

THE CATHOLIC UNIVERSITY OF EASTERN AFRICA

A. M. E. C. E. A

MAIN EXAMINATION

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SEPTEMBER – DECEMBER 2020 TRIMESTER

SCHOOL OF NURSING

REGULAR PROGRAMME

NUR 206: MEDICAL SURGICAL NURSING II

Date: DECEMBER 2020 Duration: 3Hours

INSTRUCTIONS:

- 1. Answer all questions
- 2. Candidates are advised not to write on the question paper
- 3. Candidates must hand in their answer booklets to the invigilator while in the examination room

SECTION A: MULTIPLE CHOICE QUESTIONS

(20 Marks)

- 1. To prevent gastroesophageal reflux in a male client with hiatal hernia, the nurse should provide which discharge instruction?
- a) "Lie down after meals to promote digestion."
- b) "Avoid coffee and alcoholic beverages."
- c) "Take antacids with meals."
- d) "Limit fluid intake with meals."
- 2. When preparing a male client, age 51, for surgery to treat appendicitis, the nurse formulates a nursing diagnosis of Risk for infection related to inflammation, perforation, and surgery. What is the rationale for choosing this nursing diagnosis?
- a) Obstruction of the appendix may increase venous drainage and cause the appendix to rupture.

- b) Obstruction of the appendix reduces arterial flow, leading to ischemia, inflammation, and rupture of the appendix.
- c) The appendix may develop gangrene and rupture, especially in a middle-aged client.
- d) Infection of the appendix diminishes necrotic arterial blood flow and increases venous drainage.
- 3. Which diagnostic test would be used first to evaluate a client with upper GI bleeding?
- a) Endoscopy
- b) Upper GI series
- c) Hemoglobin (Hb) levels and hematocrit (HCT)
- d) Arteriography
- 4. A female client with dysphagia is being prepared for discharge. Which outcome indicates that the client is ready for discharge?
- a) The client doesn't exhibit rectal tenesmus.
- b) The client is free from esophagitis and achalasia.
- c) The client reports diminished duodenal inflammation.
- d) The client has normal gastric structures.
- 5. What laboratory finding is the primary diagnostic indicator for pancreatitis?
- a) Elevated blood urea nitrogen (BUN)
- b) Elevated serum lipase
- c) Elevated aspartate aminotransferase (AST)
- d) Increased lactate dehydrogenase (LD)
- 6. While palpating a female client's right upper quadrant (RUQ), the nurse would expect to find which of the following structures?
 - a) Sigmoid colon
 - b) Appendix

- c) Spleen
- d) Liver
- 7. The nurse caring for a client with small-bowel obstruction would plan to implement which nursing intervention first?
- a) Administering pain medication
- b) Obtaining a blood sample for laboratory studies
- c) Preparing to insert a nasogastric (NG) tube
- d) Administering I.V. fluids
- 8. A patient with chronic alcohol abuse is admitted with liver failure. You closely monitor the patient's blood pressure because of which change that is associated with the liver failure?
- a) Hypoalbuminemia
- b) Increased capillary permeability
- c) Abnormal peripheral vasodilation
- d) Excess rennin release from the kidneys
- 9. Your patient with peritonitis is NPO and complaining of thirst. What is your priority?
- a) Increase the I.V. infusion rate.
- b) Use diversion activities.
- c) Provide frequent mouth care.
- d) Give sips of water every 15 minutes.
- 10. A 53 yr. patient has undergone a partial gastrectomy for adenocarcinoma of the stomach. An NG tube is in place and is connected to low continuous suction. During the immediate postoperative period, you expect the gastric secretions to be which color?
 - a) Brown.
 - b) Clear.
- c) Red.
- d) Yellow.
- 11. Which of the following is contraindicated in a patient with increased ICP?
 - a) Lumbar puncture

- b) Midline position of the head
- c) Hyperosmotic diuretics
- d) Barbiturates medication
- 12 During the assessment of a patient with increased ICP, you note that the patient's arms are pronated and extended out and toes pointed downward. You will document this as:
 - a) Decorticate posturing
 - b) Flaccid posturing
 - c) Sims Position
 - d) Decerebrate posturing
- 13. External ventricular drains monitor ICP and are inserted where?
 - a) Subarachnoid space
 - b) Lateral Ventricle
 - c) Epidural space
 - d) Right Ventricle
- 14. A 30-year-old was admitted to the progressive care unit with a C5 fracture from a motorcycle accident. Which of the following assessments would take priority?
 - a) Bladder distension
- b) Neurological deficit
 - c) Pulse oximetry readings
 - d) The client's feelings about the injury
- 15. The nurse is evaluating the status of a client who had a craniotomy 3 days ago. The nurse would suspect the client is developing meningitis as a complication of surgery if the client exhibits:
- a) A positive Brudzinski's sign
- b) A negative Kernig's sign

- c) Absence of nuchal rigidity
- d) Glascow Coma Scale score of 15
- 16. During the acute stage of meningitis, a 3-year-old child is restless and irritable. Which of the following would be most appropriate to institute?
- a) Limiting conversation with the child
- b) Keeping extraneous noise to a minimum
- c) Allowing the child to play in the bathtub
- d) Performing treatments quickly
- 17. When assessing a male client with pheochromocytoma, a tumor of the adrenal medulla that secretes excessive catecholamine, Nurse April is most likely to detect:
 - a) a blood pressure of 130/70 mm Hg.
 - b) a blood glucose level of 130 mg/dl.
 - c) bradycardia.
 - d) a blood pressure of 176/88 mm Hg.
- 18. Nurse Oliver should expect a client with hypothyroidism to report which health concerns?
- a) Increased appetite and weight loss
- b) Puffiness of the face and hands
- c) Nervousness and tremors
- d) Thyroid gland swelling
- 19. Nurse Ronn is assessing a client with possible Cushing's syndrome. In a client with Cushing's syndrome, the nurse would expect to find:
- a) Hypotension.
- b) Thick, coarse skin.
- c) Deposits of adipose tissue in the trunk and dorsocervical area.
- d) Weight gain in arms and legs.

- 20. Which nursing diagnosis takes highest priority for a female client with hyperthyroidism?
- a) Risk for imbalanced nutrition: More than body requirements related to thyroid hormone excess
 - b) Risk for impaired skin integrity related to edema, skin fragility, and poor wound healing
 - c) Body image disturbance related to weight gain and edema
 - d) Imbalanced nutrition: Less than body requirements related to thyroid hormone excess

II.SHORT ANSWER QUESTION (SAQ) (40 MARKS) 1. State five clinical manifestations of Guillain-Barre syndrome (5 marks) 2. Compareand contrast eight differences between Duodenal and Gastric ulcers (8 marks) 3. Outline five clinical manifestations of Peritonitis (5 marks) 4. Describe the pathophysiology of head injury (5 marks) 5. State five complications of thyroidectomy (5 marks) 6. Outline five clinical manifestations of Acromegaly (6 marks) 7. Explain the following diagnostic investigations (6 marks) a.Endoscopy b.Cerebral angiography

c.Cholecystogram

III.LONG ANSWER QUESTION (LAQ)

(40 MARKS)

1. Mrs. X has met with Road traffic accident and sustained spinal cord injury at T3-T4 and brought to ED (emergencydepartment) and BP 60/40 mmHg, spo2 -60 % and respirations -

8/minute

a) Describe the pathophysiology of spinal cord injury

(5 marks)

b) Describe immediate emergency management and nursing interventions

(15 marks)

- 2. Mr. Y, aged 45 years has been diagnosed with Type II Diabetic ,4 years back and has been non-compliant to antidiateic drugs and was admitted with c/o dizziness, sweating and headache .Blood glucose level is 9 mmol and Bp-160/90 mm Hg
- a) State five predisposing factors of Type II Diabetes

(5 marks)

b) Describe the pharmacological and nursing management for the above patient (15 marks)

END