UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
SUPPLEMENTARY EXAMINATION
JULY 2016

COURSE TITLE: ADULT MEDICAL-SURGICAL NURSING III

COURSE CODE: GNS 317

DURATION: 2 HOURS

TOTAL MARKS: 75

INSTRUCTIONS: Read instructions carefully
Answer ALL questions
There are two (2) sections: A and B
There are eight (8) printed pages including the cover page.

DO NOT OPEN THE QUESTION PAPER UNTIL YOU ARE TOLD TO DO
SO BY THE INVIGILATOR
SECTION A MULTIPLE CHOICE QUESTIONS

For each question, choose the most appropriate response and write the corresponding letter only, in capital letters, e.g. 27 B. Each correct answer carries 1 mark.

1. The nurse assesses the client with chronic renal failure and notices the following: crackles in the lung bases, elevated blood pressure 160/110 mmHg, and weight gain of 2kg in one day. Based on these data, which of the following nursing diagnoses is appropriate?
   A. Excess fluid volume related to the kidney’s inability to maintain fluid balance.
   B. Increased cardiac output related to fluid overload.
   C. Ineffective tissue perfusion related to interrupted arterial blood flow.
   D. Ineffective therapeutic regimen management related to lack of knowledge about therapy.

2. Mr. Neube has a permanent peritoneal dialysis catheter in place. During the dialysis session you observe that the solution draining from the abdomen is blood tinged. Which interpretation of this observation would be correct?
   A. Bleeding is expected with permanent peritoneal dialysis.
   B. Bleeding indicates abdominal vessel damage.
   C. Bleeding can indicate kidney damage.
   D. Bleeding is caused by too rapid infusion of the dialysate.

3. Simo is a known diabetic client on oral anti-diabetic agents who has been diagnosed with renal failure. The nurse is instructing Simo about peritoneal dialysis and tells him that it is important to maintain the dwelling time for the dialysis at the prescribed time because of the risk of:
   A. Infection
   B. Hyperglycaemia
   C. Fluid overload
   D. Disseminated intravascular coagulation

4. Which of the following patients are at risk of developing fulminant hepatic failure following acute hepatitis A infection?
   A. Women during pregnancy
   B. Patients with chronic hepatitis C virus infection
   C. Exposure to hepatitis A during infancy
   D. Patients with chronic renal failure.
5. The most severe infections with Hepatitis A are seen in which of the following groups of patients?  
A. Infants  
B. Children  
C. Adults  
D. Pregnant women

6. In a client admitted for cirrhosis of the liver, which serum levels would the nurse expect to be elevated?  
A. Serum ammonia  
B. Serum amylase  
C. Lipase  
D. Serum conjugated bilirubin

7. Which of the following statements are not correct regarding haemolytic/prehepatic jaundice?  
(i) Caused by anything that causes an increase in rate of haemolysis.  
(ii) Patients are usually asymptomatic  
(iii) Fecal and urine urobilinogen levels are decreased.  
(iv) The bilirubin in the patient’s blood is conjugated.  
A. i, & iii  
B. i, & ii  
C. iii, & iv  
D. iv

8. A 27 year old woman with hypomelanised areas of the face, lips and hands has been diagnosed with vitiligo. Which of the following nursing diagnoses take priority on your client?  
A. Altered body image related to hypomelanised areas of the face  
B. High risk for sun damage related to reduce melanin content of skin on the face.  
C. Knowledge deficit related to therapeutic regimen  
D. High risk for infection related to altered skin integrity

9. A client is admitted into the ward with a diagnosis of acute pancreatitis and has been vomiting for the past 24 hours. The physician prescribes a nasogastric tube for the client. Which of the following is a primary purpose for the insertion of the NG tube?  
A. Empty the stomach of fluids and gas to relieve vomiting  
B. Prevent spasms of the sphincter of Oddi  
C. Prevent air from forming in the small and large intestines.
D. Remove bile from the gall bladder

10. What is not true of hyperglycaemia hyperosmolar non-ketotic syndrome (HHNS) as compared to diabetic ketoacidosis (DKA)?
   A. HHNS occurs mainly in Type II diabetes
   B. Both have high levels of hyperglycaemia
   C. Both typically are treated with insulin
   D. In HHNS blood pH tends to drop.

11. Which of the following statement are correct about the effect of hyperthyroidism in the body?
   (i) Heart rate and stroke volume are increased.
   (ii) Glucose tolerance increases in hyperthyroidism
   (iii) Increased metabolism of carbohydrates, proteins and lipids
   (iv) There is increased appetite along with increased gastric transit time
   A. i.
   B. ii.
   C. iii, & iv
   D. i, iii, & iv

12. A client with a known tumor of the pancreas is admitted complaining of severe headache, accompanied by loss of peripheral vision and increased palmar sweating. He reports that he has noticed these symptoms a long while back. A blood sample is drawn for analysis after a glucose tolerance test. The results were: RBS: 9.9mmol/L, growth hormone: 3µg/l.
   What is the likely diagnosis for this client?
   A. Diabetes mellitus
   B. Hyperthyroidism
   C. Acromegaly
   D. Glucose intolerance

13. The types of Kaposi sarcoma are all the following except:
   A. Classic Kaposi sarcoma
   B. African Kaposi sarcoma
   C. AIDS related Kaposi sarcoma
   D. Idiopathic Kaposi sarcoma.
14. A 17 year old boy is admitted in a comatose state. He has poor skin turgor, scant urine output, a BP of 88/60 and pulse of 132. A diagnosis of diabetic ketoacidosis is made. Which of the following laboratory values is not likely to be seen in this patient?
   A. pH 7.19
   B. pCO₂: 45
   C. HCO₃⁻: 13
   D. Osmolarity: 350mOsm

15. The client is given intravenous normal saline and regular insulin. In addition to hourly blood glucose monitoring, what assessment data are early signs of clinical improvement?
   A. Respiratory rate of 12 to 15 and normal blood pressure in the standing position.
   B. Temperature and pulse in the normal range
   C. Improved level of consciousness and decreasing urine output
   D. Client eats full meal and respiratory rate is normal

16. A client recovering from a closed head injury is exhibiting an unusually large urine output but his serum sodium is elevated. The nurse realizes that the client is developing
   A. Diabetes insipidus
   B. Syndrome of Inappropriate Antidiuretic Hormone
   C. Herniation
   D. Diuretic phase of renal failure

17. During an assessment of a client’s motor status using the Glasgow Coma Scale, the patient assumes a posture of abnormal flexion. The nurse would document this as:
   A. 5
   B. 4
   C. 3
   D. 2

18. A patient with traumatic brain injury is in need of fluid replacement therapy to maintain a systole blood pressure of at least 90mmHg. The nurse realizes that the best fluid replacement for this patient would be:
   A. Normal saline
   B. DSW
   C. 0.9% NS
   D. 0.45% NS
19. After striking his head on a tree while falling from a ladder, a young man aged 18 years is admitted into your unit. He is unconscious and the pupils are non-reactive. Which intervention would be the most dangerous for the client?
A. Giving him a barbiturate
B. Placing him on mechanical ventilation
C. Performing a lumbar puncture
D. Elevating the head of his bed.

20. A male client is admitted with cervical spine injury sustained during a diving accident. When planning this client’s care, the nurse should assign highest priority to which nursing diagnosis?
A. Impaired physical mobility
B. Ineffective breathing pattern
C. Disturbed sensory perception (tactile)
D. Self-care deficit: grooming/dressing

21. A client’s vision is tested with the Snellen’s Chart. The results of the test are documented as 20/60. The nurse interprets this as:
A. The client is legally blind.
B. The client can read at a distance of 60 feet what a client with normal vision can read at 20 feet.
C. The client’s vision is normal.
D. The client can read only at a distance of 20 feet what a client with a normal vision can read at 60 feet.

22. A client with Meniere’s disease is experiencing severe vertigo. Which instruction would the nurse give to the client to assist in controlling the vertigo?
A. Increase fluid intake to 3000ml per day
B. Avoid sudden head movements
C. Lie still and watch the television
D. Increase sodium in the diet.

23. The nurse is instructing a client with diabetes mellitus about peritoneal dialysis. The nurse tells the client that it is important to maintain the dwell time for the dialysis at the prescribed time because of the risk of:
A. Infection
B. Fluid overload
C. Hyperglycaemia
D. Disequilibrium syndrome
24. A nurse is assigned to care for a client with nephritic syndrome. The nurse assesses which important parameter on a daily basis?
   A. Weight
   B. Albumin level
   C. Blood Urea Nitrogen (BUN) level
   D. Activity tolerance

25. A client with chronic renal failure who is scheduled for dialysis this morning is due to receive a daily dose of Enalapril. The nurse should plan to administer this medication:
   A. During dialysis
   B. Just before dialysis
   C. A day after dialysis
   D. On return from dialysis

[Sub-total Marks 25]
SECTION B SHORT ESSAY QUESTIONS

Question 1
A 60 year old man is admitted into the ward with a diagnosis of liver cirrhosis with ascites. He reports, weakness, abdominal pain and passing clay coloured stools. On examination: T: 38.5°C, BP 90/60mmHg, he looks emaciated and skin: pale, and discoloured, white nails, eyes: sclera yellowish, abdomen tender and distended with a fluid thrill, liver palpable with nodular edge, liver span at midclavicular line: 10cm extremitie: 1+ pitting oedema of the ankles.

Develop a nursing care plan (limit to 4 nursing diagnoses) for the client based on the above data. Give a rationale for nursing interventions. [20]

Question 2
Cholelithiasis is increasingly becoming a health care concern. Describe any five (5) risk factors for development of cholelithiasis. [10]

Question 3
Gogo Zulu has been diagnosed with Type II Diabetes Mellitus and oral diabetics and insulin injection has been prescribed for her. Outline the health education you are going to give Gogo Zulu and her family. [10]

Question 4
Describe any five (5) standard precautions that have to be observed in the operating theatre [10]