UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
SEMESTER 1
FINAL EXAMINATION
DECEMBER 2015

COURSE TITLE : HEALTH ASSESSMENT AND DIAGNOSIS
COURSE CODE : NUR 426
TIME ALLOWED : 2 HOURS
MARKS ALLOCATED : 75

INSTRUCTIONS:
1. READ INSTRUCTIONS AND QUESTIONS CAREFULLY AND WITH UNDERSTANDING
2. ANSWER ALL QUESTIONS
3. WRITE NEATLY AND CLEARLY
4. DO NOT OPEN THIS QUESTION PAPER UNTIL YOU ARE TOLD TO DO SO BY THE INVIGILATOR
The following are multiple choice questions. Select the most appropriate response. In your answer sheet write for example: 30 = A

1. A patient is reassessed his/her functional health pattern carried cut several months after initial assessment to compare the clients' current status to the baseline data previously obtained. This assessment is referred to:
   A. Ongoing assessment
   B. Time lapsed assessment
   C. Emergency assessment
   D. Problem focused assessment

2. The following are components of data collection EXCEPT:
   A. Validation
   B. Documentation
   C. Critical thinking
   D. Objective data

3. The following are deemed to be reasons for the introductory phase of interview during collection of subjective data EXCEPT;
   A. It sets the tone and directs the interview
   B. Helps determine biographic data
   C. It establishes a mutual understanding between the nurse and client on the purpose of the exchange
   D. It keeps the client or patient at ease

4. When palpating tactile fremitus the sound best heard on intercostal space one & two is:
   A. Vesicular sounds
   B. Broncho – vesicular sounds
   C. Vibrations
   D. Hollow sound

5. Blunt percussion is used for:
   A. Hollow organs
   B. The kidney
   C. Lungs
D. None of the above

6. What does the nurse use when determining tactile fremitus?
A. Palm
B. Ulnar
C. Fingertips
D. Dorsum of the hand

7. Light palpation is used to feel all, EXCEPT;
A. Pulses
B. Mobility
C. Temperature
D. Texture

8. Where is S1 best heard?
A. Aortic area
B. 4th & 5th intercostal space
C. Pulmonary area
D. Right sternum area

9. Testing of range of motion includes all EXCEPT;
a. Flexion
b. Abduction
c. Adduction
d. Extension

10. What is the optic nerve responsible for?
A. Eyesight
B. Smell
C. Pronation
D. Supination
11. When inspecting the penis the nurse notes that the urethral meatus is on the ventral side of the penis. What would the nurse document as a finding?
   A. Phimosis
   B. Lordosis
   C. Paraphimosis
   D. Hypospadias

12. All EXCEPT one of the following techniques can be used for examination of the external female genitalia
   A. Inspection
   B. Bimanual palpation
   C. Light palpation
   D. Auscultation

13. The nurse is percussing the seventh intercostal space at the midsacral line over the liver. Which sound should the nurse expect to hear?
   A) Dullness
   B) Tympany
   C) Resonance
   D) Hyperresonance

Mix and match the following client positions with the most appropriate body parts
For example: 13 = D

<table>
<thead>
<tr>
<th>Ref.</th>
<th>Client position</th>
<th>Condition(s)</th>
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<tbody>
<tr>
<td>14.</td>
<td>Dorsal recumbent</td>
<td>A. Appropriate for assessing - head, neck, lungs, chest, back, breasts, axillae, abdomen, heart, lungs and extremities (vital signs)</td>
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<tr>
<td>15.</td>
<td>Sitting position</td>
<td>B. Assess head, neck, chest, breasts, axillae, abdomen, heart, lungs and extremities</td>
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<tr>
<td>16.</td>
<td>Sims position</td>
<td>C. Assess head, neck, chest, axillae, lungs, heart, extremities, breasts &amp; peripheral pulses</td>
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<tr>
<td>17.</td>
<td>Supine position</td>
<td>D. Assessing rectum &amp; vaginal area</td>
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<tr>
<td>18.</td>
<td>Knee chest position</td>
<td>E. Assess posture, balance, gait, male genitalia,</td>
</tr>
<tr>
<td>19.</td>
<td>Lithotomy position</td>
<td>F. Assess hip joint Not comfortable for cardiac &amp; respiratory problems</td>
</tr>
<tr>
<td>20.</td>
<td>Standing position</td>
<td>G. Assess rectum, elderly may be uncomfortable</td>
</tr>
<tr>
<td>21.</td>
<td>Prone position</td>
<td>H. Female genitalia, rectum, reproductive tract</td>
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</tbody>
</table>

22. When examining the Bartholin’s glands you ask the patient to bear down —— T. F
23. Trendelenburg test is for determining Deep Vein Thrombosis (DVT) —— T. F
24. The bell is used to determine tympanic sounds —— T. F
25. The huerger’s test is used for assessing arterial sufficiency —— T. F

TOTAL = 25 MARKS
QUESTION 2

Scenario
Zaphina is a 20 year old female presenting with abdominal problem in your department. Zaphina "I have had abdominal pain for 3 days." You "Did you take any medication?" Zaphina "I have been taking treatment from the doctor's prescription for the past 2 days but the diarrhoea has not stopped." You "How is your appetite? Zaphina "My appetite is not good either". On physical assessment blood pressure was 120/65 mmHg, Pulse 72 beats per minute and temperature 36.8°C. You plan to collect a stool specimen to the laboratory for investigation. Note that question 2.1 relate to the above scenario.

2.1 Cluster the above according to strengths and abnormal data

(6)

2.2 Mention six (6) questions that you may ask a junior nurse to determine if he/she is a critical thinker

(6)

SCENARIO: A 35 year old woman is admitted in a gynaecological ward complaining of lower abdominal pain. You decide to conduct an examination of the genitalia. Question 2.3 relate to the above scenario

2.3. Explain how you would conduct a bimanual examination of the uterus sequentially

(5)

2. 4. How would you palpate the Liver for an obese patient?

(4)

2. 5. State what you would inspect the abdomen for under the following headings

(4)

- Observe for evidence of pain -
- Movement -
- Note the abdominal contour -
3. 1. Differentiate between light and deep palpation and what you would be palpating the abdomen for under light and deep palpation respectively.

(2)

3.2. i) Write the sequence you would adopt for the four techniques when examining the abdomen

(1)

   ii) What is a heart murmur?

(1)

SCENARIO: Thalala has been diagnosed with varicose veins.

3.3 Explain how you would perform a manual compression test for the varicose veins;

(4)

SCENARIO:

A patient comes to your facility suspected to having altered speech which is indicative of a neurological problem.

3.4 Determine how you would assess the following: intellect, orientation, attention span, recent and remote memory

(5)

Scenario:

A 20 year old female comes to your facility and you suspect impairment of cranial Nerve I or olfactory

3.5 Determine how you would assess impairment of the olfactory nerve

(4)

3.5 Discuss the procedure you would take in auscultating the for S1 and S2.

(4)
3.7 Explain how you would assess plantar response (Babinski) of a 24 year old woman and what should be a normal response

(3)

3.8 What is the normal Babinski response for babies?

(1)

TOTAL = 25 MARKS

GRAND TOTAL = 75 MARKS