### THE CATHOLIC UNIVERSITY OF EASTERN AFRICA

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#### MAIN EXAMINATION

JANUARY - APRIL 2018 TRIMESTER

## **FACULTY OF SCIENCES DEPARTMENT OF NURSING REGULAR PROGRAMME**

**NUR 206: MEDICAL SURGICAL NURSING II** 

Date: APRIL 2018 **Duration: 3 Hours** 

**INSTRUCTIONS:** Answer ALL Questions

#### PART -I: MULTIPLE CHOICE QUESTIONS (MCQ (20 MARKS)

- Q1. In assessing stool characteristics associated with diarrhea, the nurse knows that the presence of greasy stools suggests:
  - a) Disorders of the colon.
  - b) Inflammatory enteritis.
  - c) Intestinal malabsorption.
  - d) Small-bowel disorders.
- Q2. A positive Rovsing's sign is indicative of appendicitis. The nurse knows to assess for this indicator by palpating the:
  - a) Right lower quadrant.
  - b) Left lower quadrant.
  - c) Right upper quadrant.
  - d) Left upper quadrant.
- Q3. Common clinical manifestations of Crohn's disease are:
  - a) Abdominal pain and diarrhea.
  - b) Edema and weight gain.
  - c) Nausea and vomiting.
  - d) Obstruction and ileus.
- Q4. Nutritional management for regional enteritis consists of diet therapy that is:
  - a) High in fats.

- b) High in fiber.
- c) Low in protein.
- d) Low in residue.
- Q5. Postoperative nursing management for a patient with a continent ileostomy excludes:
  - a) Checking to make certain that the rectal packing is in place.
  - b) Irrigating the ileostomy catheter every 3 hours.
  - c) Nasogastric tube feedings, 30 to 50 mL, every 4 to 6 hours.
  - d) Perineal irrigations after the dressings are removed.
- Q6. A patient with peritonitis has been started on treatment. Once it subsides, the nurse continues to assess for the common complication of:
  - a) Abscess formation.
  - b) Respiratory arrest owing to excessive pressure on the diaphragm.
  - c) Umbilical hernia.
  - d) Urinary tract infection.
- Q7. A patient questions about endoscopy, the nurse determines that he needs further instruction when he states:
  - a) "Since this procedure only takes about 30 minutes, I will be able to drive myself home afterward."
  - b) "I will be sure not to eat or drink anything after midnight tonight."
  - c) "They will spray the back of my throat so I don't gag on the tube."
  - d) "The doctor will be able to see if I have an ulcer and treat any bleeding."
- Q8. Which of the following is the correct position for a patient undergoing paracentesis,:
  - a) Recumbent so that the fluid will pool to the lower abdomen.
  - b) Lying on her left side so that fluid will not exert pressure on the liver.
  - c) Semi-Fowler's to avoid shock and provide the most comfort.
  - d) Upright with her feet resting on a support so that the puncture site will be readily visible.
- Q9. The obstruction of bile flow due to cholelithiasis can interfere with the absorption of:
  - a) Vitamin A.
  - b) Vitamin B6
  - c) Vitamin B12
  - d) Vitamin C
- Q10. Which of the following is not an indicator of diabetic ketoacidosis?
  - a) Hyperthermia
  - b) Nausea/Vomiting
  - c) Slow and shallow breathing

- d) Psychosis leading to dementia
- Q11. A client is admitted to the same-day surgery unit after recovery from a laparoscopic cholecystectomy. Which action is the nurse's priority in caring for the client?
  - a) Turn the client on the right side to help the flow of bile into the drainage bag.
  - b) Check that the nasogastric tube is connected to low intermittent suction.
  - c) Document the client's use of the patient-controlled analgesia (PCA) pump.
  - d) Monitor the client's oxygen saturation level via pulse oximetry.
- Q12. After educating Sarah about the effects that hepatitis has on the liver, the nurse determines that she understands the information when she states:
  - a) "It is okay to use acetaminophen (Tylenol) as much as needed for aches and pains."
  - b) "I should talk to my physician before taking any herbal or over-the-counter medications."
  - c) "Hepatitis causes very little damage to my liver, so I can start taking more vitamin supplements."
  - d) "I will only have one drink on the weekends when I go out with my friends
- Q13. Which the following statements about ascites and hepatic encephalopathy is true
  - a) The presence of fluid in the abdomen (ascites) can be confirmed by assessing for a fluid wave or percussing for shifting dullness.
  - b) In stage 2 of hepatic encephalopathy, patients are comatose with markedly abnormal electroencephalograms.
  - c) Furosemide (Lasix), an aldosterone-blocking agent, is first-line therapy in the treatment of ascites.
  - d) Protein is usually not restricted in patients who are comatose or have encephalopathy.
- Q14. When thyroid hormone is administered for prolonged hypothyroidism, the nurse knows to monitor the patient for:
  - a) Angina.
  - b) Depression.
  - c) Mental confusion.
  - d) Hypoglycemia.
- Q15. Iodine or iodide compounds are used for hyperthyroidism because they do which of the following:
  - a) Increase the basal metabolic rate.
  - b) Increase the vascularity of the gland.
  - c) Lessen the release of thyroid hormones.
  - d) Increase the size of the gland.
- Q16. Nursing management for a hypoparathyroid patient would not include:

- a) Maintaining a quiet, subdued environment.
- b) Making certain that calcium gluconate is kept at the bedside.
- c) Observing the patient for signs of tetany.
- d) Supplementing the diet with milk and milk products.
- Q17. Laboratory findings suggestive of Addison's disease exclude:
  - a) A relative lymphocytosis.
  - b) Hyperkalemia and hyponatremia.
  - c) Hypertension.
  - d) Hypoglycemia.
- Q18. You determine that a student nurse has understood blood administration technique when he states:
  - a) 50 to 100 mL of 0.9% NaCl should be added to the pack to dilute the solution and speed up delivery of the transfusion.
  - b) The unit should be administered in combination with dextrose in water if the patient needs additional carbohydrates.
  - c) The unit of blood should be administered over 3 to 4 hours.
  - d) Warming the blood pack with warm water in low resource areas is the recommended practice.
- Q19. The nurse educating a diabetic patient on exercise determines that she needs further instruction when she states:
  - a) "Exercise will lower my blood glucose level."
  - b) "I should try to exercise at the same time each day."
  - c) "Walking is generally a safe form of exercise."
  - d) "I should exercise more when my glucose levels are more than 13.9mmol/l."
- Q20. You observe a student nurse giving discharge instructions to a patient who is newly prescribed an iron supplement. Which of the following instructions is wrong and need to be corrected?
  - a) Take iron on an empty stomach as tolerated to increase absorption
  - b) Increase intake of vitamin C food sources to increase iron absorption
  - c) Avoid a diet high in fiber, which can interfere with iron absorption
  - d) If a liquid iron supplement is prescribed, use a straw or a spoon to place the iron at the back of the mouth to prevent staining

### PART-II: SHORT ANSWER QUESTIONS (SAQs) (40 MARKS)

- Q1. Give 5 risk factors for peptic ulcer disease and the rationale for how they place one at risk (5marks)
- Q2. List 6 clinical manifestations associated with cholelithiasis (3marks)

- Q3. Diabetes mellitus has become a global concern with its rising prevalence. It is associated with long-term management and complications
  - a) Briefly explain how a glycated haemoglobin (HbA1C) is used to evaluate blood glucose compared to a random blood glucose level (3marks)
  - b) Briefly describe 3 macrovascular and 2 microvascular complications that can occur with diabetes (5marks)
- Q4. Outline FIVE nursing interventions with scientific rationale for a patient in Thyroid Storm (5marks)
- Q5. State FIVE health messages to give a person with adrenal insufficiency (5marks)
- Q6. Explain the pathophysiology of parkinsonism (5marks)
- Q7. Outline 4 priotised three part nursing diagnosis for a patient with cerebrovascular accident (4marks)
- Q8. List 10 clinical presentations of hypoparathyroidism (5marks)

### PART III: LONG ANSWER QUESTIONS (LAQs) (40 MARKS)

- Q1. Karisa is a 56-year-old male who presents to the casualty with severe midepigastric abdominal pain, nausea, and vomiting. On physical assessment, he is noted to have abdominal distension and tenderness on palpation. The physician questions Karisa about his social history with alcohol & smoking. He admits to drinking at least half a bottle of vodka every day and smoking a pack of cigarettes every day. In Karisa's laboratory test results abnormal results are noted. The physician explains to Karisa and his wife that Karisa has acute pancreatitis and will need to be admitted to a medical ward for treatment.
  - a) Outline 5 laboratory tests that are carried out and the expected abnormalities to confirm the diagnosis of acute pancreatitis

(5marks)

- b) Formulate 5 nursing diagnosis for Karisa in the first 12hrs (5marks)
- c) Outline five *collaborative* interventions for Karisa in the first 12hrs (5marks)
- d) Describe 5 local and systemic complications that Karisa can develop (5marks)

- Q2. A patient is referred to a level 6 facility where you are rotating with a diagnosis of Guillain-Barre syndrome. In relation to this:
  - a) Outline FOUR other names used to identify Guillain-Barre (4marks)
  - b) Apply nursing process to plan care for first 24 hours (16marks)

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