MENTAL HEALTH NURSING
PAPER - II

Time Allowed : 2 hours
Full Marks : 200

All questions carry equal marks of 2 each.
Attempt all questions.

1. When a nurse develops feelings toward a client that are based on the nurse’s past experience, it is called_____
   (a) Countertransference          (b) Role reversal
   (c) Transference                (d) Unconditional regard

2. A child is taking pemoline (Cylert) for ADHD. The nurse must be aware of which of the following side effects?
   (a) Decreased thyroid-stimulating hormone
   (b) Decreased red blood cell count
   (c) Elevated white blood cell count
   (d) Elevated liver function tests

3. Teaching for methylphenidate (Ritalin) should include which of the following?
   (a) Give the medication after meals
   (b) Give the medication when the child becomes overactive
   (c) Increase the child’s fluid intake when he or she is taking the medication
   (d) Take the child’s temperature daily

4. The nurse would expect to see all the following symptoms in a child with ADHD except
   (a) Easily distracted and forgetful
   (b) Excessive running, climbing, and fidgeting
   (c) Moody, sullen, and pouting behavior
   (d) Interrupts others and can’t take turns

5. Which of the following is normal adolescent behavior?
   (a) Critical of self and others
   (b) Defiant, negative, and depressed behavior
   (c) Frequent hypochondriacal complaints
   (d) Unwillingness to assume greater autonomy

6. Which of the following is used to treat enuresis?
   (a) Imipramine (Tofranil)
   (b) Methylphenidate (Ritalin)
   (c) Olanzapine (Zyprexa)
   (d) Risperidone (Risperdal)

7. An effective nursing intervention for the impulsive and aggressive behaviors that accompany conduct disorder is____
   (a) Assertiveness training
   (b) Consistent limit setting
   (c) Negotiation of rules
   (d) Open expression of feelings

8. The nurse recognizes which of the following as a common behavioral sign of autism?
   (a) Clinging behavior toward parents
   (b) Creative imaginative play with peers
   (c) Early language development
   (d) Indifference to being hugged or held
9. The nurse observes a client who is becoming increasingly upset. He is rapidly pacing, hyperventilating, clenching his jaw, wringing his hands, and trembling. His speech is high pitched and random; he seems preoccupied with his thoughts. He is pounding his fist into his other hand. The nurse identifies his anxiety level as
   (a) Mild  (b) Moderate  (c) Severe  (d) Panic

10. When assessing a client with anxiety, the nurse’s questions should be
   (a) Avoided until the anxiety is gone  (b) Open ended  (c) Postponed until the client volunteers information  (d) Specific and direct

11. During the assessment, the client tells the nurse that she cannot stop worrying about her appearance and that she often removes “old” makeup and applies fresh makeup every hour or two throughout the day. The nurse identifies this behavior as indicative of a(n)
   (a) Acute stress disorder  (b) Generalized anxiety disorder  (c) Panic disorder  (d) Obsessive–compulsive disorder

12. The best goal for a client learning a relaxation technique is that the client will
   (a) Confront the source of anxiety directly  (b) Experience anxiety without feeling overwhelmed  (c) Report no episodes of anxiety  (d) Suppress anxious feelings

13. Which of the four classes of medications used for panic disorder is considered the safest because of low incidence of side effects and lack of physiologic dependence?
   (a) Benzodiazepines  (b) Tricyclics  (c) Monoamine oxidase inhibitors  (d) Selective serotonin reuptake inhibitors

14. Which of the following would be the best intervention for a client having a panic attack?
   (a) Involve the client in a physical activity.  (b) Offer a distraction such as music.  (c) Remain with the client.  (d) Teach the client a relaxation technique.

15. A client with generalized anxiety disorder states, “I have learned that the best thing I can do is to forget my worries.” How would the nurse evaluate this statement?
   (a) The client is developing insight  (b) The client’s coping skills have improved  (c) The client needs encouragement to verbalize feelings  (d) The client’s treatment has been successful

16. A client with anxiety is beginning treatment with lorazepam (Ativan). It is most important for the nurse to assess the client’s
   (a) Motivation for treatment  (b) Family and social support  (c) Use of coping mechanisms  (d) Use of alcohol

17. Thought-stopping technique is developed by ___________ to eliminate and intrusive unwanted thoughts.
   (a) Egen Bluler  (b) Simund Freud  (c) Joseph Wolpe  (d) Thomas Schnider
18. According to Albert and Emmons, the seven behavioral components of assertive behavior all, EXCEPT
(a) Eye contact 
(b) Posture
(c) Physical contact 
(d) Perception

19. The characteristic of Non assertive behavior is _____________
(a) Violate the other rights to fulfill their wish 
(b) Express their view and wish without violating other rights and privileges
(c) Denying their own rights and pleasing others 
(d) They always focus on achieving their own goals than others

20. ____________ is characterised by episodes of wandering away (usually away from home). During
the episode, the person usually adopts a new identity with complete amnesia for the earlier life.
(a) Dementia 
(b) Alzheimers’s disease
(c) Multiple personality disorder 
(d) Dissociative fugue

21. Among the following psychiatric illness, the client is most likely to have insight in ____
(a) Paranoid Schizophrenia 
(b) Delusional disorder
(c) Paranoid personality disorder 
(d) Involutional melancholia

22. Among the following, which one considered as positive symptom of schizophrenia?
(a) Inappropriate affect 
(b) Delusion
(c) Withdrawl 
(d) Loosening of associations

23. ‘Dramatic self mutilation” occur during acute phase of schizophrenia is known as ______
(a) Capgras syndrome 
(b) Metabolic syndrome
(c) Schizotypical syndrome 
(d) Van Gough syndrome

24. Mutism,stupor and posturing suggestive of ______
(a) Retarded catatonia 
(b) Catatonic excitement
(c) Hebeprhenic schizophrenia 
(d) Simple schizophrenia

25. A client is diagnosed with alcoholic dementia. What nursing intervention is appropriate for this client’s
nursing diagnosis of altered sensory perception?
(a) Assess vital signs 
(b) Decrease environmental stimuli
(c) Maintain a nonjudgmental approach 
(d) Empathetically confront denial

26. A client diagnosed with schizophrenia is experiencing emotional ambivalence. When the nurse educates
the client’s family, which would best describe this symptom?
(a) An inward focus on a fantasy world 
(b) The simultaneous need for and fear of intimacy
(c) Impairment in social functioning, including social isolation 
(d) The lack of emotional expression

27. Which intervention is a nurse’s priority when working with a client suspected of having a conversion
disorder?
(a) Avoid situations in which secondary gains may occur 
(b) Confront the client with the fact that anxiety is the cause of physical symptoms
(c) Teach the client alternative coping skills to use during times of stress 
(d) Monitor assessments, lab reports to rule out organic pathology
28. A nurse is assessing a client in the mental health clinic. For 3 weeks, the client has been exhibiting eccentric behaviors with blunted affect. There is impairment in the client’s role functioning. These symptoms are reflective of which phase in the development of schizophrenia?
   (a) Phase I—schizoid personality
   (b) Phase II—prodromal phase
   (c) Phase III—schizophrenia
   (d) Phase IV—residual phase

29. Schneider’s first rank symptoms of schizophrenia (FRS or SFRS) do NOT describe _______.
   (a) Made impulse
   (b) Thought insertion
   (c) Made act
   (d) Illogical thinking

30. Pin point pupils suggestive of _______.
   (a) Opioid overdose
   (b) Cannabis overdose
   (c) Cocaine overdose
   (d) LSD overdose

31. The drug which used to prevent withdrawal symptoms of client who is suffering from acute intoxication of opioid (Morphine) is _______.
   (a) Clonidine
   (b) Naltrexone
   (c) Diazepam
   (d) Disulfiron

32. Wernicke’s encephalopathy is a deficiency of ________, which occur in chronic alcoholic patient.
   (a) Riboflavin
   (b) Niacin
   (c) Thiamine
   (d) Pyridoxine

33. Dipsomania refers to _______.
   (a) Obsession to drink alcohol
   (b) Compulsion to drink alcohol
   (c) Ecstasy of hallucinogens
   (d) Hypomania

34. Organic amnestic syndrome is characterised by the following clinical features all, EXCEPT_____.
   (a) Impairment of memory
   (b) No disturbance of consciousness
   (c) Disturbance in intelligence
   (d) Disturbance in personality

35. Among the following, which one drug acts as “Cholinesterase inhibitor” used for cognitive impairment?
   (a) Mirtazapine
   (b) Temazepam
   (c) Paroxetine
   (d) Tacrine

36. The major difference between dementia and pseudodementia is _______.
   (a) Judgment
   (b) Disorientation
   (c) Intelligence
   (d) Abstract thinking

37. A client diagnosed with bipolar disorder states, “My mom has a history of depression”. While teaching about predisposing factors, using a biological theory, which client statement indicates that teaching has been successful?
   (a) “I am going to weigh the pros and cons before having children.”
   (b) “My negative thoughts about myself are making me worse.”
   (c) “It is entirely my mother’s fault that I have this disorder.”
   (d) “I learned how to cope by watching my family interactions.”
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   (c) Impairment in social functioning, including social isolation
   (d) The lack of emotional expression

39. The nurse is planning care for a client with a long history of cocaine abuse who has recently been admitted to the substance abuse unit. The nurse intentionally keeps the treatment plan simple. What is the underlying rationale for this decision?
   (a) The client would be unable to focus because of the use of denial
   (b) The client is at high risk for mild to moderate cognitive problems
   (c) Physical complications would impede learning
   (d) The client has arrested in developmental progression

40. Which of the following ego defense mechanisms describe the underlying dynamics of somatization disorder?
   (a) Repression of anger
   (b) Suppression of grief
   (c) Denial of depression
   (d) Preoccupation with pain

41. Which of the following nursing diagnoses is most appropriate for the disorder known as hypochondriasis?
   (a) High risk for injury
   (b) Anticipatory grieving
   (c) Self-esteem disturbance
   (d) Diversional activity deficit

42. Which of the following nursing interventions is appropriate for a client diagnosed with hypochondriasis?
   (a) Teach the client adaptive coping strategies
   (b) Help the client eliminate the stress in her life
   (c) Confront the client with the statement, “it’s all in your head”
   (d) Encourage the client to focus on identification of physical symptoms

43. Which of the following pharmacologic agents is a sedative-hypnotic medication used to induce sleep for clients experiencing a sleep disorder?
   (a) Triazolam (Halcion)
   (b) Paroxetine (Paxil)
   (c) Fluoxetine (Prozac)
   (d) Risperidone (Risperdal)

44. Which of the following conditions characterizes rapid-eye-movement (REM) sleep?
   (a) Disorientation and disorganized thinking
   (b) Jerky limb movements and position changes
   (c) Pulse slowed by 5 to 10 beats/minute
   (d) Highly active brain and physiological activity level

45. A client with sleep terror disorder might have autonomic signs of intense anxiety. Which of the following autonomic signs and symptoms should the nurse monitor?
   (a) Tachycardia
   (b) Pupil constriction
   (c) Cool, clammy skin
   (d) Decreased muscle tone
46. A client diagnosed with a sleep disorder awakens abruptly with a piercing scream. Which of the following disorders best explains the behavior?
   (a) Hypersomnia  
   (b) Nightmare disorder  
   (c) Sleep terror disorder  
   (d) Sleepwalking

47. Which of the following substances is a natural hormone produced by the pineal gland that induces sleep?
   (a) Amphetamind  
   (b) Melatonin  
   (c) Methylphenidate  
   (d) Pemoline

48. Which of the following statements is correct about conversion disorders?
   (a) The symptoms can be controlled  
   (b) The psychological conflict is repressed  
   (c) The client is aware of the psychological conflict  
   (d) The client shouldn’t be made aware of the conflicts underlying the symptoms

49. Which of the following nursing diagnoses is appropriate for a client with conversion disorder who has little energy to expend on activities or interactions with friends?
   (a) Decisional conflict  
   (b) Hopelessness  
   (c) Impaired social interaction  
   (d) Ineffective family coping

50. Which of the following nursing interventions is the most appropriate for a client who had pseudoseizures and is diagnosed with conversion disorder?
   (a) Explain that the pseudoseizures are imaginary  
   (b) Promote dependence so that unfilled dependency needs are met  
   (c) Encourage the client to discuss his feelings about the pseudoseizures  
   (d) Promote independence and withdraw attention from the pseudoseizures

51. Which of the following statements best defines malingering?
   (a) It’s a preoccupation with pain in the absence of physical disease  
   (b) It’s a voluntary production of a physical symptom for a secondary gain  
   (c) It’s a morbid fear or belief that one has a serious disease where none exists  
   (d) It’s associated with a psychological need or conflict in which the client shows one or more neurologic symptoms

52. A client with a history of panic attacks who says, “I felt so trapped,” right after an attack most likely has which of the following fears?
   (a) Loss of control  
   (b) Loss of identity  
   (c) Loss of memory  
   (d) Loss of maturity

53. Which of the following nursing interventions is given priority in a plan of care for a person having a panic disorder?
   (a) Tell the client to take deep breaths  
   (b) Have the client talk about the anxiety  
   (c) Encourage the client to verbalize feelings  
   (d) Ask the client about the cause of the attack

54. Which of the following questions should a nurse ask to determine how agoraphobia affects the life of a client who has panic attacks with agoraphobia?
   (a) How realistic are your goals?  
   (b) Are you able to go shopping?  
   (c) Do you struggle with impulse control?  
   (d) Who else in your family has panic disorder?
55. Which of the following short-term client outcomes is appropriate for a client with panic disorder?
   (a) Identity childhood trauma.  (b) Monitor nutritional intake
   (c) Institute suicide precautions  (d) Decrease episodes of disorientation

56. Which of the following group therapy interventions would be of primary importance to a client with panic disorder?
   (a) Explore how secondary gains are derived from the disorder
   (b) Discuss new ways of thinking and feeling about panic attacks
   (c) Work to eliminate manipulative behavior used for meeting needs
   (d) Learn the risk factors and other demographics associated with panic disorder

57. Clients with a social phobia would most likely fear which of the following situations?
   (a) Dental procedures  (b) Meeting strangers
   (c) Being bitten by a dog  (d) Having a car accident

58. Which of the following factors would the nurse find most helpful in assessing a client for a blood-injection-injury phobia?
   (a) Episodes of fainting  (b) Gregarious personality
   (c) Difficulty managing anger  (d) Dramatic, overreactive personality

59. Which of the following behavior modification techniques is useful in the treatment of phobias?
   (a) Aversion therapy  (b) Imitation or modeling
   (c) Positive reinforcement  (d) Systematic desensitization

60. A client suspected of having posttraumatic stress disorder should be assessed for which of the following problems?
   (a) Eating disorder  (b) Schizophrenia
   (c) Suicide  (d) “sundown” syndrome

61. Which of the following symptoms of post-traumatic stress disorder would indicate that hypnosis is an appropriate treatment modality?
   (a) Addiction  (b) Confabulation
   (c) Dissociation  (d) Hallucinations

62. Which of the following communication guidelines should the nurse use when talking with a client experiencing mania?
   (a) Address the client in a light and joking manner
   (b) Focus and redirect the conversation as necessary
   (c) Allow the client to talk about several different topics
   (d) Ask only open-ended questions to facilitate conversation

63. A client who has just had electroconvulsive (ECT) therapy asks for a drink. Which of the following assessments is a priority when meeting the client’s request?
   (a) Take the client’s blood pressure  (b) Monitor the gag reflex
   (c) Obtain a body temperature  (d) Determine the level of consciousness

64. A client with bipolar disorder who complains of headache, agitation, and indigestion most likely experiencing which of the following problems?
   (a) Depression  (b) Cyclothymia
   (c) Hypomania  (d) Mania
65. Which of the following adverse reactions does the client with bipolar disorder taking lithium need to report?
   (a) Black tongue  (b) Increased lacrimation  
   (c) Periods of disorientation  (d) Persistent GI upset

66. Which of the following facts does the nurse need to include when teaching the client with bipolar disorder and his family about the drug carbamazepine (Tegretol)?
   (a) The risk of losing hair is a problem for clients taking the drug  
   (b) Clients must be closely monitored for nephrogenic diabetes insipidus  
   (c) Hematologic toxicity and bone marrow depression are serious adverse effects  
   (d) To avoid toxic reactions, most other drugs shouldn’t be taken concurrently

67. Which of the following mental disorders is associated with the gamma aminobutyric acid (GABA) complex?
   (a) Alzheimer’s  (b) Anxiety  
   (c) Depression  (d) Posttraumatic stress disorder

68. Serotonin has been associated with depression because it plays which of the following rules?
   (a) It plays a role in cerebral function  (b) It has a proposed role in mood states 
   (c) It is found widely in the hippocampus  (d) It regulates the sleep and wakefulness cycle

69. A lack of dietary salt intake can have which of the following effects on lithium levels?
   (a) Decrease  (b) Increase 
   (c) Increase then decrease  (d) No effect at all

70. Which of the following discharge instructions is most important for a client taking lithium (Eskalith)?
   (a) Limit fluids to 1,500ml daily  
   (b) Maintain a high fluid intake  
   (c) Take advantage of the warm weather by exercising outside whenever possible  
   (d) When feeling a cold coming, it’s okay take over-the-counter (OTC) cold remedies

71. A pervasive pattern of grandiosity, lack of empathy, and need for admiration suggests the diagnosis of which of the following personality disorders?
   (a) Borderline  (b) Narcissistic  
   (c) Paranoid  (d) Passive-aggressive

72. The defense mechanism most often associated with paranoid personality disorder is______
   (a) splitting  (b) projection  
   (c) isolation  (d) hypochondriasis

73. A nurse is caring for a client with schizotypical personality disorder. The nurse would expect to observe which of the following?
   (a) Exhibitionism  (b) Impulsiveness  
   (c) Body illusions  (d) Repetitive behaviours

74. Which two words describe cluster C personality disorder?
   (a) Odd and eccentric  (b) Anxious and fearful  
   (c) Dramatic and emotional  (d) Erratic and eccentric
75. Which of the following behaviors patterns would a nurse expect to observe in a client with an obsessive compulsive personality disorder?
   (a) Inflexible and lack of spontaneity  (b) Submissive and clinging
   (c) Impulsive and unstable emotionally  (d) Cheerful and carefree

76. “Splitting” by the client with borderline personality disorder denotes:
   (a) Evidence of precocious development
   (b) A primitive defense mechanism in which the client sees objects as all good or all bad
   (c) A brief psychotic episode in which the client loses contact with reality
   (d) Two distinct personalities within the borderline client

77. According to Margaret Mahler, predisposition to borderline personality disorder occurs when developmental tasks go unfulfilled in which of the following phases?
   (a) Autistic phase, during which the child’s needs for security and comfort go unfulfilled
   (b) Symbiotic phase, during which the child fails to bond with the mother
   (c) Differentiation phase, during which the child fails to recognize a separateness between self and mother
   (d) Rapprochement phase, during which the mother withdraws emotional support in response to the child’s increasing independence

78. Which of the following behavioral patterns is characteristic of individuals with histrionic personality disorder?
   (a) Belittling themselves and their abilities
   (b) Overreacting inappropriately to minor stimuli
   (c) Suspicious and mistrustful of others
   (d) A lifelong pattern of social withdrawal

79. The expected behavior pattern of in a client with schizoid personality disorder is ____
   (a) Submissive and clinging  (b) Emotional coldness and flattened affect
   (c) Impulsive and unstable emotionally  (d) Cheerful and carefree

80. A client, diagnosed with an antisocial personality disorder, is given a nursing diagnosis of defensive coping R/T a dysfunctional family system AEB denial of obvious problems and weaknesses. Which client statement would confirm this nursing diagnosis?
   (a) “I know what I did was wrong, and I understand the consequences.”
   (b) “I don’t see how I can afford follow-up therapy.”
   (c) “I’m an angel compared with the rest of my family.”
   (d) “I go to church, but only when it suits me.”

81. Which is a description of the etiology of autism from a genetic perspective?
   (a) Parents who have one child diagnosed with autism are at higher risk for having other children with the disorder
   (b) Amygdala abnormality in the anterior portion of the temporal lobe is associated with the diagnosis of autism
   (c) Decreased levels of serotonin have been found in individuals diagnosed with autism
   (d) Congenital rubella is implicated in the predisposition to autistic disorders
82. Which is a predisposing factor in the diagnosis of autism?
   (a) Having a sibling diagnosed with mental retardation
   (b) Congenital rubella
   (c) Dysfunctional family systems
   (d) Inadequate ego development

83. Which factors does Mahler attribute to the etiology of attention-deficit/hyperactivity disorder?
   (a) Genetic factors
   (b) Psychodynamic factors
   (c) Neurochemical factors
   (d) Family dynamic factors

84. The nurse on an in-patient pediatric psychiatric unit is admitting a client diagnosed with an autistic disorder. Which would the nurse expect to assess?
   (a) A strong connection with siblings
   (b) An active imagination
   (c) Abnormalities in physical appearance
   (d) Absence of language

85. The nursing instructor is preparing to teach nursing students about oppositional defiant disorder (ODD). Which fact should be included in the lesson plan?
   (a) Prevalence of ODD is higher in girls than in boys
   (b) The diagnosis of ODD occurs before the age of 3
   (c) The diagnosis of ODD occurs no later than early adolescence
   (d) The diagnosis of ODD is not a developmental antecedent to conduct disorder

86. A child diagnosed with severe mental retardation becomes aggressive with staff members when faced with the inability to complete simple tasks. Which nursing diagnosis would reflect this client’s problem?
   (a) Ineffective coping R/T inability to deal with frustration
   (b) Anxiety R/T feelings of powerlessness and threat to self-esteem
   (c) Social isolation R/T unconventional social behavior
   (d) Risk for injury R/T altered physical mobility

87. What is the group of drug commonly used for management of behavioral symptoms in ADHD children?
   (a) Psychostimulants
   (b) Benzodiazepines
   (c) Alpha tryptophan
   (d) Antidepressants

88. A client with bulimia nervosa has a history of severe GI problems caused by excessive purging. The nurse is aware that the client is at risk for which of the following?
   (a) Renal calculi
   (b) Esophageal tears
   (c) Focal Seizures
   (d) Muscle atrophy

89. What is the gender identity disorders that results in the person believing he or she is the opposite sex?
   (a) Exhibitionism
   (b) Homosexuality
   (c) Transsexualism
   (d) Transvertitism

90. Among the following, which one manifestation is not associated with ADHD?
   (a) Poor attention span
   (b) Fidgety
   (c) Impulsivity
   (d) Dyslexia

91. Tourette’s disorder is typically characterised by all EXCEPT
   (a) Multiple motor tics
   (b) Multiple vocal tics
   (c) Duration of less than 1 year
   (d) Onset usually before 11 years of age
92. Stanley, a 72-year-old widower, was brought to the hospital by his son, who reports that Stanley has become increasingly withdrawn. His wife died 5 years ago and the son reports, “He did very well. He didn’t even cry.” Which would be the priority nursing diagnosis for Stanley?
   (a) Complicated grieving
   (b) Imbalanced nutrition: less than body requirements
   (c) Social isolation
   (d) Risk for injury

93. Among the following, which one is NOT a type of Psychosocial theory of aging?
   (a) Personality theory
   (b) Disengagement theory
   (c) Developmental tasks theory
   (d) Wear and tear theory

94. The most commonest psychiatric disorder among elderly is ______
   (a) Depression
   (b) Dementia
   (c) Delirium
   (d) Schizophrenia

95. The priority nursing intervention for a rape victim should be_____
   (a) Help her to bathe and clean herself up
   (b) Provide physical and emotional support during evidence collection
   (c) Provide her with a written list of community resources for rape victims
   (d) Discuss the importance of a follow-up visit to evaluate for sexually transmitted diseases

96. The nurses noticed on casual examination of co-worker Ms.Jana while she was vomiting. The co-worker had bruises on her arms and torso. Some are bluish in color; others are various shades of green and yellow. She also noticed some small scars Ms.Jana abdomen protrudes on her small, thin frame. From the objective physical assessment, the nurse suspects that:
   (a) Jana is experiencing physical and sexual abuse
   (b) Jana is experiencing physical abuse and neglect
   (c) Jana is experiencing emotional neglect
   (d) Jana is experiencing sexual and emotional abuse

97. Which of the following represents a nursing intervention at the tertiary level of prevention?
   (a) Serving as case manager for a mentally ill homeless client
   (b) Leading a support group for newly retired men
   (c) Teaching prepared childbirth classes
   (d) Caring for a depressed widow in the hospital

98. The aspects of Indian disability Evaluation and Assessment Scale (IDEAS) all, EXCEPT
   (a) Self care
   (b) Duration of illness
   (c) Interpersonal skill
   (d) Intelligence

99. While assessing the disability using Indian disability Evaluation and Assessment Scale (IDEAS). The moderate disability (40%) is considered if the score is _____
   (a) 7-13
   (b) 14-19
   (c) 20-29
   (d) 30-39

100. Among the following, which facility can provide the homeless child to have family like environment?
    (a) Respite home
    (b) Foster home
    (c) Halfway home
    (d) Custodial home

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