SUPPLEMENTARY EXAMINATION PAPER
JULY, 2017

TITLE OF PAPER : ADULT MEDICAL-SURGICAL NURSING III
COURSE CODE : GNS 317
DURATION : 2 HOURS
MARKS : 75

INSTRUCTIONS : READ THE QUESTIONS AND INSTRUCTIONS CAREFULLY
: THERE ARE TWO SECTIONS: A AND B
: ANSWER ALL QUESTIONS
: WRITE NEATLY & CLEARLY
: NO PAPER SHOULD BE BROUGHT INTO OR OUT OF THE EXAMINATION ROOM.
: BEGIN EACH QUESTION ON A SEPARATE SHEET OF PAPER.

DO NOT OPEN THIS QUESTION PAPER UNTIL PERMISSION IS GRANTED 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. Which of the following statements is correct about pancreatitis?
   i. Auto digestion of the pancreas
   ii. It can be life threatening related to fluid shift and hypovolemia
   iii. Pancreatic enzymes are not activated while in the pancreas
   iv. It can be caused by gall stones and alcohol use
   A. ii, & iv
   B. i, & iii
   C. ii, iii, & iv
   D. i, ii, & iv

2. Diabetic ketoacidosis (DKA) is a concern in individuals living with diabetes. Which of the following is a cause for DKA?
   A. Excessive exercise and overhydration
   B. Overdosing on insulin
   C. Occurs in Type 2 diabetes
   D. Infection and stress

3. Chronic hyperglycaemia can cause many problems in the body. Which of the following statements is incorrect about the effects of hyperglycaemia?
   A. Causes kidney damage by allowing albumin to leak through due to thickening of the basement membrane
   B. Causes blood vessel damage by inhibiting nitric oxide
   C. Causes hepatic damage by allowing albumin to leak out due to a thin basement membrane
   D. Causes eye damage through small bleeds behind the eye.

4. Which of the following best describes the action of the drug methimazole in the management of thyrotoxic crisis?
   A. Prohibits conversion of T3 to T4
   B. Prohibits conversion of T4 to T3
   C. Facilitates formation of thyroid hormone
   D. Reverses shock associated with thyrotoxic crisis

5. Only 20% of people with Hepatitis C infection develop symptoms however many develop chronic infection. When chronic infection progresses, which of the following is a serious sequela (subsequent problem)?
   A. Epstein-Barr virus
   B. Liver cirrhosis
C. Cholelithiasis
D. Heart Failure

6. Severe alcoholic hepatitis may present with which of the following signs?
   A. Rash
   B. Arthralgia
   C. Fever
   D. Encephalopathy

7. Drug induced hepatitis may present with which of the following signs?
   A. Ascites
   B. Coagulopathy
   C. Rash
   D. Encephalopathy

8. An elderly patient enters the emergency room complaining of polydypsia and polyuria. She is agitated and stumbling. You smell a fruity odor from her breath. Which of the following will you suspect?
   A. Diabetic ketosis
   B. Hypoglycemia
   C. Hyperosmolar Hyperglycemic Nonketotic Syndrome
   D. Alcohol abuse

9. For a client in hepatic comat, which of the following outcomes would be the most appropriate?
   A. The client exhibits no ecchymotic areas
   B. The client will be oriented to person, place and time
   C. Fluid and electrolyte imbalance
   D. Normal vital signs

10. When assessing for liver dysfunction, which of the following findings does not fit with liver dysfunction?
    A. Jaundice, White stools, Itchy skin.
    B. Blood clots, Weight loss, and Rash.
    C. Weakness, Edema, Electrolyte Imbalance
    D. Blood in the stool or emesis, LOC changes, easy bruising.

11. Which of the following best describes primary hypothyroidism?
    A. Dysfunction of the thyroid gland
    B. Thyroid dysfunction secondary to failure of the pituitary gland, hypothalamic or both.
    C. A disorder of the hypothalamus resulting in decreased secretion of TSH due to decreased stimulation of TRH
    D. Thyroid dysfunction solely related to failure of the pituitary gland

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12. The nurse is developing a teaching plan for the client with glaucoma. Which of the following instructions would the nurse include in the plan of care?
A. Decrease fluid intake to control the intraocular pressure.
B. Avoid overuse of the eyes
C. Decrease the amount of salt in the diet
D. Beta-adrenergic eye drugs would need to be administered life long

13. Which of the following diagnostic tests would be monitored to evaluate glomerular filtration rate and renal function?
A. Urinalysis and BUN
B. Kidney biopsy
C. Serum creatinine and BUN
D. Urine macroscopy

14. Which of the following complications should the nurse carefully monitor in a client with acute pancreatitis?
A. Myocardial infarction
B. Liver cirrhosis
C. Peptic ulcer
D. Pneumonia

15. Tonometry is performed on the client with a suspected diagnosis of glaucoma. The nurse analyses the test results as documented in the client’s chart and understands that the normal intraocular pressure is
A. 2 – 7 mmHg
B. 10-21 mm Hg
C. 22 – 30 mmHg
D. 31 – 35 mm Hg

16. The nurse assesses the client with chronic renal failure and notes the following: crackles in the lung bases, elevated blood pressure, and weight gain of 3 kg in one day. Based on this data, which of the following nursing diagnoses are appropriate?
A. Ineffective tissue perfusion related to interrupted arterial flow
B. Excess fluid volume related to kidney’s inability to maintain fluid balance
C. Increase in cardiac output related to fluid overload
D. Ineffective therapeutic regimen management related to lack of knowledge about therapy.
17. A 58 year old woman presents to the eye clinic with headache that is most painful on the left eye. Her vision is blurred, and the left pupil is slightly dilated and poorly reactive to light. The left conjunctiva is markedly reddened and the eye ball is firm. What is the most likely diagnosis for this client?
A. Unilateral conjunctivitis
B. Open angle glaucoma
C. Closed angle glaucoma
D. Uveitis

18. A client with glaucoma asks the nurse if complete vision will return. The most appropriate response will be:
A. “Your vision will return as soon as the medication begins to work”.
B. “Your vision will never return to normal”.
C. “Although some vision has been lost and cannot be restored, further loss may be prevented by adhering to the treatment plan”.
D. “Your vision loss is temporary and will return in about 3-4 weeks.

19. Your patient tells you she has been having difficulty emptying her bladder completely when she voids. She also has some dysuria and mild hematuria. Which of the following interventions would be most appropriate to do first?
A. Collect a 24 hour urine sample and send it to the lab for testing.
B. Collect a urine sample and complete a urinalysis test.
C. Prepare the patient for catheterization using a sterile technique.
D. Give the patient antibiotics.

20. Your patient has a UTI and the doctor has ordered ceftriaxone 1gm IV. The most appropriate way to administer this medication is to:
A. Place it in a mini-bag and run the IV over 1 hour.
B. Mix the medication in a syringe and push it over 5 minutes.
C. Place it in a 1L bag and run the IV over 3 hours.
D. Calculate the time until the next dose and run the medication continuously until the next dose is due.

[Total: 20 Marks]
SECTION B SHORT ESSAY QUESTIONS

Question 1
A 39 year old man is admitted into your unit with the diagnosis of liver enlargement with abdominal distension and impending encephalopathy. Medical history reveal that the client is on antiretroviral therapy (ART) and with a regimen of TDF+3TC+EFV since 24 months ago. Ultrasound results indicate the presence cirrhosis and a large tumor in the liver. A biopsy was performed.

(a) Explain the indication of the biopsy in this client. [2]
(b) State the signs of impending coma you expect to see in this patient? [4]
(c) Outline the dietary recommendations that are crucial for the patient at this stage? [4]
(d) Discuss the nursing care measures you will institute to prevent the risk of bleeding in this client. [10]

[Sub-total=20 marks]

Question 2
Using your knowledge of physiology and/or pathophysiology, explain the following:

a) High levels of TSH in a client with hypothyroidism [2]
b) Gastro-intestinal varices in a client with liver cirrhosis [5]
c) Pancreatitis in a client with cholelithiasis [3]
d) Dehydration in a client with diabetic ketoacidosis [4]
e) Calcium and phosphorus imbalances in a client with chronic kidney disease [3]
f) Development of decubitus ulcers in a patient with spinal cord injury between C1 and C4 [3]

[Sub-total=20 marks]

Question 3
You are preparing to discharge Mr. Zondi from Ward 12 where he has been recovering from Hepatitis B. He had severe nausea and vomiting which required his admission to hospital for IV fluids. He also had liver enlargement which caused RUQ pain which has now subsided. He is weak and has experienced weight loss and muscle atrophy as no one encouraged him to get out of bed during his hospital stay. He was jaundiced however this is subsiding as is the itching he experienced.

a. Identify 3 nursing diagnoses relevant to Mr. Zondi. [3]
b. Outline 3 nursing care measures which should be provided for Mr. Zondi? [3]
c. You provide patient education to Mr. Zondi prior to his discharge. Discuss 3 self-care measures in which he should engage? [6]
d. Mr. Zondi is worried about going home and getting sicker. State 3 warning signs/symptoms which indicate he should seek care urgently? [3]
[Sub-total = 15 marks]