Chapter 3: Clinical Assessments and Diagnosis

MULTIPLE CHOICE

- 1. What do we call the systematic evaluation of psychological, biological, and social factors in a person with a possible mental disorder?
 - a. clinical interpretation
 - b. clinical diagnosis
 - c. clinical assessment
 - d. clinical standardization

ANS: C	PTS: 1	REF: 69	BLM: Remember

- 2. Which of the following is NOT part of a clinical assessment?
 - a. evaluation of financial factors
 - b. evaluation of biological factors
 - c. evaluation of social factors
 - d. evaluation of psychological factors

REF: 69 PTS: 1 ANS: A **BLM:** Remember

- 3. What do we call the process of determining whether an individual's symptoms meet the criteria for a specific psychological disorder?
 - a. prognosis
 - b. diagnosis
 - c. analysis
 - d. classification

ANS: B PTS: 1 **REF: 69 BLM:** Remember

4. What is the Diagnostic and Statistical Manual of Mental Disorders?

- a. a guide for training psychology students in assessment techniques
- b. a textbook about the etiology of psychological disorders
- c. a classification system for abnormal behaviour
- d. an encyclopedia of treatment approaches for psychological disorders

ANS: C REF: 69 PTS: 1 **BLM:** Remember

- 5. What organization publishes the Diagnostic and Statistical Manual of Mental Disorders? a. the International Medical Association

 - b. the American Psychological Association
 - c. the American Psychiatric Association
 - d. the National Institute of Mental Health

ANS: C PTS: 1 REF: 69 **BLM:** Remember

- 6. For what purpose does the process of clinical assessment result in narrowing the focus?
 - a. to consider a broad range of problems
 - b. to focus on "inter" and "intra" personal problems equally
 - c. to concentrate on problem areas that seem most relevant
 - d. to uncover all possible causes of stress in the person's life

ANS: C PTS: 1 **REF: 70** BLM: Higher Order

	Chapter 3		7	est Bank	Barlow Abnormal Psychology 4ce
7.		In terms o assificatio liability alidity	of assessment, what on		ite received different diagnoses from n does this example illustrate?
	ANS: B	PTS: 1	REF	: 70	BLM: Higher Order
8.	Dr. Evans conducts a depressive symptomsa. validityb. standardizationc. reliabilityd. classification	-			on screener" doesn't predict creener?
	ANS: A	PTS: 1	REF	: 70–71	BLM: Higher Order
9.	following? a. valid b. reliable c. standardized d. clinical				to be considered to be which of the
	ANS: A	PTS: 1	REF	: 71	BLM: Remember
10.		ings of th y y			Is with a student's high school grades tance, what does this IQ test have?
	ANS: A	PTS: 1	REF	: 71	BLM: Higher Order
11.		tant gave this indic urrent val term vali -rater relia	Ms. Rath the same cate? idity. dity. ability.		her a standard IQ test. The following th's score was similar on both

ANS: D	PTS: 1	REF: 71	BLM: Higher Order
--------	--------	----------------	-------------------

- 12. Mr. Lopez, a 40-year-old recent immigrant to Canada, is learning to speak English. He applies for a job and is given a test. His score is compared to other test takers who are mostly college graduates whose native language is English. Mr. Lopez thinks this is unfair. What kind of problem does this situation illustrate?
 - a. a problem with classification
 - b. a problem with standardization
 - c. a problem with validity
 - d. a problem with reliability

ANS: B PTS: 1 REF: 71 BLM: Higher Order

- 13. As part of a psychological assessment, a mental status exam is used to find out how a person thinks, feels, and behaves. However, what is the primary purpose of a mental status exam?
 - a. to determine what type of treatment should be used
 - b. to determine if a psychological disorder might be present
 - c. to determine whether the individual also has a medical condition
 - d. to determine which medication would be most effective

ANS: B PTS: 1 REF: 71–72 BLM: Higher Order

- 14. How is a mental status exam related to a clinical interview?
 - a. A mental status exam score is important information for hospitalizations.
 - b. A mental status exam is used to elicit spontaneous information that is not usually obtained in the interview.
 - c. A mental status exam is administered immediately following the interview.
 - d. A mental status exam is used to organize the information obtained during the interview.

ANS: D PTS: 1 REF: 71–72 BLM: Remember

15. In a mental status exam, a clinician can make a rough estimate of the patient's intellectual functioning. What does the clinician attempt to detect by listening to the patient's speech?

- a. the ability to talk about his or her problems logically and objectively
- b. insight into his or her problems
- c. the tendency to use abstractions and metaphors
- d. the ability to speak slowly and clearly

ANS: C PTS: 1 REF: 71–72 BLM: Remember

- 16. Which of the following is NOT a category covered in a mental status exam?
 - a. physical symptoms
 - b. behaviour
 - c. appearance
 - d. intellectual functioning

ANS: A PTS: 1 REF: 71–72 BLM: Remember

- 17. With regard to a mental status exam, which of the following questions is NOT related to the concept of sensorium?
 - a. Who are you?
 - b. Where are you?
 - c. How old are you?
 - d. What is today's date?

ANS: C PTS: 1 REF: 71–72 BLM: Remember

- 18. Which of the following is a part of the intellectual functioning component of a mental status exam? a. noting a person's vocabulary b. noting the appropriateness of a person's attire c. noting a person's mood d. noting the content of what a person is saying ANS: A PTS: 1 BLM: Remember | WWW **REF:** 72 19. The term "sensorium" refers to part of the mental status exam. What does sensorium mean? a. a person's impairment in visual or auditory functioning b. a person's general awareness of his or her surroundings c. a person's level of emotional sensitivity d. a person's ability to make reasonable judgments PTS: 1 ANS: B REF: 72 **BLM:** Remember 20. Determining mood and affect is an important part of the mental status exam. Although both of these terms refer to feeling states of the individual, how does mood differ from affect? Mood is more changeable than affect. a. b. Mood is more frequent than affect. c. Mood is more pervasive than affect. d. Mood is more severe than affect. ANS: C PTS: 1 **REF: 72** BLM: Higher Order 21. Dr. Ashton has assessed Mr. Tindale and sees that while Mr. Tindale knows his name and the date, he doesn't know where he is. Dr. Ashton writes something in Mr. Tindale's chart that the nurses are having trouble reading. What do you think Dr. Ashton wrote? "patient oriented times one" a. b. "patient oriented times two" c. "patient oriented times three" d. "patient sensorium clear" ANS: B PTS: 1 REF: 72 BLM: Higher Order 22. Robert reported to a mental health clinician that he was having difficulty concentrating at work and sleeping through the night because of his marital problems. Based on this interview, the clinician decided Robert was showing signs of depression before the marital problems began and that his major difficulties lay in his unresolved feelings of guilt over his mother's recent death. What does this example reveal?
 - a. how clients often try to hide important issues from the clinician
 - b. how important it is that the clinician avoid overly structured clinical interviews
 - c. how important it is to conduct the clinical interview in a way that elicits the patient's trust and openness
 - d. how clients do not usually have a good understanding of their major concern until they have received therapy

ANS: C	PTS: 1	REF: 72	BLM: Higher Order
--------	--------	---------	-------------------

Chapter 1	3
-----------	---

- 23. Asking specific questions—such as "Who are you?" "Where are you?" and "What's the weather like today?"—is an important part of a mental status exam. What component of the exam are such questions addressing?
 - a. the intellectual functioning component
 - b. the mood and affect component
 - c. the thought process component
 - d. the sensorium component

ANS: D PTS: 1 REF: 72 BLM: Remember

- 24. In a clinical interview, when does the law regarding privileged communication apply?
 - a. if the patient has mentioned thoughts of suicide
 - b. if the patient threatens to harm someone else
 - c. if the patient relates a history of sexual abuse
 - d. if the patient threatens to harm themselves

ANS: C PTS: 1 REF: 73 BLM: Remember

- 25. How do semistructured interviews differ from unstructured interviews?
 - a. In the semistructured format, clinicians develop their own methods of collecting necessary information; in the unstructured interview the clinician does not develop their own method of collecting unnecessary information.
 - b. In the semistructured format, clinicians try to keep the client from straying from specific issues identified by the therapist as essential; in the unstructured interview these rules are not in place.
 - c. In the semistructured format, clinicians rely on the organizational structure of a mental status exam; in the unstructured interview they do not use mental status exams.
 - d. In the semistructured format, clinicians use questions that have been tested to elicit useful information in a consistent manner; in the unstructured interview they do not.

ANS: D PTS: 1 REF: 73 BLM: Higher Order

- 26. A clinician follows a general outline of questions designed to gather essential information but is free to ask the questions in any particular order and to branch off into other directions in order to follow up on clinically important information. What type of interview is being used in this example?
 - a. an unstructured interview
 - b. a structured interview
 - c. a behavioural interview
 - d. a semistructured interview

ANS: D PTS: 1 REF: 73 BLM: Higher Order

27. What is the primary purpose of structured and semistructured interviews?

- a. The standardized collection of necessary information allows for comparison with similar individuals.
- b. They initiate treatment.
- c. They increase confidentiality.
- d. Engagement strategies are built in to help develop the therapist-client relationship.

ANS: A PTS: 1 REF: 73 BLM: Remember WWW

	Chapter 3		Test Bank	Barlow Abnormal Psychology 4ce
28.		c psychological disord		ymptoms of behavioural disorders or
	ANS: A	PTS: 1	REF: 75	BLM: Remember
29.	 instead of a clinical is conflicts with other of case? a. because the pare b. because a structure c. because young construction c. because young construction 	interview, after her par children on the playgro nts could be exaggerat ared interview might b hildren are less able to	ents report that she ha ound. Why is a behavio ing the problem e too stressful for a yo o verbally communicat	
	ANS: C	PTS: 1	REF: 76	BLM: Higher Order
30.		viour, causes	tion? REF: 76	BLM: Remember
	ANS: A	P15: 1	KEF: /0	BLM: Remember
31.	attitude." Before dia	gnosing and treating th titude." What type of o finition definition efinition	ne child, the psycholog	
	ANS: C	P15: 1	KEF: //	BLM: Higher Order
32.	The clinician is using (self-injurious) behavious) been identified as? a. measurable behaviour b. target behaviour c. resultant behaviou d. observable behaviour	g this technique to disc viour. In behavioural a viour our viour	cover the reasons the c issessment terms, wha	Situation to complete a difficult task. hild has been engaging in self-hitting t type of behaviour has the self-hitting
	ANS: B	PTS: 1	REF: 77	BLM: Higher Order

- 33. Compared to informal observation, what is an advantage of formal observation?
 - a. Formal observations provide more perspective because they are written after an open-ended, out-of-office interview in a non-clinical setting.
 - b. Formal observations rarely require the use of naturalistic settings.
 - c. Formal observations are more reliable due to the focus on behaviours that are both observable and measurable.
 - d. Formal observations give more information about an individual because they require a three-hour minimum time commitment.

ANS: C PTS: 1 REF: 77 BLM: Remember WWW

- 34. If a clinician deviates from a structured interview, what type of assessment is he or she using? a. a semistructured interview assessment
 - b. naturalistic observations
 - c. a conversational inventory assessment

 - d. an individual-engagement therapeutic assessment

ANS: A PTS: 1 REF: 77 BLM: Remember

35. What has the "reactivity phenomenon" of self-monitoring procedures been shown to do?

- a. increase desired behaviours
- b. decrease undesired behaviours
- c. increase emotional responses to external stressors
- d. both increase desired behaviours and decrease undesired behaviours

ANS: D PTS: 1 REF: 77 BLM: Remember

- 36. With respect to monitoring procedures, which of the following is an example of the reactivity phenomenon?
 - a. On parents' visiting day in a classroom, the previously well-behaved children continue to show good behaviour.
 - b. A man quits smoking after his father dies of lung cancer.
 - c. After joining a fitness club, a woman stops exercising in her home and instead walks two kilometres a day by herself.
 - d. A man begins to eat less after joining a clinic weight-loss program in which each participant's weight is recorded weekly by a staff member.

ANS: D PTS: 1 REF: 77 BLM: Higher Order

- 37. Many popular magazines include "psychological" or "personality" tests to help readers better understand themselves or others. How does your textbook view most of these tests?
 - a. They are reliable.
 - b. They are for entertainment only.
 - c. They are informative and educational.
 - d. They are valid.

	ANS: B	PTS: 1	REF: 77	BLM: Higher Order
--	--------	--------	---------	-------------------

	Chapter 3		Test B	Bank	Barlow Abnormal Psychology 4ce
38.	unconscious. Why h a. It is important to b. Many people are c. By definition, u	ecided to use a project has Dr. Gallagher chose o use tests that are stru- e too embarrassed to n nconscious processes was are always insuffi	sen a projecti uctured, object reveal highly can be measu	ve test in this ca ctive, and valid. personal inform ured only indired	se?ation openly. ctly.
	ANS: C	PTS: 1	REF: 77-	–78 BLN	M: Remember
39.	is assumed to be reva. the person's preb. the person's uncc. the person's corr	vealed? conscious thoughts conscious thoughts	she sees in th	ne ambiguous sti	muli of the Rorschach test, what
	ANS: B	PTS: 1	REF: 78	BL	M: Higher Order
40.	patient. What type o	of test would Dr. Gupt al-Motor Gestalt Test at	a most likely		scious thoughts and feelings of a
	ANS: D	PTS: 1	REF: 78	BLN	M: Higher Order
41.	developed?a. because it was db. because the prevc. because Hermand. because there w	liscovered that inter-r	ater reliability was found to satisfied with	y had increased a be difficult and the way his test	time consuming was being administered
	ANS: D	PTS: 1	REF: 78	BL	M: Remember
42.	TAT is asked to use	rception Test differs f his or her imaginatio story about a picture			st in that the person taking the g?

- b. tell how a descriptive sentence applies to him- or herself
- c. identify the theme that is common to a set of pictures
- d. speculate about the relationships between various people shown in a picture

ANS: A PTS: 1 REF: 78 BLM: Remember

43.	clients. What is thea. He wants to ensessions.b. He wants to declient.	e most likely reas neourage his clien evelop a compreh low his client to	son for his decision at to talk more oper densive, empirically perform and score a	the Thematic Apperception Test with ? aly about their life during counsellin y sound clinical intervention for his a private self-assessment.	
	ANS: A	PTS: 1	REF: 78	BLM: Higher Order	
44.	Which of the folloa. the WAISb. the MMPIc. the TATd. the MCMI	wing is a project	ive test?		
	ANS: C	PTS: 1	REF: 78	BLM: Remember	
45.	c. They are expe		comfortable. er.		
	ANS: D	PTS: 1	REF: 79	BLM: Remember	
46.		data. What type c proach pproach pproach	nality inventories s f approach is this?	such as the MMPI are based on the c	collection
	ANS: C	PTS: 1	REF: 79	BLM: Remember	
47.	and similar inventoa. skills a personb. clinical experic. the collection	ories based on?	n in day-to-day life n É data	eory for an interpretation, what are	the MMPI
	ANS: C	PTS: 1	REF: 79	BLM: Higher Order	
48.	Dr. DuPont is rese conducting researc a. the MMPI b. the TAT c. the Rorschach d. the PCL-R	ch on?	sment instrument. V	Which of the following is she most li	ikely
	ANS: A	PTS: 1	REF: 79	BLM: Higher Order	

	Chapter 3	Test Bank	Barlow Abnormal Psychology 4ce
49.	Why does the assessment concept known.a. because the MMPI is often interpresented.because the MMPI is non-sexist.c. because the MMPI is well researched.because the MMPI is made up of researched.	eted by computer	n the MMPI?
	ANS: A PTS: 1	REF: 79	BLM: Remember
50.	 What is used to assess results on the Maximum a. the correspondence between the indiagnosed with a specific disorder b. the frequency at which the individual sexuality c. the degree of emotionality associated d. the frequency with which the individual some other concept 	dividual's pattern of answ ual refers to specific ideas, ted with results	, such as aggression or
	ANS: A PTS: 1	REF: 79	BLM: Remember WWW
51.	On which scale of the MMPI would ye get a high score?a. paranoia scaleb. psychopathic deviation scalec. psychasthenia scaled. social deviation scale	ou expect a remorseless, ag	ggressive, and irresponsible person to
	ANS: B PTS: 1	REF: 79	BLM: Remember WWW
52.	 Suppose an individual taking the MMI scale will he or she most likely obtain a. Defensiveness (K) b. Infrequency (F) c. Inconsistency (I) d. Lie (L) 		it psychological problems. On which
	ANS: B PTS: 1	REF: 79–80	BLM: Higher Order
53.	Suppose an individual taking the MMI or she most likely have a high score? a. Defensiveness (K) b. Infrequency (F) c. Inconsistency (I) d. Lie (L)		
	ANS: D PTS: 1	REF: 79–80	BLM: Higher Order

	Chapter 3		Test Bank	Barlow Abnormal Psychology	4ce
54.	 falsifying answers and scale(s) would James a. L (Lie), K (Defendence) b. F (Infrequency) s c. K (Defensiveness) 	d trying to appear as the most likely receive a lasiveness, and F (Infree cale only	hough he had no psych nigh score? quency) scales only	n unrealistic positive image by nological problems. On which	
	ANS: D	PTS: 1	REF: 79–80	BLM: Higher Order	
55.		zed distrust produce a viation (Pd)		gative expectations about the motives	3
	ANS: D	PTS: 1	REF: 79–80	BLM: Higher Order	
56.	a. the lack of standab. clinicians' subject	rdized instructions for tive interpretations of g for the standardizatio	administration scale scores	version of the MMPI? ed wording of questions	
	ANS: C	PTS: 1	REF: 80-81	BLM: Remember	
57.	 7. Individuals who are conning and manipulative pathological liars would be unlikely to respond truthfully on a self-report measure of personality. Hare's PCL-R is an instrument that measures the characteristics of psychopathy. What does Hare's PCL-R use? a. behavioural observation in the person's natural environment b. interviews with the client along with material from institutional files and people close to the person c. projective tests to tap into unconscious processes d. lie detector equipment along with a verbal form of the personality test 				
	ANS: B	PTS: 1	REF: 81	BLM: Remember	
58.	deviation IQ. What isa. the scores of otheb. the scores of othe	the child's score now rs who took the test at rs in the same grade rs with the same level	compared to? the same time	al age, is now done by using a	
	ANS: D	PTS: 1	REF: 81	BLM: Higher Order	
59.	b. whether the WAIc. whether the WAI		ty" to people from oth onal intelligence et cognitive skills	er countries and cultures children	
	ANS: A	PTS: 1	REF: 81	BLM: Higher Order	

60.	What kind of test is a. a personality test b. a projective test c. an intelligence t d. a mental status	st eest	test?	
	ANS: C	PTS: 1	REF: 81	BLM: Remember
61.	a. There are signifb. Scores on this toc. The <i>WISC</i> is full	icant gender different est do not predict ac lly "portable" across	8	
	ANS: D	PTS: 1	REF: 81	BLM: Higher Order
62.	Which technique we client's brain?	ould be appropriate	if you wished to look fo	or the location of possible damage in a
	a. MMPIb. PET scanc. WAIS-IIId. a projective test			
	ANS: C	PTS: 1	REF: 81	BLM: Remember WWW
63.	b. They do not proc. They do not me	ess a person's abilit wide predictive valid asure abilities such	y to adapt to the enviro dity with respect to aca as attention and memor as reasoning and perce	ry.
	ANS: A	PTS: 1	REF: 82	BLM: Remember
64.	b. whether an indic. whether an indi	vidual might have h	ad a psychotic episode brain dysfunction llectually disabled	
	ANS: B	PTS: 1	REF: 82	BLM: Remember
65.	most likely be used⁴a. the Gall Phrenob. the Halstead-Rec. the Stanford-Bin		gical Battery e	pairment, which of the following would BLM: Higher Order

- 66. One of the problems in using neuropsychological tests to detect organic damage and cognitive disorders involves the possibility of false negatives. Which of the following is most likely to result from a false negative?
 - a. A patients undergoes completely unnecessary and expensive procedures.
 - b. A clinician misses an important medical problem that needs to be treated.
 - c. A patient is diagnosed with a condition that does not exist.
 - d. Cell damage occurs due to repeated radiation exposure.

ANS: B PTS: 1 REF: 82 BLM: Higher Order

- 67. Why are neuropsychological tests used?
 - a. to map blood flow and other metabolic activity in the brain
 - b. to help differentiate those who have a given cognitive disorder from those people who do not
 - c. to predict who will develop a specific cognitive disorder five or ten years later
 - d. to take accurate pictures of brain structure and function

ANS: B PTS: 1 REF: 82 BLM: Remember

68. Sarah's family doctor has suggested to her parents that they see a specialist to have a neuropsychological test completed. What is this type of test intended to do?

- a. use imaging to assess brain structure and/or function
- b. determine the possible contribution of brain damage to the person's condition
- c. ascertain the structure and patterns of cognition
- d. assess long-standing patterns of behaviour

ANS: B PTS: 1 REF: 82 BLM: Higher Order

69. Marguerite is tested for brain damage. Although her test results indicate that she has no brain damage, in reality she has a brain tumour. Her test results indicate a false negative. Which of the following is the most likely outcome?

- a. Marguerite will become discouraged and put off following up on medical care.
- b. Marguerite may end up paying for costly treatment that is not necessary.
- c. Marguerite will not get the treatment she needs.
- d. Marguerite may seek out an additional medical opinion.

ANS: C PTS: 1 REF: 82 BLM: Remember | WWW

70. Which of the following is a problem associated with a false positive result on a psychological test?

- a. Damage that requires treatment is more likely to be overlooked.
- b. Neurological damage may have been missed.
- c. It may call for unnecessary and expensive further testing.
- d. A person who should be concerned may have a false sense of well-being.

ANS: A PTS: 1 REF: 82 BLM: Remember | WWW

- 71. How does the CAT scan neuroimaging technique work?
 - a. It uses X-rays to portray brain structures.
 - b. It uses magnetic fields to portray brain structures.
 - c. It follows tracer elements in the nervous system.
 - d. It uses magnetic fields to portray brain functions.

ANS: A PTS: 1 REF: 83 BLM: Remember WWW

72.	 What is the main difference between neuropsychological tests and neuroimaging techniques? a. Neuropsychological tests help identify the location of the brain dysfunction, whereas neuroimaging shows us the structure and functioning of the brain. b. Neuropsychological tests help identify the structure and functioning of the brain, whereas neuroimaging shows us the location of the brain dysfunction. c. Neuropsychological tests help identify the nature of the brain dysfunction, whereas neuroimaging shows us the reasons for the brain dysfunction. d. Neuropsychological tests help identify patterns of dysfunctional cognitions, whereas neuroimaging shows us the structure of dysfunctional cognitions. 					
	ANS: A	PTS:	1	REF:	82–83	BLM: Higher Order
73.	What have recent real to look at varying disordersb. to locate brain to c. to detect tissued. to locate abnormality	ng patterns umours ar variations	s of brain meta nd injuries associated wi	abolism th diffe	n that might be erent disorders	associated with different
	ANS: A	PTS:	1	REF:	83	BLM: Remember
74.	disorder? a. CAT b. MRI c. PET d. TAT	-				activity in individuals with bipolar
	ANS: C	PTS:	1	REF:	83	BLM: Remember
75.	Which of the follow functioning of variea. a PET scanb. a CT scanc. a CAT scand. an MRI scan			g techni	que that uses a	radioactive tracer to measure the
	ANS: A	PTS:	1	REF:	83	BLM: Remember
76.	technique and purpe a. EEG b. MRI c. CAT d. PET	ose?			•	graphy (SPECT) most similar to in
	ANS: D	PTS:	1	REF:	84	BLM: Remember

- 77. How does the fMRI procedure differ from the traditional MRI?
 - a. The fMRI procedure uses X-rays to show the brain from different angles.
 - b. The fMRI procedure measures brain metabolism.
 - c. The fMRI procedure measures brain wave activity.
 - d. The fMRI procedure can take pictures of the brain at work, recording changes from one second to the next.

ANS: D PTS: 1 REF: 84 BLM: Higher Order

78. In studies using fMRI, how did post-traumatic stress disorder (PTSD) participants who report primarily dissociative (numbing-type) responses to listening to scripts about their traumas compare to PTSD participants who experienced primarily hyperarousal patterns to trauma scripts?

- a. They had more atrophied parts of the brain.
- b. They had less electrical activity in the limbic system.
- c. They had slower and more irregular delta waves.
- d. They had very different patterns of brain activation.

ANS: D PTS: 1 REF: 84 BLM: Higher Order

- 79. What is the primary basis for a prognosis?
 - a. information about the course of the disorder in other individuals
 - b. clinical experience
 - c. the treatment options available to the patient
 - d. the client's desire to reform

ANS: A	PTS: 1	REF: 84	BLM: Remember WWW
--------	--------	---------	---------------------

- 80. Which of the following is used to measure electrical activity in the brain?
 - a. an electroencephalograph
 - b. an electrocardiograph
 - c. an electromyogram
 - d. an electroencephalogram

ANS: D PTS: 1 REF: 84 BLM: Remember

- 81. James wants to examine brain wave patterns associated with psychological disorders, such as schizophrenia, and with physiological problems related to tumours and brain damage. What should James use?
 - a. a CAT scan
 - b. an EEG
 - c. a PET scan
 - d. an MRI

ANS: D PTS: 1 REF: 84 BLM: Higher Or

- 82. What is the difference between the classical and dimensional approaches to nosology?
 - a. The classical approach groups categories of symptoms, and the dimensional approach uses groups of prototypes.
 - b. The classical approach uses prototypes, and the dimensional approach uses profiles.
 - c. The classical approach diagnoses note the presence of symptoms, and the dimensional approach notes the degree of severity of symptoms.
 - d. The classical approach places individuals in categories, and the dimensional approach places symptoms in categories.

ANS: C PTS: 1 REF: 84 BLM: Remember

- 83. What do the terms "taxonomy" and "nosology" refer to?
 - a. the classification of entities or disorders in a scientific context
 - b. the process of identifying specific psychological disorders
 - c. the process of testing the validity and reliability of a classification system
 - d. the measurement of changes in the nervous system

ANS: A PTS: 1 REF: 85 BLM: Remember

- 84. Why is assessing psychophysiological responding very important in the assessment of many sexual dysfunctions and disorders?
 - a. because misdiagnosis of sexual disorders can be devastating for the patient
 - b. because it avoids having to ask patients direct and possibly embarrassing questions about their sexuality
 - c. because many people are unaware that they have a true sexual disorder
 - d. because sometimes the individual is unaware of his or her specific patterns of sexual arousal

ANS: D PTS: 1 REF: 85 BLM: Higher Order

- 85. What does the classical categorical approach to diagnosis assume about each person with a particular disorder?
 - a. He or she will experience very few of the same symptoms.
 - b. He or she will respond to the same treatments equally.
 - c. He or she will be helped by recognizing the cause of the disorder.
 - d. He or she will experience the same symptoms with little or no variation.

ANS: D PTS: 1 REF: 86 BLM: Higher Order

- 86. What does the dimensional approach to classification of mental disorders provide that the categorical approach does not?
 - a. The dimensional system provides scales that indicate the degree to which patients are experiencing various cognitions, moods, and behaviours.
 - b. The dimensional system provides diagnostic labels based on the presence of specific symptoms.
 - c. The dimensional system provides lists of symptoms that are associated with all of the forms of psychopathology that are currently believed to exist.
 - d. The dimensional system provides information that is used to determine the cause and treatment of the disorder.

ANS: A	PTS: 1	REF: 86	BLM: Higher Order
--------	--------	---------	-------------------

- 87. Which approach allows some variation in symptoms without changing classification?
 - a. a categorical approach
 - b. a dimensional approach
 - c. a multidimensional approach
 - d. a prototypical approach

ANS: D PTS: 1 REF: 86 BLM: Higher Order

- 88. If two people are both diagnosed with the same disorder using the *DSM* 5, how will the two people be similar?
 - a. They will have experienced identical symptoms of the disorder.
 - b. They will have experienced similar distress as a result of the disorder.
 - c. They will have lost the ability to function in a similar way.
 - d. They will have some of the same symptoms as each other.

ANS: D PTS: 1 REF: 86–87 BLM: Higher Order

- 89. Accurate diagnoses are partly dependent on the reliability and validity of the diagnostic system being used (e.g., the *DSM 5*). What else does diagnostic accuracy depend on?
 - a. the patient's ability to describe his or her symptoms clearly and honestly
 - b. the skills and training of the clinician
 - c. valid statistics regarding the prevalence of the disorder
 - d. the efficacy of treatments available for a given psychological disorder

ANS: B PTS: 1 REF: 87 BLM: Higher Order

- 90. Using a new diagnostic system, several clinicians interview a patient and independently provide the same diagnosis. The diagnosis may be different from the diagnosis that would be applied using an older diagnostic system. What can we assume about the new diagnostic system?
 - a. It appears to be standardized.
 - b. It appears to be reliable.
 - c. It appears to be normed.
 - d. It appears to be valid.

ANS: B PTS: 1 REF: 87 BLM: Higher Order

- 91. Suppose a clinician creates criteria for a diagnosis that reflects what most experts in the field consider to be a particular prototypical patient. What is the clinician doing?
 - a. creating content vitality
 - b. creating predictive vitality
 - c. creating criteria vitality
 - d. creating consensus vitality

ANS: A PTS: 1 REF: 88 BLM: High	her Order
---------------------------------	-----------

92. If an assessment is shown to measure what it is intended to measure, what can it be said to?

- a. reliable
- b. sensitive
- c. standardized
- d. valid

ANS: D PTS: 1	REF: 87–88	BLM: Remember WWW
---------------	------------	---------------------

Test Bank

93.	a. Th b. Se c. Se	is considered the ne axis system h veral disorders, veral disorders, ne DSM 5 stipula	as been such as such as	eliminated. S Asperger's sy S gambling add	ndrom iction,	e, have been el have been adde	ed.
	ANS:	A	PTS:	1	REF:	89	BLM: Higher Order
94.	a. ma b. ps c. de	anic disorder ychotic disorder pressive disorder xiety disorder	ſ		Inuit o		as "kayak-angst"? BLM: Remember
95.	the stre don't u respon a. Pe b. Th c. M	eet as an imbeci use labels such a d? ople will refuse here were no eff	le. You as "more treatme ective tr fessiona	respond to you on," "imbecile ent for mental or reatments for that are reluctan	ur fathe ," or "i disorde hese di	er by saying, in diot" anymore. ers that have a r sorders in the p	describes affectionately the boy down classifying mental disorders, we When he asks you why, how do you negative connotation. past. that upsets people.
	ANS:	D	PTS:	1	REF:	91	BLM: Higher Order
96.	a. beb. bec. be	night a mixed an cause the disord cause the symptocause the disord cause the disord	ler is the toms are ler is sc	eoretically sou e often seen in ientifically bas	nd primar æd		or <i>DSM</i> inclusion?
	ANS:	В	PTS:	1	REF:	92	BLM: Remember WWW
97.	a. a cb. thec. gred. the	important chang change from a d e inclusion of th eater emphasis o e lack of a presu	imensio e huma on valid imed the	onal to a catego nistic view of j lity and less co eoretical cause	prical sy patholo ncern f for ead	ystem Ogy For reliability ch disorder	
	ANS:	D	PTS:	1	REF:	93	BLM: Higher Order
98.	inclusi a. be b. be c. be d. be	on of premenstr cause of issues cause of issues cause of issues cause of issues	rual dys related related related related	phoric disorde to religion to pregnancy a to stigmatizatio to racism	r in the nd birt on	e <i>DSM</i> . Why do	eated debate erupts over the bes this controversy exist?
	ANS:	C	PTS:	1	REF:	94	BLM: Higher Order

- endocrine disorder.c. It is difficult to distinguish PMDD from premenstrual exacerbations of other disorders, such as binge eating disorder or mood disorders.
- d. It has less severe symptomatology than premenstrual syndrome and thus does not warrant a *DSM-IV* diagnostic label.

ANS: C PTS: 1 REF: 94 BLM: Higher Order

- 100. The DSM 5 is similar to the DSM –IV- R in which of the following ways?
 - a. It groups disorders by what causes them.
 - b. It specifies treatment for disorders.
 - c. The categories of disorders are very similar.
 - d. It uses a multiaxial approach to diagnosis.

ANS: C PTS: 1 REF: 95 BLM: R	Remember
------------------------------	----------

ESSAY

1. Describe the major objectives and procedures of clinical assessment. Be sure to include the typical activities of the assessor and the intended outcomes of the process.

ANS: Student responses will vary.

PTS: 1 REF: 69–70 BLM: Remember

2. Describe the concepts of reliability and validity. Why are the reliability and the validity of an assessment procedure important?

ANS: Student responses will vary.

PTS: 1 REF: 70–71 BLM: Remember

3. Describe the major objectives and typical procedures of the mental status exam. Be sure to include the typical activities of the examiner and the intended outcomes of the process.

ANS: Student responses will vary.

PTS: 1 REF: 71–72 BLM: Remember

4. Discuss the concept of confidentiality and the limits of confidentiality with regard to clinical assessment. Be sure to include the situations that would cause a clinician to break confidentiality.

ANS: Student responses will vary.

PTS: 1 REF: 73 BLM: Higher Order

5. Discuss fully how behavioural assessment takes the clinical interview one step further. What kinds of clinical populations and clinical problems might be especially well suited for behavioural assessment? Explain how target behaviours are identified and observed, using an illustrative example.

ANS: Student responses will vary.

PTS: 1 REF: 75–76 BLM: Higher Order

6. Identify and describe the ABCs of observational assessment. Using illustrative examples, explain how informal observation differs from formal observation, and the strengths and weaknesses of each.

ANS: Student responses will vary.

PTS: 1 REF: 77 BLM: Remember

7. Projective tests such as the Thematic Apperception Test and the original Rorschach inkblot test are often criticized with regard to their reliability. Explain why the reliability of these tests may not be as good as a personality measure such as the MMPI.

ANS: Student responses will vary.

PTS: 1 REF: 77–78 BLM: Higher Order

8. A psychiatrist orders a series of tests including an IQ test, personality inventory (MMPI), neuropsychological test (Halstead-Reitan), and a brain scan (CT scan) for a ten-year-old boy who has recently been acting aggressively. Explain what each test measures and how the psychiatrist would use the results of each test to help diagnose or rule out potential causes of the boy's behaviour.

ANS: Student responses will vary.

PTS: 1 REF: 79 BLM: Remember

9. Explain the difference between neuropsychological testing and neuroimaging. Describe the procedures involved in computerized axial tomography (CAT), magnetic resonance imaging (MRI), and functional MRI (fMRI), and explain what each procedure allows us to examine.

ANS: Student responses will vary.

PTS: 1 REF: 83–85 BLM: Remember

Abnormal Psychology An Integrative Approach canadian 4th Edition Barlow Test Bank

Chapter 3	Test Bank	Barlow Abnormal Psychology 4ce
-----------	-----------	--------------------------------

10. Describe the influence of culture on the experience of psychopathology. Why is it important for the clinician to acknowledge and appreciate the patient's culture before determining a diagnosis?

ANS: Student responses will vary.

PTS: 1 REF: 90 BLM: Higher Order

11. Labelling a patient with a diagnosis is often referred to as a "double-edged sword," as the diagnostic label can both help and hurt the patient. Explain the advantages and disadvantages (to the patient) of a diagnostic label.

ANS: Student responses will vary.

PTS: 1 REF: 91 BLM: Higher Order