

Psychology Assessment Items: Focus on Psychologists and Major Theories

Grade	Higher Education	Item Type	MC
Subject	Psychology	DOK	1
Stem	Which psychologist based his work on Thorndike's law of effect and was most widely influential in the field of operant conditioning?		
Answer Options/Objects/Rubric	A. Ivan Pavlov B. B.F. Skinner C. Erik Erikson D. John B. Watson		
Correct Answer	B.F. Skinner		



Grade	Higher Education	Item Type	MC
Subject	Psychology	DOK	2
Stem	In the classical conditioning study in which a dog was presented with food each time a bell was rung, the dog was trained to begin salivating at the sound of the bell. How did the classification of the bell change throughout this study?		
Answer Options/Objects/Rubric	<ul style="list-style-type: none"> A. The bell was a neutral stimulus prior to conditioning and a conditioned stimulus after conditioning. B. The bell was an unconditioned stimulus prior to conditioning and a conditioned stimulus after conditioning. C. The bell was a neutral stimulus prior to conditioning and an unconditioned stimulus after conditioning. D. The bell was a conditioned stimulus prior to conditioning and a neutral stimulus after conditioning. 		
Correct Answer	The bell was a neutral stimulus prior to conditioning and a conditioned stimulus after conditioning.		



Grade	Higher Education	Item Type	MC
Subject	Psychology	DOK	1
Stem	Which need is the highest level that can be achieved in Maslow's hierarchy of needs?		
Answer Options/Objects/Rubric	<ul style="list-style-type: none"> A. morality B. friendship C. self-esteem D. personal security 		
Correct Answer	morality		



Counseling Assessment Items

Item Format	MC
Cog. Level	Recall
Blueprint Domain	Domain 1 - The Practice of Systemic Therapy
CACREP Domain	Counseling & Helping Relationships
Source(s)	https://ptcny.com/pdf/AMFTRB2021.pdf https://www.clinical-partners.co.uk/for-adults/counselling-and-psychotherapy/systemic

What is the purpose of systemic therapy?

- A. To delve into the client's past in order to fix current problems
- B. To recognize and understand unhealthy patterns in the client's current relationships in order to change them
- C. To monitor the client over a long period of time in order to fully understand the patient's problems
- D. To identify the most problematic people in the client's life in order to sever those relationships

Rationales:

B. To recognize and understand unhealthy patterns in the client's current relationships in order to change them. Systemic therapy is based on the client's here-and-now relationships—how those relationships function and their effect on the client. Systemic therapy, unlike traditional psychotherapy, does not address the client's past. It can also be provided in either a short-term or long-term approach and does not require monitoring the client over an extended period of time if that is not determined to be optimal for the client. The goal of systemic therapy is to identify and effectively alter problematic relationships in the client's life, not necessarily end them.



Item Format	MC
Cog. Level	Application
Blueprint Domain	Domain 6 - Maintaining Ethical, Legal, and Professional Standards
CACREP Domain	Professional Counseling Orientation and Ethical Practice
Source(s)	https://www.cacrep.org/section-2-professional-counseling-identity/ https://www.cce-global.org/Assets/AssessmentAndExams/CPCEbrochure.pdf https://ptcny.com/pdf/AMFTRB2021.pdf

A counselor is required to conduct sessions using tele-health platforms due to mitigating circumstances. Which of the following Counsel for the Accreditation of Counseling & Related Educational Programs (CACREP) common-core areas addresses the guidelines and responsibilities for this practice?

- A. Professional Counseling Orientation and Ethical Practice
- B. Research and Program Evaluation
- C. Counseling and Helping Relationships
- D. Human Growth and Development

Rationales:

A. Professional Counseling Orientation and Ethical Practice. The impact of technology on the counseling profession falls under the standards for ethical practice according to the CACREP. While it is true that technology may impact research and program evaluation, its effect on counseling is an ethical issue. The common-core area of Counseling and Helping Relationships describes approaches to clinical practice but does not specifically address outside ethical factors impacting the field. The common-core area of Human Growth and Development focuses on life stages but also does not specifically address the impact of factors such as tele-health on the field.



Item Format	MC
Cog. Level	Application
Blueprint Domain	Domain 2 - Assessing, Hypothesizing, and Diagnosing
CACREP Domain	Assessment and Testing
Source(s)	https://www.nbcc.org/Assets/Exam/NCE-Content-Outline-2019.pdf https://www.cce-global.org/Assets/AssessmentAndExams/CPCEbrochure.pdf https://ptcny.com/pdf/AMFTRB2021.pdf

Which of the following actions is a necessary step when assessing a new client?

- A. Diagnose the client as quickly as possible.
- B. Rule out a medical cause for the client's symptoms.
- C. Speak to the client's family before interviewing the client.
- D. Perform all assessments before obtaining a client's self-report.

Rationales:

B. Rule out a medical cause for the client's symptoms. Medical causes must be ruled out when assessing a new client before treatment, especially before psychopharmaceutical treatment. Diagnosis should not be rushed and may take longer to determine than the initial assessments. Speaking to the client's family *before* speaking to the client is not required, although their perspectives may be clinically useful. Client self-reports are a necessary step in the intake and assessment process, as they can speak to their internal experiences that may not be visible or noticeable to an outside observer.

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Item Format	MC
Cog. Level	Analysis
Blueprint Domain	Domain 5 - Managing Crisis Situations / Domain 6 - Maintaining Ethical, Legal, and Professional Standards
CACREP Domain	Counseling and Helping Relationships / Professional Counseling Orientation and Ethical Practice
Source(s)	https://ptcnny.com/pdf/AMFTRB2021.pdf https://www.cce-global.org/Assets/AssessmentAndExams/CPCEbrochure.pdf

A client reveals that they have been experiencing intense suicidal ideation and have formed a plan to go through with it, but they make it clear that they only revealed this because the counselor is required to maintain client confidentiality. What is a counselor's FIRST ethical responsibility when responding to this information?

- A. Assure the client that their confidentiality will be respected.
- B. Reach out to the client's family as soon as the session is over.
- C. Inform the client that confidentiality does not apply when there is real danger of the client hurting themselves or someone else.
- D. Inform the client that the counselor is required to hospitalize the client because they have formed a plan.

Rationales:

C. Inform the client that confidentiality does not apply when there is a real danger of the client hurting themselves or someone else. The counselor is required to inform the client that confidentiality does not apply here, where there is real danger of imminent self-harm. Reaching out to the client's family after the session would not be the counselor's *first* action in response to this information. Immediate hospitalization, while an option and warranted under certain circumstances, is not necessarily required.



Item Format	MC
Cog. Level	Analysis
Blueprint Domain	Domain 3 - Designing and Conducting Treatment
CACREP Domain	Social and Cultural Diversity
Source(s)	https://www.cacrep.org/section-2-professional-counseling-identity/ https://www.cce-global.org/Assets/AssessmentAndExams/CPCEbrochure.pdf

You are preparing to work with a new client with an ethnic background that is different than yours. Based upon the Counsel for the Accreditation of Counseling & Related Educational Programs (CACREP) common-core area of Social and Cultural Diversity, which of the following will be essential for you to address with this client?

- A. The client's relationship with past counselors
- B. The client's relationship with all people of the same ethnicity as the counselor
- C. The impact of the cost of the session on both client and counselor
- D. The effects of power and privilege for counselors and clients

Rationales:

D. The effects of power and privilege for counselors and clients. It is necessary to address the client's and counselor's positions of power and privilege in the therapeutic relationship based on their respective demographics such as race, ethnicity, and socioeconomic status. This might include understanding the client's relationships with past counselors and the client's experience of their relationships and interactions with people of the same ethnicity as the counselor, but neither of these considerations are specified by CACREP guidelines. The client's ability to pay for counseling is necessary to determine and may play a role in the client/counselor power dynamic but is not specific to clients whose ethnicity is not the same as the counselor's and is also not specified by CACREP.



Item Type	Case study
Item Format	MC
Cog. Level	Analysis
Blueprint Domain	Domain 3 - Designing and Conducting Treatment
CACREP Domain	Counseling and Helping Relationships
Source(s)	https://www.nbcc.org/Assets/Exam/NCMHCE_Sample_Case_Studies.pdf https://ptcnyc.com/pdf/AMFTRB2021.pdf

Case Study

Section A

Client

Age: 22

Sex: Female

Gender: Female

Sexuality: Heterosexual

Ethnicity: Caucasian

Relationship Status: Single

Counseling Setting: Private practice

Type of Counseling: Individual and group

Presenting Problem: Psychosis and mania

Diagnosis: Undetermined



Section B**Presenting Problem:**

You have been counseling a white 22-year-old female client since she was a freshman in college. In your work together, you have focused on the client's social anxiety and depression, for which she takes an antidepressant prescribed by her primary care physician. Your client also participates in a therapy group that you run for young adults who want to improve their social skills. One day, your client comes in for her regular individual counseling appointment the day after the group session and appears distressed. She admits to you that she had a strange and terrifying experience during group last night; she reports that "the room turned green" and she "saw a giant bug in the middle of the room, and all the group members were its legs." She reveals that she also experienced the other group members as nefarious, and she felt overwhelmed. Your client recognizes now that there was not a giant bug in the room but says that at the time it felt real. She reports that she has been seeing "auras" for years, but this is the first time anything like this has happened to her.

Mental Status Exam:

The client presents with good hygiene and is oriented times 3. She is dressed appropriately and is alert and engaged, although her speech is rapid and she has difficulty concentrating. The client reports that since she started taking the antidepressant, she has slept less than 3 hours every night. Despite this, she feels energized all the time, sometimes to the point of discomfort. She reveals that she wrote 100 pages of a novel in just a few days and has been making grandiose plans with which she does not follow through, as she loses interest in them quickly. As you speak with your client, it is clear to you that her psychosis has abated for the time being, but she is concerned that it will happen again.

Family History:

The client has one twin brother who has never presented with psychiatric symptoms. There is a history of mental illness and suicide on her father's side of the family, although she has never learned the particulars of who this affected and how. The client denies current suicidal ideation but admits that she has felt suicidal in the past. Her parents are still married, and her entire extended family lives in another state. She denies any past physical or sexual abuse or trauma. Her parents are supportive and subsidize her mental health treatment.



Which response would be MOST appropriate after hearing about the client's experience during the group session?

- A. Assure the client that her experiences were not real.
- B. Tell the client that she should have spoken up or left the room when this was occurring.
- C. Explore the client's feelings about the experience and the circumstances leading to it.
- D. Immediately refer the client to a psychiatrist.

Rationales:

C. Explore the client's feelings about the experience and the circumstances leading to it. It is important to understand the client's perspective on the experience, especially if the counselor did not observe signs/symptoms during the experience or any notable preceding signs/symptoms or catalyzing events. Assuring the client that her experiences were "not real" denies the client's experience and feelings about what happened and additionally has already been acknowledged by the client. Telling the client what she "should" have done during the episode blames the client for not dealing with the experience "correctly" and does not help the client deal with her here-and-now circumstances and current feelings about the event. A referral to a psychiatrist might be necessary, but it would not be the counselor's *first* response.



Item Format	MC
Cog. Level	Analysis
Blueprint Domain	Domain 2 - Assessing, Hypothesizing, and Diagnosing
CACREP Domain	Assessment and Testing
Source(s)	https://www.nbcc.org/Assets/Exam/NCMHCE_Sample_Case_Studies.pdf https://ptcnyc.com/pdf/AMFTRB2021.pdf

Considering these circumstances, which of the following explanations for the client's recent behavior is MOST likely?

- A. The client's antidepressant has pushed her into mania.
- B. The antidepressant is working, giving the client more energy.
- C. The client is not on a high enough dose of the antidepressant.
- D. The client is self-medicating with recreational drugs.

Rationales:

A. The client's antidepressant has pushed her into mania. Antidepressants can induce mania in people with bipolar or schizoaffective disorder who have been misdiagnosed with MDD. The client's feelings and actions are not indicative of healthy functioning, so it cannot be determined that the antidepressant is "working" because the client has "more energy." A higher dose of the antidepressant is not necessary because the client is not exhibiting depressive symptoms. The client has no history of drug use or abuse, so this explanation is therefore not the *most likely* explanation.



Item Format	MC
Cog. Level	Analysis
Blueprint Domain	Domain 4 - Evaluating Ongoing Process / Domain 5 - Managing Crisis Situations / Domain 6 - Maintaining Ethical, Legal, and Professional Standards
CACREP Domain	Professional Counseling Orientation and Ethical Practice
Source(s)	https://www.nbcc.org/Assets/Exam/NCMHCE_Sample_Case_Studies.pdf https://ptcny.com/pdf/AMFTRB2021.pdf

At the end of your session with this client, she expresses her fear of having another psychotic episode and concern that her current medication regimen is not helping her. What is the BEST next step for your work with this client?

- A. Urge the client to hospitalize herself because she is a danger to herself and others.
- B. Instruct the client to discontinue her current medication regimen.
- C. Assist the client in finding a psychiatrist to address her concerns about her medication.
- D. Assure the client that her experience was most likely a singular occurrence and continue your work together as before.

Rationales:

C. Assist the client in finding a psychiatrist to address her concerns about her medication. The client's primary concern is her medication, which falls out of your realm of expertise and responsibilities as a counselor; therefore, collaborating with a psychiatrist for continuation of care is necessary. The client has not demonstrated that she is a danger to herself or others, so hospitalization is not necessarily required based on those grounds. Additionally, you, as the counselor, are not in a position to recommend medication changes because you are not a doctor. You do not know that this experience was a singular occurrence, so you cannot assure the client of this; you should also acknowledge and address these experiences in your work together moving forward, as they are both clinically significant and noticeably impacting your client's well-being.

