

**UNIVERSITY OF SWAZILAND**  
**FACULTY OF HEALTH SCIENCES**  
**NURSING SCIENCE DEPARTMENT**

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SEMESTER II 2008

**FINAL EXAMINATION**

**COURSE CODE** : NUR 201  
**COURSE TITLE** : NURSING SCIENCE AND ARTS II  
**TIME ALLOWED** : 2 HOURS  
**MARKS ALLOCATED** : 75

**INSTRUCTIONS:**

1. Read the questions and instructions carefully.
2. Answer all three questions
3. Each correct fact is worth 1 mark unless indicated otherwise.
4. Write neatly and clearly.

THIS PAPER IS NOT TO BE OPENED UNTIL THE INVIGILATOR HAS  
GRANTED PERMISSION.

## **QUESTION 1**

### **MULTIPLE CHOICE**

#### **SITUATION:**

Mrs Soko is admitted to your ward with a medical diagnosis of hypertension.

1. A hypertensive patient needs to be educated about the following **except**:
  - (a) moderate physical activity
  - (b) weight reduction
  - (c) dietary vegetable reduction
  - (d) carbohydrate reduction
2. Primary hypertension means that:
  - (a) the reason for blood pressure elevation is partially known
  - (b) the reason for blood pressure elevation is well known
  - (c) the reason for blood pressure elevation cannot be identified.
  - (d) the reason for blood pressure elevation will soon be identified
3. The clinical manifestations of hypertension include the following **except**.
  - (a) small infarctions in the eyes/eye
  - (b) coronary artery diseases may occur
  - (c) right ventricle hypertrophy
  - (d) left ventricle hypertrophy
4. An electrocardiogram in severe hypertension is done to assess the following;
  - (a) right atrium hypertrophy
  - (b) left atrium hypertrophy
  - (c) left ventricular hypertrophy
  - (d) right ventricular hypertrophy

**SITUATION:**

Mrs Keswa came to your ward in a critically ill condition. Her medical diagnosis is congestive cardiac failure (CCF). On further physical examination the physician confirmed that Mrs Keswa has right sided heart failure.

5. Venous congestion in the systemic circulation in a CCF patient results in:
  - (a) peripheral edema
  - (b) hepatomegally
  - (c) vascular congestion of the gastro intestinal tract
  - (d) all of the above
6. Symptoms of fluid overload in congestive cardiac failure include the following:
  - (a) dyspnoea on exertion
  - (b) orthopnea
  - (c) paroxysmal nocturnal dyspnca
  - (d) all of the above

**SITUATION:**

Mr Lokothwayo comes to your ward with severe to abdominal pain and vomiting. His medical diagnosis is peptic ulcer

Peptic ulcers are more likely to be in the duodenum than in the stomach.

7. Duodenal ulcers occur
  - (a) in the 2<sup>nd</sup> half of the small intestines
  - (b) in the last  $\frac{1}{4}$  of the small intestines
  - (c) in the middle part of the small intestine
  - (d) in the 1<sup>st</sup> part of the small intestine
8. Chronic gastric ulcers tends to occur in the
  - (a) larger curvature of the stomach
  - (b) lesser curvature of the stomach
  - (c) in the middle part of the stomach
  - (d) in the pyloric sphinchter of the stomach

9. Peptic ulcer disease occurs frequently between the ages of:
- (a) 20-25 years
  - (b) 40-60 years
  - (c) 30-40 years
  - (d) 25-35 years
10. There is a difference between clinical manifestations of duodenal and gastric ulcers. The incidence of the duodenal ulcer is between
- (a) 30-35 years
  - (b) 30-60 years
  - (c) 35-40 years
  - (d) 40-50 years
11. Pain in gastric ulcers occurs as follows:
- (a)  $\frac{1}{2}$  -1hour after meals
  - (b) 1- 2 hours after meals
  - (c) 2-3 hours after meals
  - (d) 3 hours after meals

**SITUATION:**

A 38 year old lady comes to a medical ward with the medical diagnosis of angina pectoris.

12. The above condition is characterized by episodes and paroxysms of pain on the following side of the chest.
- (a) anterior chest
  - (b) lateral chest
  - (c) posterior
  - (d) all of the above
13. The quality of angina pain is as follows;
- (a) squeezing
  - (b) constrictive
  - (c) has suffocating sensation
  - (d) all of the above

14. Contributing factors of gastric cancers include:
- (a) chronic stomach inflammation
  - (b) pernicious anemia
  - (c) achlorhydria
  - (d) all of the above
15. Cancer of the stomach can occur on the following parts:
- (a) any part of the stomach
  - (b) on lower part of the stomach
  - (c) on upper part of the stomach
  - (d) on lateral part of the stomach
16. Organs affected by gastric ulcers are:
- (a) esophagus
  - (b) pancreas
  - (c) duodenum
  - (d) all of the above

**SITUATION:**

A 30 year old man is admitted to your ward from the out patient department with a medical diagnosis of bowel obstruction. On further investigation findings reveal mechanical obstruction

17. In the mechanical obstruction of the small intestines, an intraluminal obstruction from pressure on the intestinal walls occurs due to:
- (a) intussusception
  - (b) stenosis
  - (c) adhesions
  - (d) all of the above
18. In functional obstruction the intestinal musculature
- (a) cannot propel the contents along the bowel
  - (b) can sluggishly propel contents along the bowel
  - (c) can propel bowel contents too fast
  - (d) can propel bowel contents with the help of plenty fluids

19. Most bowel obstructions occur in:
- a) the small intestines
  - (b) the large intestines
  - (c) the beginning of the large bowel
  - (d) the gap between the small and large bowel
20. Most common causes of most bowel obstruction include:
- a) strictures
  - (b) hernias
  - (c) adhesions
  - (d) all of the above
21. In the large bowel
- a) 20% of bowel obstruction occur in sigmoid colon
  - (b) 10% occur in sigmoid colon
  - (c) 15% occur in sigmoid colon
  - (d) 35% occur in the sigmoid colon
22. Vulvulu is one of the mechanical causes of intestinal obstruction. It occurs as follows: The bowel twists:
- a) and turns upwards
  - (b) and turns backwards
  - (c) and turns on itself
  - (d) and turns forward
23. Reflex vomiting in small bowel obstruction may be caused by:
- a) abdominal distension
  - (b) abdominal sounds
  - (c) abdominal tenderness
  - (d) abdominal shrinking
24. Sign and symptoms of bowel obstruction include
- a) passing of blood and mucus
  - (b) crampy pain that is wave-like
  - (c) vomitting
  - (d) all of the above

25. In complete small bowel obstruction, peristalsis assume.

- a) a forward direction
- (b) a transverse
- (c) a lateral
- (d) a reverse direction

## **QUESTION 2**

### **SITUATION:**

Mr Langa came to your ward in a critically ill condition with vomiting. His medical diagnosis is appendicitis

- a) Describe the clinical manifestations of appendicitis (9)
- (b) Describe the pathophysiology of appendicitis (4)
- (c) State nursing goals for managing the patient with appendicitis (6)
- (d) List the complications of appendicitis (2)
- (e) Explain the pre-operative care for or appendectomy (4)

## **QUESTION 3**

### **SITUATION:**

Mr Bhila came to your ward with acute abdominal pains and vomiting. His medical diagnosis is peptic ulcers.

- a) Define the term peptic ulcer (2)
- (b) Indicate the predisposing factors of peptic ulcers (5)
- (c) Compare/differentiate the signs and symptoms of duodenal and gastric ulcers (18)