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39	A	B	C	D	E

PRACTICE QUESTIONS

International Foundations of Medicine Exam Program (IFOM)

PSYCH

Psychiatry

Uploaded by Community B

EDITION

Original Demo

QUESTIONS

8

ISSUED

October 14, 2026

Before you begin

What this is

8 practice questions for International Foundations of Medicine Exam Program (IFOM) PSYCH , each with its answer key and an explanation. Answer a question before you read its key - the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, PSYCH
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

Licence

Free Mometrix practice demo. The complete question bank is available through a paid account.

QUESTION 1

SINGLE CHOICE

An 80-year-old man is admitted for a urinary tract infection and 48 hours later becomes acutely confused, disoriented to place and time, and visually hallucinating. He is alert and lucid during the morning but becomes confused again each evening. Which diagnosis best fits this presentation?

- ☐ A Alzheimer disease dementia
- ☒ B Delirium
- ☐ C Schizophrenia
- ☐ D Dissociative identity disorder

ANSWER B

WHY Delirium features acute onset, fluctuating course (often worse at night - 'sundowning'), inattention, and altered consciousness/awareness, typically precipitated by an acute medical condition such as infection. Alzheimer dementia has an insidious, slowly progressive course without diurnal fluctuation. Schizophrenia is chronic with psychotic symptoms but not acute confusion tied to a medical trigger. Dissociative identity disorder involves alternating personality states, not confusion.

QUESTION 2

SINGLE CHOICE

Which of the following patient populations is at the highest baseline risk for completed suicide in the United States?

- ☐ A Adolescent females aged 15-19
- ☐ B Middle-aged adults aged 45-64
- ☒ C Older adult Caucasian males aged 75 and above
- ☐ D Young adult males aged 18-24

ANSWER C

WHY In the United States, completed suicide rates rise with age and are highest among older adult males, particularly non-Hispanic White men aged 75 years and older, who historically have had the highest suicide rate of any demographic group. Although adolescent and young adult suicide attempts are common, completed suicide rates are substantially lower in those groups. The 45-64 age group also has elevated rates but not as high as the oldest age stratum.

QUESTION 3

SINGLE CHOICE

A 32-year-old man with a long history of heroin use is brought to the emergency department after being found unconscious. He is breathing slowly, has pinpoint pupils, and a respiratory rate of 6 breaths per minute. Which of the following is the most appropriate initial pharmacologic treatment?

- ☐ A Methadone
- ☐ B Buprenorphine
- ☒ C Naloxone
- ☐ D Naltrexone

ANSWER C

WHY Acute opioid overdose presenting with respiratory depression, miosis, and decreased level of consciousness is a medical emergency treated with naloxone, a pure opioid antagonist that can be given intravenously, intramuscularly, or intranasally. Methadone and buprenorphine are used for opioid use disorder treatment and maintenance, not acute overdose. Naltrexone is an opioid antagonist used to prevent relapse after detoxification and would precipitate withdrawal if given to an opioid-dependent patient.

QUESTION 4

SINGLE CHOICE

A patient with schizophrenia is started on haloperidol for acute psychosis. Three days later, he develops severe muscle rigidity, hyperthermia, altered mental status, and autonomic instability with elevated creatine kinase. Which of the following is the most appropriate immediate management?

- ☐ A Administer benztropine
- ☒ B Administer dantrolene and bromocriptine
- ☐ C Administer flumazenil
- ☐ D Administer propranolol

ANSWER B

WHY The presentation of severe muscle rigidity, hyperthermia, autonomic instability, altered mental status, and elevated CK in a patient recently started on a high-potency typical antipsychotic is consistent with neuroleptic malignant syndrome (NMS). Treatment includes immediate discontinuation of the offending agent, supportive care, and pharmacologic management with dantrolene (a direct skeletal muscle relaxant), bromocriptine or amantadine (dopamine agonists). Benztropine is used for acute dystonia and other extrapyramidal symptoms but is not sufficient for NMS. Flumazenil is a benzodiazepine antagonist and propranolol is used for akathisia.

QUESTION 5

SINGLE CHOICE

A 45-year-old man reports excessive worry about work, finances, and family for more than 6 months. He has difficulty controlling the worry, feels restless, fatigues easily, has difficulty concentrating, and reports sleep disturbance. Which of the following best describes the minimum duration required by DSM-5-TR for a diagnosis of generalized anxiety disorder (GAD)?

- ☐ A 1 month
- ☐ B 3 months
- ☒ C 6 months
- ☐ D 12 months

ANSWER C

WHY DSM-5-TR specifies that excessive anxiety and worry occurring more days than not for at least 6 months, about a number of events or activities, is required for a diagnosis of generalized anxiety disorder, along with at least three of six associated symptoms (restlessness, fatigue, difficulty concentrating, irritability, muscle tension, sleep disturbance).

QUESTION 6

MULTIPLE CHOICE

Which of the following findings are characteristic of anorexia nervosa, restricting type? (Choose two.)

- ☒ A Body mass index below 17.5 kg/m^2
- ☒ B Intense fear of gaining weight
- ☐ C Recurrent episodes of binge eating
- ☐ D Frequent use of laxatives or diuretics to prevent weight gain

ANSWER A • B

WHY Anorexia nervosa is characterized by significantly low body weight, intense fear of gaining weight, and disturbance in the way one's body weight or shape is experienced. Restricting type is defined by weight loss accomplished primarily through dieting, fasting, or excessive exercise without regular episodes of binge eating or purging behaviors. Recurrent binge eating episodes and frequent use of laxatives or diuretics are features of bulimia nervosa or anorexia nervosa, binge-eating/purging type.

QUESTION 7

MULTIPLE CHOICE

A patient is started on haloperidol for acute psychosis. Which of the following are extrapyramidal side effects associated with typical (first-generation) antipsychotics such as haloperidol? (Choose two.)

- ☒ **A** Acute dystonia
- ☒ **B** Tardive dyskinesia
- ☐ **C** Serotonin syndrome
- ☐ **D** Pseudoparkinsonism

ANSWER A • B

WHY First-generation antipsychotics like haloperidol block D2 receptors in the nigrostriatal pathway and are associated with extrapyramidal symptoms (EPS), including acute dystonia (hours to days), akathisia, pseudoparkinsonism (days to weeks), and tardive dyskinesia (months to years). Serotonin syndrome is associated with serotonergic agents (e.g., SSRIs, MAOIs), not with antipsychotics such as haloperidol.

QUESTION 8

SINGLE CHOICE

A 38-year-old man has a long-standing pervasive pattern of social detachment, restricted emotional expression, and preference for solitary activities. He shows little interest in close relationships and demonstrates flattened affect with indifference to praise or criticism. According to DSM-5, in which personality disorder cluster is this disorder classified?

- ☒ **A** Cluster A (odd/eccentric)
- ☐ **B** Cluster B (dramatic/erratic)
- ☐ **C** Cluster C (anxious/fearful)
- ☐ **D** Cluster D (not a recognized DSM-5 cluster)

ANSWER A

WHY DSM-5 groups personality disorders into three clusters. Cluster A includes paranoid, schizoid, and schizotypal personality disorders-described as 'odd/eccentric.' The patient's social detachment, restricted emotional expression, and indifference to relationships are characteristic of schizoid personality disorder, which is classified in Cluster A. Cluster B includes antisocial, borderline, histrionic, and narcissistic disorders, while Cluster C includes avoidant, dependent, and obsessive-compulsive personality disorders.