e) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

215. Which of the following is TRUE about Avoidant personality disorder:

a) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

b) Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success, exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships.

c) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long- lasting relationships.

d) They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image. Suicide attempts and acts of self-mutilation are common occurrences among this patients. These individuals are very impulsive, and suffer from identity problems as well as feelings of emptiness and boredom.

e) They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration. They reject discipline and authority and have an underdeveloped conscience. It should be noted that though this disorder is associated with criminality, it is not synonyms with it.

216. Which of the following is TRUE about Borderline personality disorder:

a) They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image. Suicide attempts and acts of self-mutilation are common occurrences among this patients. These individuals are very impulsive, and suffer from identity problems as well as feelings of emptiness and boredom.

b) They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration. They reject discipline and authority and have an underdeveloped conscience. It should be noted that though this disorder is associated with criminality, it is not synonyms with it.

c) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long- lasting relationships.

d) Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success,

exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships.

e) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

217. Which of the following is TRUE about Dependent personality disorder:

a) Patients are predominantly dependent and submissive. They lack self-confidence and get others to assume responsibility for major areas of their lives.

b) Often perceived as eccentric and introverted, they are characterized by their isolated lifestyles and their lack of interest in social interaction.

c) They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization. Such individuals are perceived as strikingly odd or strange, even to laypersons.

d) Characterized by perfectionism, orderliness, inflexibility, stubbornness, emotional constriction and indecisiveness. Also called anancastic personality disorder.

e) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

218. Which of the following is TRUE about disorders of adult personality and behavior:

a) Marked disharmonized and sustainable attitudes and behavior

b) Insertion and dissemination of thoughts

c) Echo of thoughts

d) delusions of control

e) delusions of influence

219. Which of the following is TRUE about Histrionic

personality disorder:

a) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long- lasting relationships

b) Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success, exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships

c) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

d) They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image. Suicide attempts and acts of self-mutilation are common occurrences among this patients. These individuals are very impulsive, and suffer from identity problems as well as feelings of emptiness and boredom.

e) They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration. They reject discipline and authority and have an underdeveloped conscience. It should be noted that though this disorder is associated with criminality, it is not synonyms with it.

220. Which of the following is TRUE about Narcissistic personality disorder:

a) Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success, exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships

b) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as

having an inferiority complex.

c) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long-lasting relationships.

d) They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image. Suicide attempts and acts of self-mutilation are common occurrences among this patients. These individuals are very impulsive, and suffer from identity problems as well as feelings of emptiness and boredom.

e) They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration. They reject discipline and authority and have an underdeveloped conscience. It should be noted that though this disorder is associated with criminality, it is not synonyms with it.

221. Which of the following is TRUE about Paranoid personality disorder:

a) Characterized by their intense distrust and suspiciousness of others, they are often hostile, irritable, hypersensitive, envious, or angry and will not take responsibility for their own actions, often projecting such responsibility onto others. They may be bigots, injustice collectors, pathologically jealous spouses, or litigious cranks

b) Often perceived as eccentric and introverted, they are characterized by their isolated lifestyles and their lack of interest in social interaction.

c) They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization. Such individuals are perceived as strikingly odd or strange, even to laypersons.

d) Characterized by perfectionism, orderliness, inflexibility, stubbornness, emotional constriction and indecisiveness. Also called anancastic personality disorder.

e) Patients are predominantly dependent and submissive. They lack self-confidence and get others to assume responsibility for major areas of their lives.

222. Which of the following is TRUE about Schizoid personality disorder:

a) Often perceived as eccentric and introverted, they are characterized by their isolated lifestyles and their lack of interest in social interaction

b) Characterized by their intense distrust and suspiciousness of others, they are often hostile, irritable, hypersensitive, envious, or angry and will not take responsibility for their own actions, often projecting such responsibility onto others. They may be bigots, injustice collectors, pathologically jealous spouses, or litigious cranks.

c) They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization. Such individuals are perceived as strikingly odd or strange, even to laypersons.

d) Characterized by perfectionism, orderliness, inflexibility, stubbornness, emotional constriction and indecisiveness. Also called anancastic personality disorder.

e) Patients are predominantly dependent and submissive. They lack self-confidence and get others to assume responsibility for major areas of their lives.

223. Which of the following is TRUE about Schizotypal personality disorder:

a) They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization. Such individuals are perceived as strikingly odd or strange, even to laypersons.

b) Characterized by their intense distrust and suspiciousness of others, they are often hostile, irritable, hypersensitive, envious, or angry and will not take responsibility for their own actions, often projecting such responsibility onto others. They may be bigots, injustice collectors, pathologically jealous spouses, or litigious cranks.

c) Often perceived as eccentric and introverted, they are characterized by their isolated lifestyles and their lack of interest in social interaction.

d) Characterized by perfectionism, orderliness, inflexibility, stubbornness, emotional constriction and indecisiveness. Also called anancastic personality disorder.

e) Patients are predominantly dependent and submissive. They lack self-confidence and get others to assume responsibility for major areas of their lives.

224. Which of the following items is usually considered as good prognosis in schizophrenia:

- a) Mood disorder symptoms (especially depressive disorders)
- b) Autistic behavior
- c) Negative symptoms
- d) Single, divorced
- e) Early onset

225. Which of the following items is usually considered as poor prognosis in schizophrenia:

- a) Insidious onset
- b) Mood disorder symptoms (especially depressive disorders)
- c) Positive symptoms
- d) Married
- e) Late onset

226. Which of the following items is usually considered as poor prognosis in schizophrenia:

- a) Early onset
- b) Mood disorder symptoms (especially depressive disorders)
- c) Positive symptoms
- d) Married
- e) Acute onset

227. Which of the following neurotransmitters are LESS involved in the pathogenesis of mood disorders:

- a) GABA
- b) 5-hydroxyindole acetic acid
- c) Dopamine
- d) Norepinephrine,
- e) Serotonin,

228. Which of the following neurotransmitters are LESS

involved in the pathogenesis of mood disorders:

- a) Acetylcholine
- b) Serotonin,
- c) Norepinephrine,
- d) Dopamine
- e) 5-hydroxyindole acetic acid

229. Which of the following neurotransmitters are the most importantly involved in the pathogenesis of mood disorders:

- a) Serotonin, Norepinephrine, Dopamine
- b) Acetylcholine, Epinephrine, Dopamine
- c) Dopamine, Glutamate, Epinephrine
- d) Epinephrine, Dopamine, GABA
- e) GABA, Acetylcholine, Epinephrine

230. Which of the following should NOT be done with a suicidal patient:

- a) Offer reassurance, the patients need it (e.g., "Most people think about killing themselves at some time?")
- b) Always ask about past suicide attempts, which can be related to future attempts
- c) Conduct the interview in a safe place. Patients have been known to throw themselves out of a window.
- d) Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.
- e) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

231. Which of the following should NOT be done with a suicidal patient:

- a) Release patients from the emergency department even if you are not certain that they will not harm themselves, trust the patient and relatives that they will monitor him, and that your therapeutic influence is enough to keep them alive
- b) Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital.

- c) Never worry alone-If you are unsure about the level of risk or course of action, involve others.
- d) Always ask about access to firearms; access to weapons increases the risk in a suicidal patient.
- e) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

232. Which of the following should NOT be done with a suicidal patient:

- a) Never ask about past suicide attempts, which can be related to future attempts, it could push the suicidal patient to do it, or plan the suicidal act better.
- b) Do not offer false reassurance (e.g., "Most people think about killing themselves at some time?").
- c) Conduct the interview in a safe place. Patients have been known to throw themselves out of a window.
- d) Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.
- e) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

233. Which of the following should NOT be done with a suicidal patient:

- a) Always assume that family or friends will be able to watch a patient 24 hours a day.
- b) Never worry alone-If you are unsure about the level of risk or course of action, involve others.
- c) Do not release patients from the emergency department if you are not certain that they will not harm themselves.
- d) Always ask about access to firearms; access to weapons increases the risk in a suicidal patient.
- e) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

234. Which of the following should NOT be done with a suicidal patient:

- a) Don't ask about suicidal ideas, especially plans to harm oneself.

Asking about suicide does plant the idea in the suicidal patients mind.

- b) Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.
- c) Conduct the interview in a safe place. Patients have been known to throw themselves out of a window.
- d) Do not offer false reassurance (e.g., "Most people think about killing themselves at some time?").
- e) Always ask about past suicide attempts, which can be related to future attempts.

235. Which of the following should NOT be done with a suicidal patient:

- a) Don't ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does plant the idea in the suicidal patient's mind.
- b) Always ask about access to firearms; access to weapons increases the risk in a suicidal patient.
- c) Do not release patients from the emergency department if you are not certain that they will not harm themselves.
- d) Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital.
- e) Never worry alone-If you are unsure about the level of risk or course of action, involve others.

236. Which of the following should NOT be done with a suicidal patient:

- a) Always deal with the patient by yourself. If you are unsure about the level of risk or course of action, never show it to the patient and others, it could increase the level of anxiety in the patient and he will not trust you.
- b) Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital.
- c) Do not release patients from the emergency department if you are not certain that they will not harm themselves.
- d) Always ask about access to firearms; access to weapons increases the risk in a suicidal patient.

e) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

237. Which of the following should NOT be done with a suicidal patient:

- a)** Do not ask patients if they "want to die." A straightforward approach can make them feel unwanted and increases the chance to act suicidal.
- b)** Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.
- c)** Conduct the interview in a safe place. Patients have been known to throw themselves out of a window.
- d)** Do not offer false reassurance (e.g., "Most people think about killing themselves at some time?").
- e)** Always ask about past suicide attempts, which can be related to future attempts.

238. Which of the following should NOT be done with a suicidal patient:

- a)** Conduct the interview in any place necessary. Patients being with the doctor do not have any intent to harm themselves during the interview
- b)** Do not offer false reassurance (e.g., "Most people think about killing themselves at some time").
- c)** Always ask about past suicide attempts, which can be related to future attempts.
- d)** Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.
- e)** Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

239. Which of the following should NOT be done with a suicidal patient:

- a)** Never ask about access to firearms; access to weapons increases the risk in a suicidal patient, but if you ask, it can influence them to use it in next suicidal attempts.
- b)** Ask about suicidal ideas, especially plans to harm oneself. Asking

about suicide does not plant the idea.

c) Do not release patients from the emergency department if you are not certain that they will not harm themselves

d) Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital.

e) Never worry alone-If you are unsure about the level of risk or course of action, involve others

240. Which of the following statements about learning and memory in the elderly is FALSE?

- a)** Simple recall remains intact
- b)** IQ remains stable until age 80 years
- c)** Memory-encoding ability diminishes
- d)** Complete learning of new material still occurs
- e)** On multiple-choice tests, recognition of correct answers persists.

241. Which of the following statements regarding anxiety and gender differences is true?

- a)** All of the above
- b)** Women have a twofold greater lifetime rate of agoraphobia than men
- c)** No significant difference exists in average age of anxiety onset
- d)** Gender ratios are nearly equal with OCD (obsessive-compulsive disorder)
- e)** Women have greater rates of almost all anxiety disorders

242. Which of the following statements regarding emergency department visits is TRUE?

- a)** More psychiatric emergency visits occur during the nighttime hours
- b)** Married persons use psychiatric emergency departments more often.
- c)** Approximately 50 percent of the persons using emergency department are violent.
- d)** There are more psychiatric emergency visits on weekends
- e)** All of the above

-
- 243.** Which of the following statements regarding velocardiofacial syndrome (VCFS) is FALSE?
- a) Approximately 5 percent of people with schizophrenia may have VCFS
 - b) Approximately 25 percent of patients with VCFS become psychotic in adolescence
 - c) The incidence of VCFS is approximately one in 4000 live births
 - d) Individuals with VCFS frequently have mild mental retardation
 - e) Individuals with VCFS commonly have a history of feeding problems in infancy
-

- 244.** Which of the following substance is involved in the pathogenesis of mood disorders, low cerebrospinal fluid concentration of which, is possibly related with high risk of suicide:
- a) 5-hydroxyindole acetic acid
 - b) GABA
 - c) Dopamine
 - d) Norepinephrine,
 - e) Serotonin,
-

- 245.** Which of the following substances has been implicated in mood disorders with a seasonal pattern?
- a) Melatonin
 - b) Testosterone
 - c) Luteotropic hormone (LTH)
 - d) Gonadotropin-releasing hormone (GnRH)
 - e) Estrogen
-

- 246.** Which of the following tool is considered most appropriate to facilitate the play component of an interview?
- a) Puppets
 - b) Chess
 - c) Video games
 - d) Elaborate toys
 - e) Stock characters
-

- 247.** Which one of the following is the most frequently prescribed agent for insomnia therapies?
- a) Sedating antidepressants
 - b) Benzodiazepines
 - c) First-generation antipsychotics
 - d) Second-generation antipsychotics
 - e) Antihistamines
-

- 248.** Which syndrome is characteristic for simple schizophrenia:
- a) Apatho-abulic
 - b) Motor Automatism
 - c) Paranoid
 - d) Hypochondria
 - e) Depression
-

MULTIPLE CHOICE

- 249.** What from below is correct about Autistic Disorder:
- a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
 - b) Failure to develop peer relationships appropriate to developmental level
 - c) Delay in, or total lack of, the development of spoken language (not accompanied by an attempt to compensate through alternative modes of communication such as gesture or mime)
 - d) Frequent delusions, that immobilize the patient
 - e) Stereotyped and repetitive motor mannerisms (e.g., hand or finger flopping or twisting, or complex whole-body movements)
-

- 250.** Alcoholic psychosis are:
- a) Kandinski-Clerambault Syndrome
 - b) Korsakoff's psychosis
 - c) Jealousy delirium
 - d) Delirium of grandeur
 - e) Delirium tremens

-
- 251.** Anakastic personality disorder is characterized by:
- a)** Avoidance of social or professional activities that involve significant interpersonal contacts because of fear to be rejected or criticized
 - b)** Excessive pedantry and adherence to social conventions
 - c)** Rigidity and stubbornness
 - d)** Unreasonable insistence to follow his certain (right) way of acting for others people, or resistance to allow others to do something
 - e)** Desire to avoid dealing with people, if he is not confident to be agreed
-

252. Chronic alcoholism criteria:

- a)** Increased tolerance
 - b)** Pathological intoxication
 - c)** Loss of self-control
 - d)** Apathy
 - e)** Abstinence
-

253. Criteria for anorexia nervosa at early adolescence onset of the disease include:

- a)** Evident weight loss
 - b)** Distorted perception of body image
 - c)** Excessive concern on the silhouette and body weight
 - d)** Eating more at certain period of time than that which would eat another person in the same period of time
 - e)** Feeling loss of control over the episodes of excessive eating
-

254. Criteria for anorexia nervosa at early adolescence onset of the disease include:

- a)** Evident weight loss
 - b)** Correct perception of body image
 - c)** Excessive concern on the silhouette and body weight
 - d)** Eating more at certain period of time than that which would eat another person in the same period of time
 - e)** Feeling full control over the episodes of excessive eating
-

255. Diagnostic criteria -A- according to DSM IV-TR, in Major Depressive Episode, should include at least one of the following:

- a)** Depressed mood
 - b)** Insomnia or hypersomnia nearly every week
 - c)** Fatigue or loss of energy nearly every week
 - d)** Delusional thoughts of guilt
 - e)** Loss of interest or pleasure
-

256. Diagnostic criteria according to DSM IV-TR, in Generalized Anxiety Disorder, should include the following:

- a)** Excessive anxiety and worry (apprehensive expectation), occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).
 - b)** The person finds it difficult to control the worry
 - c)** Marked and persistent fear that is excessive or unreasonable cued by the presence or anticipation of a specific object or situation (e.g.. flying, heights. animals, receiving an injection. seeing blood).
 - d)** A marked and persistent fear of one or more social or performance situations in which the person is exposed to unfamiliar people or to possible scrutiny by others. The individual fears that he or she will act in a way (or show anxiety symptoms) that will be humiliating or embarrassing.
 - e)** The person experiences massive anxiety when exposed to the feared object and tries to avoid it at all costs.
-

257. Diagnostic criteria according to DSM IV-TR, in Mental Retardation, should include:

- a)** Significantly subaverage intellectual functioning: An IQ of approximately 70 or below on an individually administered IQ test (for infants, a clinical judgment of significantly subaverage intellectual functioning).
- b)** Concurrent deficits or impairments in present adaptive functioning (i.e.. the person's effectiveness in meeting the standards expected for his or her age by his or her cultural group) in at least two of the following areas: communication, home living, social/interpersonal skills, use of community resources, functional academic skills, work, leisure, health, and safety

- c) The onset is before age 18 years
- d) Delusions and bizarre behavior with an onset prior to 3 years.
- e) Poor social adaptation and poor learning skills after age 18 years.

258. Diagnostic criteria according to DSM IV-TR, in Posttraumatic stress disorder, should include the following:

- a) The person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others
- b) The person's response to trauma involved intense fear, helplessness, or horror.
- c) The person's response to trauma, in children, may be expressed by disorganized or agitated behavior.
- d) The traumatic event is persistently re-experienced (recurrent and intrusive distressing recollections of the event, including images, thoughts, or perceptions, recurrent distressing dreams of the event etc.) with duration more than 1 month.
- e) Patient persistently try to find the associated to trauma stimuli, thus filling a relief that they badly need.

259. During catatonic excitation consciousness may be:

- a) Obnubilation
- b) Crepuscular
- c) Lucid
- d) Oneroid type
- e) Delirious

260. Dysmetabolic problems in anorexia nervosa are:

- a) hypoglycemia with hypersensitiveness to insulin
- b) electrolyte disbalance
- c) hyperazotaemia
- d) hyperglycemia
- e) increased percentage of gonad hormones

261. Emotionally-unstable personality disorder of impulsive type involves the following conditions:

- a) Persistent feeling of concern

- b) Outbursts of violence
- c) Feelings of doubt and excessive caution
- d) Lack of control over impulses
- e) Auto-dramatization

262. Etiological theories regarding Schizophrenia are:

- a) Genetic
- b) Autoimmune
- c) Infectious
- d) Biological
- e) Post-irradiation

263. For stuttering all the affirmations are correct, EXCLUDING:

- a) stuttering is observed in 4% of children 4-5 years, when function of speech is formed
- b) clinically is characterized by frequent repetition or prolongation of sounds, syllables or words interrupted by breaks
- c) it can be accompanied by motor movements.
- d) consists of a rate of fast speeches with interruptions
- e) stuttering is observed in 40% of children

264. For transitory tic disorder the following statements are correct:

- a) Usually appears at the age of 5 years' old
- b) Different face expressions appear, blinking, repetitive head movement
- c) Appears before the age of 12 months
- d) Is permanent
- e) Motor actions or stereotype vocalizations are typical

265. In distinguishing schizophrenia from amphetamine induced toxic psychosis, the presence of which of the following is LESS helpful?

- a) tactile or visual hallucinations
- b) paranoid delusions
- c) intact orientation
- d) clear consciousness

e) auditory hallucinations

266. In neurosis :

- a) Contact with reality is lost
 - b) Vulnerability to stress is increased
 - c) The patient wants treatment
 - d) The patient is not aware of the disease
 - e) There are added somatoform complaints
-

267. In simple schizophrenia:

- a) Loss of volition
 - b) Motivation is present
 - c) Antipathy for the surroundings
 - d) Aggression
 - e) Self-isolation
-

268. In which periods of life usually become apparent the elements of personality disorder:

- a) Childhood
 - b) As a teenager
 - c) Beginning of adult life
 - d) Maturity
 - e) Older
-

269. Inhalant use LESS often correlates with which of the following comorbid conditions?

- a) Borderline personality disorder
 - b) Conduct disorder
 - c) Major depression
 - d) Manic episode
 - e) Schizophrenia
-

270. Is characteristic for catatonic excitement, EXCEPT:

- a) echolalia
- b) catalepsy
- c) echopraxia
- d) motor inhibition

e) motor excitation

271. Main indications for psychotherapy

- a) the treatment of most mental disorders
 - b) the treatment psychosis (psychotic states)
 - c) in the case of somatic disease with a significant psychological component
 - d) patients with the loss of insight
 - e) in state of normality to optimize volitional and emotional processes, physical mental or intellectual performances
-

272. Major signs and symptoms of the benzodiazepine discontinuation syndrome commonly include:

- a) hyperpyrexia
 - b) grand mal seizures
 - c) psychosis
 - d) nightmares
 - e) death
-

273. Mouth ulceration is LESS likely to be associated with which of the following types of withdrawal?

- a) Alcohol
 - b) Benzodiazepines
 - c) Cocaine
 - d) Nicotine
 - e) Opioids
-

274. Non-organic sleep disorders include:

- a) absences
 - b) insomnia
 - c) hypersomnia
 - d) somnambulism
 - e) trances
-

275. Paranoid personality disorder is characterized by:

- a) Delusions of control
- b) Thought echo

- c) Excessive sensibility to failures
- d) Tendency to be always feeling that someone has something against one
- e) Associative process rupture

-
- 276.** Periodic somnolence accompanied by bulimia (Kleine-Levin syndrome) has the following symptoms, EXCLUDING
- a) An episodic disorder characterized by somnolence and bulimia
 - b) Patients are mainly adolescent boys, who sleep around 18 hours per day and wake up only when they need to eat
 - c) In the short period of wakefulness they seem to be confused, agitated and sometimes experience hallucinations.
 - d) Insomnia
 - e) Anorexia

-
- 277.** Postpartum psychiatric disorders include:
- a) Munchausen syndrome
 - b) Febrile schizophrenia
 - c) Confusion state
 - d) Neuroleptic malignant syndrome
 - e) Acute delirious states

-
- 278.** Risk factors for the development of adolescent substance abuse include all of the following:
- a) early onset of cigarette smoking
 - b) diminished parental supervision
 - c) pervasive developmental disorder
 - d) parental substance abuse
 - e) conduct disorder

-
- 279.** Schizoid personality disorder involves the following conditions:
- a) Tendency for permanent rancor
 - b) Emotional coldness
 - c) Persistent attitude of irresponsibility and neglect of norms
 - d) Detachment
 - e) Auto-dramatization

-
- 280.** Schizoid personality disorder is characterized by the following conditions:
- a) Tendency to be always suspicious
 - b) Emotional withdrawal
 - c) Attitude of irresponsibility and social norms disrespect
 - d) Violence explosions
 - e) Few (if even one is present) activities that generate pleasure

-
- 281.** Sexual dysfunctions, that aren't caused by any organic pathology, include:
- a) Lack of/diminished sexual desire
 - b) Sexual aversion
 - c) Pedophilia
 - d) Exhibitionism
 - e) Organic dysfunction

-
- 282.** Somatic troubles in anorexia nervosa are:
- a) Collapse estates
 - b) Constipations
 - c) Dizziness
 - d) Decrease in school performance results
 - e) Improvement in school performance results

-
- 283.** Specific medications in alcohol dependence treatment:
- a) Esperal
 - b) Seduxen
 - c) Teturam
 - d) Dimedrol
 - e) Haloperidol

-
- 284.** The classification of tics includes all with EXCEPTION:
- a) transient tic
 - b) chronic motor or vocal tic
 - c) vocal tics associated with multiple motor tic (Jilles de la Tourette syndrome)
 - d) subacute tic

e) regular (common) tic

285. The first choice drug used for bipolar disorder is:

- a) A hypnotic agent
 - b) A thymostabilizing agent
 - c) An anxiolytic
 - d) A mood stabilizer
 - e) A antidepressant agent
-

286. The first choice drug used for bipolar disorder is:

- a) Trazodon
 - b) Lithium
 - c) Valproic acid
 - d) Diazepam
 - e) Melatonin
-

287. The first choice drug used for bipolar disorder is:

- a) Clomipramine
 - b) Carbamazepine
 - c) Valproic acid
 - d) Diazepam
 - e) Venlafaxine
-

288. Types of evolution in schizophrenia are:

- a) Continues
 - b) Episodic, with progressive defect
 - c) Remitting episode
 - d) Residual
 - e) Acute
-

289. What are the assumptions on which relies the psychosomatic medicine:

- a) There is a unity of mind and body (reflected in term mind-body medicine)
- b) All the disorders are caused by stress and the only way to help is by healing you soul
- c) Although there are conditions that are caused by biological

factors, the main problem in all somatic disorders relies on psychological conflicts.

d) Psychological factors must be taken into account when considering all disease states

e) All the diseases have a pathophysiology that is unclear, but which can be explained by psychological conflict

290. What does the skill of psychotherapist mean?

- a) University and strictly regulated
 - b) A distinct profession, psychotherapists have a specific training
 - c) A guarantee of physical, sexual, social and psychological integrity, self-pride and respect of the patient/client in therapy process
 - d) Competent and ethic approach
 - e) Confidentiality agreement for any information that is known about the client.
-

291. What from below is correct about Asperger's Disorder:

- a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to require social interaction
 - b) Persistent preoccupation with parts of objects
 - c) The disturbance causes clinically significant impairment in social, occupational, or other important areas in functioning
 - d) Frequent delusions, that immobilize the patient
 - e) The lack of acetylcholine in CNS is more likely to explain the disorder
-

292. What from below is correct about Asperger's Disorder:

- a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to require social interaction
- b) Failure to develop peer relationship appropriate to developmental level
- c) A lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g. by a lack of showing, bringing, or pointing out objects of interest to other people)
- d) Persistent preoccupation with parts of objects

e) It is curable, with good long-term prognosis

293. What from below is correct about Asperger's Disorder:

- a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to require social interaction
- b) Failure to develop peer relationship appropriate to developmental level
- c) A lack of spontaneous seeking to share enjoyment, interests, or achievements with other people (e.g. by a lack of showing, bringing, or pointing out objects of interest to other people)
- d) Lack of social or emotional reciprocity
- e) It is curable, with good long-term prognosis

294. What from below is correct about Asperger's Disorder:

- a) Encompassing preoccupation with one or more stereotyped and restricted patterns of interest that is abnormal either in intensity or in focus
- b) Apparently inflexible adherence to specific, nonfunctional routines or rituals
- c) Stereotyped and repetitive motor mannerisms (e.g., hand or finger flapping or twisting, or complex whole-body movements)
- d) The lack of acetylcholine in CNS is more likely to explain the disorder
- e) It is treated with fizostigmine

295. What from below is correct about Attention-deficit/hyperactivity Disorder:

- a) Child often has difficulty sustaining attention in tasks or play activities
- b) It can be cured only with psychotropic drugs
- c) Child often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not oppositional behavior or failure to understand instructions)
- d) Child often has difficulty organizing tasks and activities
- e) it occurs in Mentally Retarded children

296. What from below is correct about Attention-deficit/hyperactivity Disorder:

- a) They should be isolated and offered special care, and learning programs
- b) Child often does not seem to listen when spoken to directly
- c) Child often does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not oppositional behavior or failure to understand instructions)
- d) Child often has difficulty organizing tasks and activities
- e) it occurs in Mentally Retarded children

297. What from below is correct about Attention-deficit/hyperactivity Disorder:

- a) Child often has difficulty sustaining attention in tasks or play activities
- b) Child often does not seem to listen when spoken to directly
- c) The etiology is linked to alcohol abuse in parents
- d) Child often has difficulty organizing tasks and activities
- e) it occurs in Mentally Retarded children

298. What from below is correct about Autistic Disorder:

- a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
- b) Failure to develop peer relationships appropriate to developmental level
- c) Delay in, or total lack of, the development of spoken language (not accompanied by an attempt to compensate through alternative modes of communication such as gesture or mime)
- d) Stereotyped and repetitive use of language or idiosyncratic language
- e) Very smart children, often gifted with a very high IQ and good social adaptation

299. What from below is correct about Autistic Disorder:

- a) Autistic disorder is generally a lifelong disorder with a guarded prognosis.

- b) Two-thirds remain severely handicapped and dependent.
- c) The children need to be treated in specialized hospitals, with no contact with the outer world
- d) Frequent delusions, that immobilize the patient
- e) Very smart children, often gifted with a very high IQ and good social adaptation

-
- 300.** What from below is correct about Autistic Disorder:
- a) Very smart children, often gifted with a very high IQ and good social adaptation
 - b) Delay in, or total lack of, the development of spoken language (not accompanied by an attempt to compensate through alternative modes of communication such as gesture or mime)
 - c) Stereotyped and repetitive use of language or idiosyncratic language
 - d) Lack of varied, spontaneous make-believe play or social imitative play appropriate to developmental level
 - e) Stereotyped and repetitive motor mannerisms (e.g., hand or finger flopping or twisting, or complex whole-body movements)

-
- 301.** What from below is correct about Autistic Disorder:
- a) The children need to be treated in specialized hospitals, with no contact with the outer world
 - b) Two-thirds remain severely handicapped and dependent
 - c) Improved prognosis if IQ > 70 and communication skills are seen by ages 5 to 7 years
 - d) Frequent delusions, that immobilize the patient
 - e) Very smart children, often gifted with a very high IQ and good social adaptation

-
- 302.** What from below is correct about Autistic Disorder:
- a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
 - b) Stereotyped and repetitive use of language or idiosyncratic language
 - c) Lack of varied, spontaneous make-believe play or social imitative

- play appropriate to developmental level
- d) Frequent delusions, that immobilize the patient
- e) Very smart children, often gifted with a very high IQ and good social adaptation

-
- 303.** What from below is correct about Autistic Disorder:
- a) Marked impairment in the use of multiple nonverbal behaviors such as eye-to-eye gaze, facial expression, body postures, and gestures to regulate social interaction
 - b) Delay in, or total lack of, the development of spoken language (not accompanied by an attempt to compensate through alternative modes of communication such as gesture or mime)
 - c) Stereotyped and repetitive use of language or idiosyncratic language
 - d) Lack of varied, spontaneous make-believe play or social imitative play appropriate to developmental level
 - e) Very smart children, often gifted with a very high IQ and good social adaptation

-
- 304.** What from below is correct about Dysthymic Disorder:
- a) Less severe than major depressive disorder. More common and chronic in women than in men.
 - b) Insidious onset. Occurs more often in persons with history of long-term stress or sudden losses;
 - c) The patient has: poor appetite/ overeating, sleep problems, fatigue, low self-esteem, poor concentration or difficulty making decisions, and feelings of hopelessness.
 - d) Should be present seizures, at least once per week
 - e) Delusions that are mood incongruent

-
- 305.** What from below is correct about Pseudodementia
- a) Is a major depressive disorder presenting as cognitive dysfunction resembling dementia.
 - b) Occurs in elderly persons, and more often in patients with previous history of mood disorder.
 - c) Depression is primary and preeminent, antedating cognitive deficits.

- d)** Are present pseudohallucinations, mostly auditory as in endogenous process
- e)** Are present true hallucinations, mostly visual as in organic impairment

306. What from below is correct about Pseudodementia:

- a)** Occurs in elderly persons, and more often in patients with previous history of mood disorder.
- b)** It's a hidden type of schizophrenia, with clinical futures of dementia
- c)** Depression is primary and preeminent, antedating cognitive deficits
- d)** Are present pseudohallucinations, mostly auditory as in endogenous process
- e)** Are present true hallucinations, mostly visual as in organic impairment

307. What from below is correct about Pseudodementia:

- a)** Is a major depressive disorder presenting as cognitive dysfunction resembling dementia.
- b)** It's a hidden type of schizophrenia, with clinical futures of dementia
- c)** Depression is primary and preeminent, antedating cognitive deficits.
- d)** Are present pseudohallucinations, mostly auditory as in endogenous process
- e)** Are present true hallucinations, mostly visual as in organic impairment

308. What from below is correct about Rett's Disorder:

- a)** Apparently normal prenatal and perinatal development
- b)** Apparently normal psychomotor development through the first 5 months after birth
- c)** Appearance of poorly coordinated gait or trunk movements
- d)** Severely impaired expressive and receptive language development with severe psychomotor retardation
- e)** It is curable, with good long-term prognosis

309. What from below is correct about Rett's Disorder:

- a)** Apparently normal prenatal and perinatal development
- b)** Normal head circumference at birth
- c)** Appearance of poorly coordinated gait or trunk movements
- d)** Severely impaired expressive and receptive language development with severe psychomotor retardation
- e)** Frequent delusions, that immobilize the patient

310. What from below is correct about Rett's Disorder:

- a)** Apparently normal prenatal and perinatal development
- b)** Apparently normal psychomotor development through the first 5 months after birth
- c)** Normal head circumference at birth
- d)** Deceleration of head growth between ages 5 and 48 months
- e)** It is treated with droperidol

311. What from below is correct about Rett's Disorder:

- a)** Loss of previously acquired purposeful hand skills between ages 5 and 30 months with the subsequent development of stereotyped hand movements (e.g, hand wringing or hand washing)
- b)** Loss of social engagement early in the course (although often social interaction develops later
- c)** It is curable, with good long-term prognosis
- d)** Very smart children, often gifted with a very high IQ and good social adaptation
- e)** Deceleration of head growth between ages 5 and 48 months

312. What is included in the General Strategy in Evaluating Suicidal Patients:

- a)** Always assume that family or friends will be able to watch a patient 24 hours a day
- b)** Protect yourself
- c)** Prevent harm
- d)** Rule out cognitive disorders
- e)** Rule out impending psychosis

- 313.** What is Psychotherapy?
- a) is an interdisciplinary field - situated on the border between medicine and psychology
 - b) method of treatment is comprehensive, deliberate and planned, by scientific means and methodologies
 - c) is a complex treatment that includes medical approach, psychopharmacological, psychological and social
 - d) is a clinical and theoretical framework, centered on the reduction or elimination of symptoms, mental or psychosocial distress states and / or psychosomatic and dysfunctional behaviors
 - e) is a psychological approach of the person giving advices

- 314.** Which categories of clients DO NOT benefit from psychotherapy?
- a) People with mental deficiencies who are unable to understand interpretations made by psychotherapist
 - b) People who fail to seek help
 - c) People who fail to establish human contact
 - d) People who experience daily existential crisis
 - e) Psychopaths, certain psychotic patients, especially schizophrenic

- 315.** Which drugs should be administrated in case of hallucinatory syndrome, EXCEPT:
- a) Aminazine
 - b) Seduxen
 - c) Nuredol
 - d) Rudotel
 - e) Haloperidol

- 316.** Which neurotransmitters are mostly implied in pathophysiology of psychosomatic disorders as a neurotransmitter response:
- a) Catecholamine, serotonin
 - b) GABA, Na+, L-DOPA
 - c) GABA, noradrenalin, acetylcholine
 - d) Catecholamine, dopamine
 - e) Glucocorticoids, T3/T4, Adrenalin

- 317.** Which of the following antipsychotic drugs is LESS likely to cause agranulocytosis:
- a) Haloperidol
 - b) Clozapine
 - c) Trifluoperazine
 - d) Aripiprazol
 - e) Quetiapine

- 318.** Which of the following antipsychotic drugs is NOT considered to relieve the symptoms of tardive dyskinesia, and more likely to worsen it:
- a) Haloperidol
 - b) Trifluoperazine
 - c) Chlormpromazine
 - d) Levomepromazine
 - e) Clozapine

- 319.** Which of the following are adverse event of typical antipsychotic drugs:
- a) Metabolic changes (X metabolic syndrome)
 - b) Extrapyrimalidal symptoms
 - c) Restlessness
 - d) Hyper salivation
 - e) Tardive dyskinesia

- 320.** Which of the following are criteria for panic attack:
- a) Fear of special places, or having social activities
 - b) Nausea or abdominal distress
 - c) Feeling dizzy, unsteady, lightheaded, or faint
 - d) Derealization (feelings of unreality) or depersonalization (being detached from oneself)
 - e) Fear of losing control or going crazy

- 321.** Which of the following are criteria for panic attack:
- a) Fear of special objects, or being lonely
 - b) Fear of dying

- c) Palpitations, pounding heart, or accelerated heart rate
- d) Sweating
- e) Trembling or shaking

322. Which of the following are TRUE about phobias:

- a) A phobia is an irrational fear of an object (e.g., horses, heights, needles).
- b) The person experiences massive anxiety when exposed to the feared object and tries to avoid it at all costs.
- c) Exposure to the phobic stimulus almost invariably provokes an immediate anxiety response, which may take the form of a situationally bound or situationally predisposed panic attack.
- d) The avoidance, anxious anticipation, or distress in the feared situation(s) interferes significantly with the person's normal routine, occupational (or academic) functioning, or social activities or relationships, or there is marked distress about having the phobia.
- e) Children must always recognize that the fear is excessive or unreasonable

323. Which of the following are UNCOMMON adverse events of typical antipsychotic drugs:

- a) Metabolic changes (X metabolic syndrome)
- b) Extrapyramidal symptoms
- c) Anemia
- d) Hyponatremia
- e) Priapism

324. Which of the following areas are impaired in Major Depressive Episode:

- a) Mood
- b) Cognition
- c) Social performance
- d) Delusional thoughts of persecution
- e) Delirium

325. Which of the following can be used as main treatment of obsessive-compulsive disorder:

- a) Memantine
- b) Clomipramine
- c) Fluoxetine
- d) Quetiapine
- e) Psychotherapy

326. Which of the following conditions is likely to be regarded as a psychosomatic disorder:

- a) Asthma
- b) Arterial hypertension
- c) Headaches
- d) Ulcerative colitis
- e) Willson-Konovalov disease

327. Which of the following drugs is an opioid antagonist?

- a) Naloxone
- b) Naltrexone
- c) Nalorphine
- d) Apomorphine
- e) Argofan

328. Which of the following explanations is true about agoraphobia:

- a) Morbid fear of open places or leaving the familiar setting of the home.
- b) Morbid fear of leaving the familiar setting of the home.
- c) May be present with or without panic attacks.
- d) Morbid fear of sharp objects and knives. May be present with or without panic attacks.
- e) Morbid fear of height and high positions in space. May be present with or without panic attacks.

329. Which of the following explanations is true about akathisia:

- a) Subjective feeling of motor restlessness
- b) Is characterized by a compelling need to be in constant movement
- c) It may be seen as an extrapyramidal adverse effect of

antipsychotic medication.

d) Subjective feeling of restlessness manifested by a compelling need to be in constant fear; may be seen as a psychological adverse effect of antidepressant medication.

e) State in which one feels little or no pain. Can occur under hypnosis and in dissociative disorder.

330. Which of the following explanations is true about behavior therapy:

a) A therapy that focuses on overt and observable behavior and uses various conditioning techniques derived from learning theory to directly modify the patient's behavior.

b) This therapy is directed exclusively toward symptomatic improvement, without addressing psychodynamic causation

c) A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.

d) A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression. Intrapsychic conflicts are not addressed. Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.

e) A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.

331. Which of the following explanations is true about catalepsy:

a) Condition in which persons maintain the body position into which they are placed

b) It is observed in severe cases of catatonic schizophrenia.

c) Also called waxy flexibility and cerea flexibilitas.

d) False perception of orders that a person may feel obliged to obey or unable to resist

e) Disturbances of consciousness manifested by a disordered orientation in relation to time, place, or person.

332. Which of the following explanations is true about cognitive-behavioral therapy:

a) A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.

b) A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world.

c) By this theory, maladaptive behavior is secondary to ingrained, stereotyped thoughts, which can lead to cognitive distortions or errors in thinking.

d) The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.

e) A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.

333. Which of the following explanations is true about confabulation:

a) Unconscious filling of gaps in memory by imagining experiences or events that have no basis in fact,

b) It is commonly seen in amnesic syndromes; should be differentiated from lying.

c) Illusion of visual recognition in which a new situation is incorrectly regarded as a repetition of a previous experience.

d) False belief, based on incorrect inference about external reality, that is firmly held despite objective and obvious contradictory proof or evidence and despite the fact that other members of the culture do not share the belief.

e) Gradual or sudden deviation in train of thought without blocking; sometimes used synonymously with loosening of association.

334. Which of the following explanations is true about family therapy:

- a)** A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.
 - b)** A therapy that focuses on overt and observable behavior and uses various conditioning techniques derived from learning theory to directly modify the patient's behavior. This therapy is directed exclusively toward symptomatic improvement, without addressing psychodynamic causation.
 - c)** A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world. Maladaptive behavior is secondary to ingrained, stereotyped thoughts, which can lead to cognitive distortions or errors in thinking. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.
 - d)** A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be.
 - e)** This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.
-

335. Which of the following explanations is true about flat affect:

- a)** Absence or near absence of any signs of affective expression.
- b)** It is seen in Schizophrenia as part of negative symptomatic
- c)** Mental state characterized by feelings of sadness, loneliness, despair, low self-esteem and self-reproach; accompanying signs include psychomotor retardation or at times, agitation, withdrawal from interpersonal contact, and vegetative symptoms, such as

insomnia and anorexia.

d) Oscillation of a person's emotional feeling tone between periods of elation and periods of depression.

e) Depressive delusion that the world and everything related to it have ceased to exist.

336. Which of the following explanations is true about interpersonal therapy:

- a)** A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud; the major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.
 - b)** A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression.
 - c)** Intrapsychic conflicts are not addressed
 - d)** Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.
 - e)** A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.
-

337. Which of the following explanations is true about psychoanalysis:

- a)** A theory of human mental phenomena and behavior, a method of psychic investigation and research, and a form of psychotherapy originally formulated by Freud
- b)** The major goal of the therapy is to help the patient develop insight into unconscious conflicts, based on unresolved childhood wishes and manifested as symptoms, and to develop more adult patterns of interacting and behaving.
- c)** A therapy that is based on the theory that behavior is determined by the way in which people think about themselves and their roles in the world. Maladaptive behavior is secondary to ingrained,

stereotyped thoughts, which can lead to cognitive distortions or errors in thinking. The theory is aimed at correcting cognitive distortions and the self-defeating behaviors that result from them.

d) A short-term psychotherapy, lasting 12 to 16 weeks, developed specifically for the treatment of nonbipolar, nonpsychotic depression. Intrapsychic conflicts are not addressed. Emphasis is on current interpersonal relationships and on strategies to improve the patient's interpersonal life.

e) A therapy that is based on the theory that a family is a system that attempts to maintain homeostasis, regardless of how maladaptive the system may be. This theory has been referred to as a "family systems orientation." and the techniques include focusing on the family rather than on the identified patient.

338. Which of the following explanations is true about psychotherapy:

- a)** A treatment for mental illness and behavioral disturbances
- b)** A treatment in which a trained person establishes a professional contract with the patient
- c)** A treatment in which the therapist, through definite therapeutic communication, both verbal and nonverbal attempts to alleviate the emotional disturbance, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.
- d)** A treatment for normal people and behavioral disturbances in which any person could establish a contract with the patient and through communication, both verbal and nonverbal attempts to alleviate the emotional disturbance, reverse or change maladaptive patterns of behavior, and encourage personality growth and development.
- e)** A set of psychological technics offered for mental illness and behavioral disturbances in which the patient is helped to solve some habitual problems or emotional disturbance, maladaptive patterns of behavior by reading books and forgetting the issues that caused the disturbance in the first place.

339. Which of the following functions can be damaged in schizophrenia:

- a)** Memory
- b)** Thinking
- c)** Perception
- d)** Consciousness
- e)** Behavior

340. Which of the following functions of psychic is mainly NOT affected in obsessive-compulsive disorder:

- a)** Consciousness, emotions, perception
- b)** Behavior
- c)** Consciousness, perception
- d)** Thought
- e)** Thought, consciousness

341. Which of the following features are present in Major Depressive Episode:

- a)** Depressed mood
- b)** Insomnia or hypersomnia
- c)** Fatigue or loss of energy
- d)** Delusional thoughts of persecution
- e)** Delirium

342. Which of the following is a component of acute nicotine intoxication?

- a)** Tachycardia
- b)** Visual hallucinations
- c)** Bizarre dreams
- d)** Lability of mood
- e)** Cardiac arrhythmias

343. Which of the following is a dissociative disorder:

- a)** dissociative amnesia
 - b)** dissociative fugue
 - c)** dissociative identity disorder
 - d)** depersonalization disorder
 - e)** dissociative mood disorder
-

- 344.** Which of the following is a mood disorder:
- a) Schizophrenia
 - b) Dysthymic disorder
 - c) Bipolar disorder
 - d) Bulimia nervosa
 - e) Panic disorder
-

- 345.** Which of the following is a mood disorder:
- a) Schizophrenia
 - b) Panic disorder
 - c) Dysthymic disorder
 - d) Major depressive disorder
 - e) Bulimia nervosa
-

- 346.** Which of the following is a mood disorder:
- a) Schizophrenia
 - b) Major depressive disorder
 - c) Somatization disorder
 - d) Bulimia nervosa
 - e) Cyclothymic disorder
-

- 347.** Which of the following is a mood disorder:
- a) Major depressive disorder
 - b) Bipolar disorder
 - c) Panic disorder
 - d) Somatization disorder
 - e) Bulimia nervosa
-

- 348.** Which of the following is a neuroleptic:
- a) Risperidone
 - b) Clozapine
 - c) Imipramine
 - d) Aripiprazol
 - e) Quetiapine
-

- 349.** Which of the following is a neuroleptic:
- a) Chlorpromazine

- b) Clozapine
 - c) Clomipramine
 - d) Aripiprazol
 - e) Olanzapine
-

- 350.** Which of the following is a neuroleptic:
- a) Haloperidol
 - b) Clozapine
 - c) Setraline
 - d) Clorpromazine
 - e) Trifluoperazine
-

- 351.** Which of the following is a Pervasive Developmental Disorder:
- a) Schizophrenia
 - b) Tourette's disorder
 - c) Autistic disorder
 - d) Rett's disorder
 - e) Asperger's disorder
-

- 352.** Which of the following is a Pervasive Developmental Disorder:
- a) Schizophrenia
 - b) Tourette's disorder
 - c) Autistic disorder
 - d) Rett's disorder
 - e) Asperger's disorder
-

- 353.** Which of the following is a Pervasive Developmental Disorder:
- a) Schizophrenia
 - b) Rett's disorder
 - c) Autistic disorder
 - d) Childhood disintegrative disorder
 - e) Asperger's disorder
-

- 354.** Which of the following is a therapeutic effect for which

cannabinoids are commonly used?

- a) Weight loss
- b) Reduced muscle spasticity
- c) Relief of nausea and vomiting
- d) Decreased intraocular pressure
- e) Appetite stimulant

355. Which of the following is a therapeutic indication for use of anabolic-androgenic steroids?

- a) Anemia
- b) Hereditary angioedema
- c) Hyperthyroidism
- d) Male hypogonadism
- e) Osteoporosis

356. Which of the following is a type of schizophrenia:

- a) Paranoid
- b) Hebephrenia
- c) Catatonic
- d) Disorganized
- e) Affective

357. Which of the following is a type of schizophrenia:

- a) Paranoid
- b) Simple
- c) Catatonic
- d) Disorganized
- e) Negative

358. Which of the following is an antidepressant drug:

- a) Venlafaxine
- b) Ziprasidone
- c) Amitriptyline
- d) Clozapine
- e) Escitalopram

359. Which of the following is an antidepressant drug:

- a) Olanzapine
- b) Ziprasidone
- c) Paroxetine
- d) Amitriptyline
- e) Clozapine

360. Which of the following is an antidepressant drug:

- a) Amitriptyline
- b) Escitalopram
- c) Clomipramine
- d) Chlorpromazine
- e) Venlafaxine

361. Which of the following is an antidepressant drug:

- a) Fluoxetine
- b) Escitalopram
- c) Clomipramine
- d) Clozapine
- e) Paroxetine

362. Which of the following is an antidepressant drug:

- a) Fluoxetine
- b) Citalopram
- c) Clomipramine
- d) Memantine
- e) Venlafaxine

363. Which of the following is correct about Mental Retardation (MR):

- a) Occurs in 1% of the population
- b) In about 85% of persons with MR, the condition is mild and they are considered educable, being able to attain about a sixth-grade education
- c) It can have a genetic etiology (Down syndrome, Fragile X syndrome, Prader-Willi syndrome, Rett's disorder, etc)
- d) The only cause of mental retardation is alcohol abuse of the parents

e) It should be present delusions until age 18 years

364. Which of the following is correct about Mental Retardation (MR):

- a) Diagnosis can be made after the history, a standardized intellectual assessment, and a measure of adaptive functioning indicate that a child's current behavior is significantly below the expected level
 - b) In about 85% of persons with MR, the condition is mild and they are considered educable, being able to attain about a sixth-grade education.
 - c) It can be cured with a surgical procedure
 - d) The only cause of mental retardation is alcohol abuse of the parents
 - e) It should be present delusions until age 18 years
-

365. Which of the following is correct about Mental Retardation(MR):

- a) Diagnosis can be made after the history, a standardized intellectual assessment, and a measure of adaptive functioning indicate that a child's current behavior is significantly below the expected level
 - b) It can have organic brain lesion etiology (Sequelae of infection, toxin, or brain trauma sustained prenatally, perinatally, or later (e.g., congenital rubella or fetal alcohol syndrome etc)
 - c) Treated with antipsychotics the patients with MR can have periods of high cognitive performance
 - d) It should be present delusions until age 18 years
 - e) With age, the MR can decrease, and the patients with MR can have normal cognitive performance
-

366. Which of the following is correct about Mental Retardation(MR):

- a) Diagnosis can be made after the history, a standardized intellectual assessment, and a measure of adaptive functioning indicate that a child's current behavior is significantly below the expected level
- b) In about 85% of persons with MR, the condition is mild and they are considered educable, being able to attain about a sixth-grade education.

c) It should be present delusions until age 18 years

d) It can have a genetic etiology(Down syndrome , Fragile X syndrome, Prader-Willi syndrome, Rett's disorder, etc)

e) It can have organic brain lesion etiology (Sequelae of infection, toxin, or brain trauma sustained prenatally, perinatally, or later (e.g., congenital rubella or fetal alcohol syndrome etc).

367. Which of the following is indicated or can give some benefits in the treatment of acute disulfiram (Antabuse) overdose?

- a) Activated charcoal
 - b) Decontamination
 - c) Gastric lavage
 - d) Hemodialysis
 - e) Syrup of ipecac
-

368. Which of the following is NOT a Pervasive Developmental Disorder:

- a) Schizophrenia
 - b) Tourette's disorder
 - c) Autistic disorder
 - d) Rett's disorder
 - e) Asperger's disorder
-

369. Which of the following is NOT a Pervasive Developmental Disorder:

- a) Mental retardation
 - b) Tourette's disorder
 - c) Autistic disorder
 - d) Schizophrenia
 - e) Asperger's disorder
-

370. Which of the following is present in obsessive-compulsive disorder:

- a) Recurrent intrusive thoughts
- b) Recurrent intrusive images
- c) Marked anxiety and distress
- d) Repetitive behaviors

e) The obsessions and compulsions are ego-syntonic

371. Which of the following is the definition of Personality disorders:

- a) The term personality is universally used to describe the characteristic behavior responses of an individual, based of his or her internal or external experiences; it is predictable and stable.
 - b) The term personality is universally used to describe the characteristic affective responses of an individual, based of his or her internal or external experiences; it is not very predictable nor stable.
 - c) The term personality is universally used to describe the characteristic psychomotor and thought responses of an individual, based of his or her internal or external experiences; it is not very predictable nor stable.
 - d) The term personality is universally used to describe the memory and conscious symptoms of an individual that results in significant impairment of adaptive functioning and/or personal distress.
 - e) A personality disorder is diagnosed when an individual's behavior deviates from the normal range of variation found in the majority of people, resulting in significant impairment of adaptive functioning and/or personal distress.
-

372. Which of the following is TRUE about Antisocial personality disorder

- a) They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration.
- b) They reject discipline and authority and have an underdeveloped conscience. It should be noted that though this disorder is associated with criminality, it is not synonyms with it.
- c) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long- lasting relationships.
- d) Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success, exaggerated responses to criticism, an over-concern with self-esteem

and self- image, and disturbance in interpersonal relationships.

e) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

373. Which of the following is TRUE about Avoidant personality disorder:

- a) They are characterized by their inability to conform to the social norms that govern individual behavior.
 - b) They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image.
 - c) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive.
 - d) Patients have a shy or timid personality and show an intense sensitivity to rejection.
 - e) They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex
-

374. Which of the following is TRUE about Borderline personality disorder:

- a) They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image.
- b) Suicide attempts and acts of self-mutilation are common occurrences among this patients. These individuals are very impulsive, and suffer from identity problems as well as feelings of emptiness and boredom.
- c) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long- lasting relationships.

d) Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success, exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships.

e) Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

375. Which of the following is TRUE about Dependent personality disorder:

a) Patients are predominantly dependent and submissive.

b) They lack self-confidence and get others to assume responsibility for major areas of their lives.

c) They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization. Such individuals are perceived as strikingly odd or strange, even to laypersons.

d) Characterized by perfectionism, orderliness, inflexibility, stubbornness, emotional constriction and indecisiveness. Also called anancastic personality disorder.

e) Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention. They tend to be immature, dependent, and are often seductive.

376. Which of the following is TRUE about dissociative amnesia:

a) The amnesia has always a organic trauma background

b) Dissociative phenomenon is specifically amnesic in that the patient is unable to recall an important memory, which is usually traumatic or stressful, but retains the capacity to learn new material.

c) The diagnostic criteria for dissociative amnesia emphasizes that the forgotten information is usually of traumatic or stressful nature.

d) Onset of dissociative amnesia is often abrupt, and history usually shows a precipitating emotional trauma charged with painful emotions and psychological conflict.

e) The amnesia is not the result of a general medical condition or the ingestion of a substance. Amnesia may provide a primary or a

secondary gain (i.e.. a woman who is amnesic about the birth of a dead infant).

377. Which of the following is TRUE about dissociative fugue:

a) It is characterized by sudden, unexpected travel away from home, with the inability to recall some or all of one's past.

b) Memory loss is sudden and is associated with purposeful, unconfused travel, often for extended periods of time.

c) Once they suddenly return to their former selves, they recall the time antedating the fugue, but they are amnesic for the period of the fugue itself.

d) Predisposing factors include borderline, histrionic, schizoid personality disorders; alcohol abuse; mood disorders; organic disorders (especially epilepsy); and a history of head trauma.

e) The recovery is not spontaneous and can lead to brain trauma

378. Which of the following is TRUE about functional response to stress (George Engel):

a) Increased synthesis of brain norepinephrine.

b) Increased serotonin turnover may result in eventual depletion of serotonin.

c) Increased dopaminergic transmission.

d) Immune activation occurs with release of hormonal immune factors (cytokines) in acute stress.

e) Number and activity of natural killer cells increases in chronic stress, causing tumors.

379. Which of the following is TRUE about functional response to stress (George Engel):

a) Testosterone decrease with prolonged stress.

b) Immune activation occurs with release of hormonal immune factors (cytokines) in acute stress.

c) Number and activity of natural killer cells decreased in chronic stress.

d) Decreased synthesis of brain norepinephrine

e) Increased dopaminergic transmission.

380. Which of the following is TRUE about Histrionic personality disorder:

- a)** They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration.
- b)** Characterized by their flamboyant, dramatic, excitable, and over-reactive behavior, they are intent on gaining attention.
- c)** They tend to be immature, dependent, and are often seductive. These individuals have difficulty maintaining long- lasting relationships.
- d)** Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success, exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships.
- e)** Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance. They are sometimes described as having an inferiority complex.

381. Which of the following is TRUE about Narcissistic personality disorder:

- a)** They are characterized by their inability to conform to the social norms that govern individual behavior. Such persons are impulsive, egocentric, irresponsible, and cannot tolerate frustration.
- b)** They are literally on the border between neurosis and psychosis. They are characterized by extraordinarily unstable mood affect behavior, object relations, and self-image.
- c)** Persistent pattern of grandiosity, a heightened sense of self-importance, preoccupation with fantasies of ultimate success
- d)** Exaggerated responses to criticism, an over-concern with self-esteem and self- image, and disturbance in interpersonal relationships.
- e)** Patients have a shy or timid personality and show an intense sensitivity to rejection. They are not asocial and show a great desire for companionship; however, they have a strong need for reassurance and a guarantee of uncritical acceptance

382. Which of the following is TRUE about obsessive-compulsive disorder:

- a)** Recurrent and persistent thoughts, impulses, or images that are experienced at same time during the disturbance, as intrusive and inappropriate and that cause marked anxiety or distress
- b)** The thoughts, impulses, or images are not simply excessive worries about real-life problems
- c)** The person attempts to ignore or suppress such thoughts, impulses, or images, or to neutralize them with some other thought or action
- d)** The person recognizes that the obsessional thoughts, impulses, or images are a product of his or her own mind (not imposed from without. as in thought insertion)
- e)** The person hardly realize that he has a psychiatric problem, denying it, an almost never try to seek help

383. Which of the following is TRUE about obsessive-compulsive disorder:

- a)** It usually occurs in adolescence, with high preoccupation and emotional distress, and persists for years as part of patient's personality
- b)** Involves recurrent intrusive ideas, images, ruminations, impulses, thoughts (obsessions) or repetitive patterns of behavior or actions (compulsions).
- c)** Both obsessions and compulsions are ego-alien and produce anxiety if resisted.
- d)** The obsessions or compulsions cause marked distress, are time consuming (take more than 1 hour a day), or significantly interfere with the person's normal routine, occupational (or academic) functioning, or usual social activities or relationships.
- e)** The person recognizes that the obsessional thoughts, impulses, or images are a product of his or her own mind (not imposed from without. as in thought insertion)

384. Which of the following is TRUE about Paranoid personality disorder:

- a)** Characterized by their intense distrust and suspiciousness of

others, they are often hostile, irritable, hypersensitive, envious, or angry and will not take responsibility for their own actions, often projecting such responsibility onto others.

b) They may be bigots, injustice collectors, pathologically jealous spouses, or litigious cranks

c) They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization. Such individuals are perceived as strikingly odd or strange, even to laypersons.

d) Characterized by perfectionism, orderliness, inflexibility, stubbornness, emotional constriction and indecisiveness. Also called anancastic personality disorder.

e) Patients are predominantly dependent and submissive. They lack self-confidence and get others to assume responsibility for major areas of their lives.

385. Which of the following is TRUE about Schizoid personality disorder:

a) They are often perceived as eccentric and introverted

b) They are characterized by their isolated lifestyles and their lack of interest in social interaction.

c) They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization. Such individuals are perceived as strikingly odd or strange, even to laypersons.

d) Characterized by perfectionism, orderliness, inflexibility, stubbornness, emotional constriction and indecisiveness. Also called anancastic personality disorder.

e) Patients are predominantly dependent and submissive. They lack self-confidence and get others to assume responsibility for major areas of their lives.

386. Which of the following is TRUE about schizophrenia:

a) Schizophrenia can be treated with psychotherapy, given strong arguments curing the patient's disbeliefs.

b) Higher mortality rate from accidents and natural causes than in general population.

c) Leading cause of death in schizophrenic patients is suicide (10% kill themselves).

d) Schizophrenic symptoms may result from increased limbic dopamine activity (positive symptoms) and decreased frontal dopamine activity (negative symptoms).

e) Dopaminergic pathology may be secondary to abnormal receptor number or sensitivity, or abnormal dopamine release (too much or too little).

387. Which of the following is TRUE about schizophrenia:

a) The main treatment is with antipsychotic drugs which have the mechanism of increasing the level of dopamine in CNS.

b) The prevalence of schizophrenia is greater in the biological parents of schizophrenic adoptees than in adoptive parents.

c) Increased norepinephrine levels in schizophrenia lead to increased sensitization to sensory input.

d) Decreased GABA activity results in increased dopamine activity which play it's role in pathogenesis.

e) Serotonin metabolism apparently is abnormal in some chronically schizophrenic patients, with both hyperserotoninemia and hyposerotoninemia being reported.

388. Which of the following is TRUE about schizophrenia:

a) The main treatment is with antidepressant drugs, which have the mechanism of decreasing the level of dopamine in CNS.

b) Schizophrenic symptoms may result from increased limbic dopamine activity (positive symptoms) and decreased frontal dopamine activity (negative symptoms).

c) Dopaminergic pathology may be secondary to abnormal receptor number or sensitivity, or abnormal dopamine release (too much or too little).

d) Decreased GABA activity results in increased dopamine activity which play it's role in pathogenesis.

e) Serotonin metabolism apparently is abnormal in some chronically schizophrenic patients, with both hyperserotoninemia and hyposerotoninemia being reported.

389. Which of the following is TRUE about schizophrenia:

a) It is a chronic disorder that usually have a good prognostic and no

residual symptoms

- b)** It is a syndrome of unknown etiology characterized by disturbances in cognition, emotion, perception, thinking, and behavior.
- c)** It is a brain disorder, with some structural and functional abnormalities visible in neuroimaging studies and having a genetic component
- d)** The prodromal and residual phases are characterized by attenuated forms of active symptoms, such as odd beliefs and magical thinking, as well as deficits in self-care and interpersonal relatedness.
- e)** The disorder is usually chronic, with a course encompassing a prodromal phase, an active phase, and a residual phase.

390. Which of the following is TRUE about Schizotypal personality disorder:

- a)** Characterized by their intense distrust and suspiciousness of others, they are often hostile, irritable, hypersensitive, envious, or angry and will not take responsibility for their own actions, often projecting such responsibility onto others.
- b)** Often perceived as eccentric and introverted, they are characterized by their isolated lifestyles and their lack of interest in social interaction.
- c)** They are characterized by magical thinking, peculiar notations, ideas of reference, illusions, and derealization.
- d)** Such individuals are perceived as strikingly odd or strange, even to laypersons.
- e)** Patients are predominantly dependent and submissive. They lack self-confidence and get others to assume responsibility for major areas of their lives.

391. Which of the following items is usually considered as good prognosis in schizophrenia:

- a)** Late onset
 - b)** Married
 - c)** Positive symptoms
 - d)** Mood disorder symptoms (especially depressive disorders)
 - e)** Insidious onset
-

392. Which of the following items is usually considered as good prognosis in schizophrenia:

- a)** Acute onset
 - b)** Married
 - c)** Positive symptoms
 - d)** Mood disorder symptoms (especially depressive disorders)
 - e)** Early onset
-

393. Which of the following items is usually considered as poor prognosis in schizophrenia:

- a)** Early onset
 - b)** Single, divorced
 - c)** Negative symptoms
 - d)** Autistic behavior
 - e)** Mood disorder symptoms (especially depressive disorders)
-

394. Which of the following medication can cause mood disorders (specially depression):

- a)** Corticosteroids
 - b)** Ethanol
 - c)** Carbamazepine
 - d)** Ibuprofen
 - e)** Escitalopram
-

395. Which of the following neurotransmitters are the LESS likely involved in the pathogenesis of mood disorders:

- a)** Serotonin
 - b)** Acetylcholine
 - c)** Norepinephrine
 - d)** Epinephrine
 - e)** 5-hydroxyindole acetic acid
-

396. Which of the following neurotransmitters are the most importantly involved in the pathogenesis of mood disorders:

- a)** Serotonin
- b)** Acetylcholine
- c)** Norepinephrine

- d) Epinephrine
- e) Dopamine

397. Which of the following neurotransmitters are the most importantly involved in the pathogenesis of mood disorders:

- a) Serotonin
- b) Acetylcholine
- c) Glutamate
- d) Epinephrine
- e) 5-hydroxyindole acetic acid

398. Which of the following psychiatric symptoms commonly co-occur with adolescent substance use disorders?

- a) Suicidal ideation and suicide attempts
- b) Panic attacks
- c) Re-experiencing, numbing, and avoidance
- d) Bingeing and purging
- e) Encopresis

399. Which of the following SHOULD BE DONE with a suicidal patient:

- a) Don't ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does plant the idea in the suicidal patients mind.
- b) Always ask about access to firearms; access to weapons increases the risk in a suicidal patient.
- c) Do not release patients from the emergency department if you are not certain that they will not harm themselves.
- d) Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital.
- e) Never worry alone-If you are unsure about the level of risk or course of action, involve others.

400. Which of the following SHOULD BE DONE with a suicidal patient:

- a) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

- b) Always ask about access to firearms; access to weapons increases the risk in a suicidal patient

- c) Do not release patients from the emergency department if you are not certain that they will not harm themselves.

- d) Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital

- e) Always deal with the patient by your self-If you are unsure about the level of risk or course of action, never show it to the patient and others, it could increase the level of anxiety in the patient and he will not trust you.

401. Which of the following SHOULD BE DONE with a suicidal patient:

- a) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

- b) Do not ask patients if they "want to die." A straightforward approach can make them feel unwanted and increases the chance to act suicidal.

- c) Conduct the interview in a safe place. Patients have been known to throw themselves out of a window.

- d) Do not offer false reassurance (e.g., "Most people think about killing themselves at some time?").

- e) Always ask about past suicide attempts, which can be related to future attempts.

402. Which of the following SHOULD BE DONE with a suicidal patient:

- a) Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.

- b) Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.

- c) Conduct the interview in any place necessary. Patients being with the doctor do not have any intent to harm themselves during the interview.

- d) Do not offer false reassurance (e.g., "Most people think about killing themselves at some time?").

e) Always ask about past suicide attempts, which can be related to future attempts

403. Which of the following SHOULD BE DONE with a suicidal patient:

- a)** Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.
- b)** Never ask about access to firearms; access to weapons increases the risk in a suicidal patient, but if you ask, it can influence them to use it in next suicidal attempts.
- c)** Do not release patients from the emergency department if you are not certain that they will not harm themselves
- d)** Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital
- e)** Never worry alone-If you are unsure about the level of risk or course of action, involve others

404. Which of the following SHOULD BE DONE with a suicidal patient:

- a)** Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea
- b)** Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.
- c)** Conduct the interview in a safe place. Patients have been known to throw themselves out of a window
- d)** Offer reassurance, the patients need it (e.g., "Most people think about killing themselves at some time?")
- e)** Always ask about past suicide attempts, which can be related to future attempts

405. Which of the following SHOULD BE DONE with a suicidal patient:

- a)** Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.
- b)** Always ask about access to firearms; access to weapons increases the risk in a suicidal patient

c) Release patients from the emergency department even if you are not certain that they will not harm themselves, trust the patient and relatives that they will monitor him, and that your therapeutic influence is enough to keep them alive.

d) Never assume that family or friends will be able to watch a patient 24 hours a day. If that is required, admit the patient to the hospital

e) Never worry alone-If you are unsure about the level of risk or course of action, involve others

406. Which of the following SHOULD BE DONE with a suicidal patient:

- a)** Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.
- b)** Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.
- c)** Conduct the interview in a safe place. Patients have been known to throw themselves out of a window.
- d)** Do not offer false reassurance (e.g., "Most people think about killing themselves at some time?")
- e)** Never ask about past suicide attempts, which can be related to future attempts, it could push the suicidal patient to do it, or plan the suicidal act better

407. Which of the following SHOULD BE DONE with a suicidal patient:

- a)** Always ask about access to firearms; access to weapons increases the risk in a suicidal patient
- b)** Ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does not plant the idea.
- c)** Do not release patients from the emergency department if you are not certain that they will not harm themselves
- d)** Always assume that family or friends will be able to watch a patient 24 hours a day.
- e)** Never worry alone-If you are unsure about the level of risk or course of action, involve others

- 408.** Which of the following SHOULD BE DONE with a suicidal patient:
- a)** Don't ask about suicidal ideas, especially plans to harm oneself. Asking about suicide does plant the idea in the suicidal patients mind.
 - b)** Do not hesitate to ask patients if they "want to die." A straightforward approach is the most effective.
 - c)** Conduct the interview in a safe place. Patients have been known to throw themselves out of a window.
 - d)** Do not offer false reassurance (e.g., "Most people think about killing themselves at some time?").
 - e)** Always ask about past suicide attempts, which can be related to future attempts.
-

- 409.** Which of the following statements regarding cancer and alcohol use is CORRECT?
- a)** Cancer may be caused by the immunosuppressive effects of ethanol.
 - b)** Cancer is the second leading cause of premature death in alcoholics.
 - c)** Increases in breast cancer have been noted with just two drinks per day.
 - d)** Alcohol can be directly linked to cancers of mucous membranes.
 - e)** Alcohol chronic intake can lead in less than 3 years to cancer
-

- 410.** Which of the following variables are for HIGH RISK for suicide:
- a)** Unemployed
 - b)** Conflictual interpersonal relationships
 - c)** Chronic illness
 - d)** Marital status: Married
 - e)** Sex: Female
-

- 411.** Which of the following variables are for HIGH RISK for suicide:
- a)** Poor personal achievements
 - b)** Poor social rapport
 - c)** Good somatic health

- d)** In communication he/she externalizes anger
 - e)** Marital status: Married
-

- 412.** Which of the following variables are for HIGH RISK for suicide:
- a)** Age: Over 45 years
 - b)** Sex: Males
 - c)** Marital status: divorced or widowed
 - d)** Good somatic health
 - e)** In communication he/she externalizes anger
-

- 413.** Which of these psychiatric disorders is LESS commonly associated with substance abuse in adolescents?
- a)** Conduct disorder
 - b)** Attention-deficit/hyperactivity disorder
 - c)** Schizophrenia
 - d)** Generalized anxiety disorder
 - e)** Enuresis
-