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The presence of delusions of persecution indicates that this client is at the greatest risk for injury due to the client's belief that a person in power is out to harm them. Therefore, the nurse should assess this client first. A nurse is preparing to discharge to home an older adult client who attempted suicide.

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A nurse in a mental health clinic is caring for a client with bipolar disorder and reports that she stopped taking lithium 2 weeks ago. The nurse should recognize which of the following as an expected adverse effect that might have caused the client to stop taking the medication? A) Photophobia B) Hand tremors C) Constipation

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