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PNCB PMHS

PNCB Pediatric Primary Care Mental Health Specialist



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Question: 1

A 14-year-old presents for a routine visit after several minor injuries from skateboarding. The caregiver stays in the room and answers most questions. The adolescent avoids eye contact when asked about friends, substances, dating, and safety. Which screening approach is most appropriate?

- A. Explain confidentiality limits and complete a private HEADSS assessment
- B. Ask the caregiver to complete all risk questions after the visit
- C. Skip psychosocial questions because the adolescent appears uncomfortable
- D. Limit screening to injury prevention because the visit is routine

Answer: A

Question: 2

A 16-year-old prescribed stimulant medication for ADHD reports that classmates ask to buy pills before exams. The adolescent has started skipping doses at school because “people keep watching me.” Which management response is most appropriate?

- A. Stop ADHD treatment permanently because peers know about the medication
- B. Ignore the concern because medication sharing is a school discipline issue
- C. Advise selling unused pills only to classmates who already have ADHD
- D. Discuss secure storage, diversion risk, adherence barriers, and school dosing options

Answer: D

Question: 3

A 20-month-old does not respond consistently to name, has few spoken words, and becomes frustrated during play. The caregiver reports recurrent otitis media, loud television volume, and a failed hearing screen. Which diagnostic decision is most appropriate?

- A. Diagnose oppositional behavior because frustration appears during play
- B. Diagnose global developmental delay because expressive language is limited
- C. Prioritize hearing evaluation while continuing developmental surveillance
- D. Diagnose autism spectrum disorder because response to name is inconsistent

Answer: C

Question: 4

A 5-year-old is brought for “constant lying.” The caregiver says the child invents stories about being a superhero and having a pet tiger. The child also describes real daily events accurately, plays cooperatively, and shows no school impairment. Which evaluation approach is most appropriate?

- A. Assess developmental context, fantasy play, caregiver expectations, and impairment
- B. Refer for psychosis evaluation because imaginary stories are fixed delusions
- C. Diagnose conduct disorder because repeated false statements indicate deceitfulness
- D. Start behavior medication because lying at this age predicts serious aggression

Answer: A

Question: 5

A 6-year-old recently adopted internationally speaks comfortably in the home language with caregivers but remains silent in English-speaking kindergarten. The child plays nonverbally with peers, follows visual routines, and has been exposed to English for 2 months. Which diagnostic interpretation is most appropriate?

- A. Diagnose autism spectrum disorder because peer play is mostly nonverbal
- B. Consider language acquisition and adjustment before diagnosing selective mutism
- C. Diagnose selective mutism because silence at school is diagnostic
- D. Diagnose oppositional defiant disorder because school speech is refused

Answer: B

Question: 6

A 9-year-old avoids sleepovers, asks repeated reassurance about storms, and has stomachaches before tests. The caregiver reports the child can separate for school but worries intensely across several situations. Which evaluation approach is most appropriate?

- A. Use Vanderbilt alone because anxiety symptoms are scored as inattention
- B. Use M-CHAT-R/F because reassurance seeking indicates autism risk
- C. Use SCARED and assess triggers, impairment, safety, and family responses
- D. Use CRAFFT because avoidance usually reflects hidden substance use

Answer: C

Question: 7

A colleague who recently passed the PMHS exam offers to describe several remembered test questions to help the PMHS prepare educational materials. The colleague says, "It is fine because we will change the wording." Which professional response is most appropriate?

- A. Accept the questions if all answer choices are rewritten before use
- B. Decline the offer and use only official outlines and ethical study resources
- C. Ask for only difficult questions because broad topics are publicly listed
- D. Use the concepts if the colleague does not share the correct answers

Answer: B

Question: 8

A caregiver of a 3-year-old says, "She talks constantly, but she falls apart when she cannot do things her way." The child uses sentences, plays beside and with other children, and can follow simple routines when rested. Which guidance best stimulates developmental and emotional progression?

- A. Recommend formal cognitive testing because frustration indicates global delay
- B. Use time-out for every emotion because feelings should not interrupt routines
- C. Tell the caregiver to avoid all peer play until tantrums completely stop
- D. Encourage shared reading, turn-taking play, naming feelings, and consistent routines

Answer: D

Question: 9

At a 12-month visit, a caregiver reports using videos at every meal because the infant eats more when distracted. The infant is growing appropriately, uses a pincer grasp, drinks from a cup, and turns away when full. Which health-promotion guidance is most appropriate?

- A. Continue videos because increased intake is the best feeding outcome
- B. Use responsive feeding, seated routines, and attention to hunger and fullness cues
- C. Start appetite medication because turning away from food shows poor intake
- D. Restrict cup drinking because independent feeding reduces caregiver control

Answer: B

Question: 10

A 10-year-old has episodic irritability, decreased sleep, racing thoughts, and periods of unusually high goal-directed activity lasting several days. The caregiver reports depression in one parent and “nervous breakdowns” in two relatives, but details are unclear. Which family-history approach is most appropriate?

- A. Reassure the caregiver that unclear family labels cannot inform the diagnostic evaluation
- B. Skip family history because pediatric psychiatric diagnoses should rely only on current symptoms
- C. Elicit a multigenerational history of mood disorders, hospitalization, suicide, substances, and treatment response
- D. Ask only about ADHD because increased activity is the most visible concern at school

Answer: C

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