



**AMREF INTERNATIONAL UNIVERSITY**  
**SCHOOL OF MEDICAL SCIENCES**  
**DEPARTMENT OF NURSING OF NURSING & MIDWIFERY SCIENCES**  
**HIGHER DIPLOMA IN CRITICAL CARE NURSING**  
**END JAN-APRIL SEMESTER 2023 EXAMINATIONS**

**COURSE UNIT: ACN 129: COMPLIMENTARY CONCEPTS IN CRITICAL CARE NURSING**

**DATE: 5<sup>TH</sup> APRIL 2023**

**DURATION: 2 HOURS**

**START: 11:00AM**

**FINISH: 1:00PM**

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**Instructions**

1. This exam is out of 70 marks
2. This paper consists of Section A: Multiple choice questions (70 marks)
3. Answer **ALL** questions
4. Answer all questions in the ANSWER BOOKLET provided
5. **Do Not write anything on the question paper**
6. Use the back of your booklet for rough work if need be

**SECTION A: MULTIPLE CHOICE QUESTIONS (70 MARKS)**

1. \_\_\_\_\_ is TRUE regarding the discussion of palliative treatment options and goals;
  - A. Discussion of treatment options and goals should not include the patient's family
  - B. Most physicians are not engaged in discussion about treatment options near the end of life
  - C. Unrealistic expectations are major contributor to increased use of aggressive treatment at the end of life
  - D. Patients will not choose life-extending therapy if the consequences of aggressive of aggressive treatment are disclosed
2. The grief process can best be described as;
  - A. An abnormal condition requiring extensive counseling.
  - B. A time-limiting process occurring through specific stages.
  - C. A normal process of reacting to loss expressed through mental, physical and emotions
  - D. A universal experience involving shock, confusion, and reinvesting in life.
3. \_\_\_\_\_ is TRUE regarding the interdisciplinary healthcare team involved in palliative care;
  - A. Team diversity in ideas is inconsequential
  - B. Palliative care teams can be emotionally drained and require support
  - C. The patients primary care physician is the only vital member of the team
  - D. Auditing and monitoring the team process rarely helps
4. The recommended protocol for preventing constipation in palliative patients receiving opioid is;
  - A. Enemas
  - B. Increased fluids and exercises
  - C. Using bowel stimulants
  - D. Adding bulk fiber to the diet

5. The nurse is counseling the family of a client who has terminal cancer about palliative care. The nurse explains the goals of palliative care as follows;

1. Delays death
2. Offers a support system
3. Provides relief from pain
4. Enhances the quality of life
5. Focuses only on the client, not the family
6. Manages symptoms of disease and therapies

**Select all that apply;**

- A. 1,2,4,6
- B. 2,3,4,6
- C. 1,3,4,5
- D. 2,3,4,5

6. \_\_\_\_\_ is true about end-of-life care;

- A. It is an aspect of palliative care
- B. It is influenced by the supportive family
- C. It is defined by a specific time period
- D. It does not include a focus on the family

7. A 65-year-old patient with end stage gastric cancer repeatedly verbalizes her desire to stop her tube feedings. Her physician's refusal to comply with her decision is;

- A. A violation of the patient's autonomy
- B. An example of beneficence
- C. Mandated by the law
- D. Surrogate decision-making

8. \_\_\_\_\_ statement describes the spiritual needs of the patients at the end of life;

- A. Spiritual care is well-defined for all patients
- B. Spirituality is considered one and the same thing as religion
- C. Spirituality has a strong protective effect against end-of-life distress
- D. Spirituality is completely removed from culture

9. \_\_\_\_\_ is TRUE regarding grief, mourning, and bereavement;
- A. Grief counselling should begin when the patient is alive
  - B. Mourning is composed of sequential stages that occur in order
  - C. The physician attendance at the patient's funeral would be inappropriate
  - D. The healthcare team should extend bereavement services for no more than one month after the death of the patient
10. \_\_\_\_\_ is true about end -of-life care;
- A. Death is avoided at all cost and is not part of life
  - B. During dying phase, patient symptom control modalities are discontinued
  - C. Palliative care should be offered in culturally sensitive manner
  - D. Death is a violation of human rights
11. \_\_\_\_\_ is a demonstration of catecholamine release in a painful biologic response:
- A. Pupil constriction
  - B. Decreased blood pressure
  - C. Decreased respiratory rate
  - D. Pupil dilation
12. When managing dyspnea in palliative terminal patients;
- A. Non-pharmacological interventions are generally ineffective
  - B. The first step is treatment of symptoms rather than underlying cause
  - C. Evidence supports the use of opioids for patients with breathlessness
  - D. Providing supplemental oxygen should be the primary approach, even in patients without hypoxemia
13. \_\_\_\_\_ statement is true descending pain modulation:
- A. Exogenous opioid is produced
  - B. Endogenous opioids are released
  - C. Serotonin is released
  - D. Relaxation imagery and relaxation modulates

14. \_\_\_\_\_ is the most reliable indicator of pain;
- A. Patients self-report
  - B. Results of physical examination
  - C. Results of functional assessment
  - D. Results of multidimensional assessment
15. According to World Health Organization (WHO) ladder, pain should be managed;
- A. With only opioids for step 1 and step 2
  - B. In a stepwise progression from step 1 and step 3
  - C. Remove adjuvant in step 2 on pain management
  - D. With non-opioids only given around the clock in step 3
16. You are helping a male African patient to move from the chair to the bed. You notice he is grimacing and you ask him whether he is in pain but denies. Your next intervention will be;
- A. Confronting the patient's denial of pain
  - B. Clarify the patient's report by reviewing the patient's nonverbal behavior
  - C. Obtaining an order to pain medication
  - D. Supporting the patient's tolerant behavior
17. If the husband of a patient is concerned that his wife will become addicted because she requires an increased dosage of morphine, the nurse should explain that
- A. The increased morphine indicates death is approaching.
  - B. The doctor should be contacted to discuss a medication change.
  - C. Addiction is unavoidable, but not harmful for the terminal patient.
  - D. Increased dosage is related to tolerance or disease progression not addiction.
18. The most common contributor to sleep disturbances in patient at the end of life is;
- A. Dyspnea
  - B. Uncontrolled pain
  - C. Hot flushes
  - D. Nocturnal hypoxia

19. Which non-pharmacologic intervention is difficult to use with older adults who are cognitively impaired?
- A. Aromatherapy
  - B. Distraction
  - C. Guided imagery
  - D. Heat application
20. The meaning of pain is experienced in the component of:
- A. Affective
  - B. Behavioural
  - C. Cognitive
  - D. Sensory
21. Polystyrene sulfonate (Kayexalate) is used in renal failure to:
- A. Correct acidosis
  - B. Reduce serum phosphate levels
  - C. Exchange potassium for sodium
  - D. Prevent constipation from sorbitol use
22. What change indicates recovery in a patient with nephritic syndrome?
- A. Disappearance of protein from the urine
  - B. Decrease in blood pressure to normal
  - C. Increase in serum lipid levels
  - D. Gain in body weight
23. What is the most important nursing diagnosis for a patient in end-stage renal disease?
- A. Risk for injury
  - B. Fluid volume excess
  - C. Altered nutrition: less than body requirements
  - D. Activity intolerance

24. You have a patient that is receiving peritoneal dialysis. What should you do when you notice the return fluid is slowly draining?
- A. Ask the patient to cough.
  - B. Raise the drainage bag above the level of the abdomen.
  - C. Place the patient in a reverse Trendelenburg position.
  - D. Check for kinks in the outflow tubing.
25. A 30-year, female patient is undergoing hemodialysis with an internal arteriovenous fistula in place. What do you do to prevent complications associated with this device?
- A. Insert I.V. lines above the fistula.
  - B. Avoid taking blood pressures in the arm with the fistula.
  - C. Palpate pulses above the fistula.
  - D. Report a bruit or thrill over the fistula to the doctor.
26. Your patient becomes restless and tells you she has a headache and feels nauseous during hemodialysis. Which complication do you suspect?
- A. Infection
  - B. Disequilibrium syndrome
  - C. Air embolus
  - D. Acute hemolysis
27. A patient who received a kidney transplant returns for a follow-up visit to the outpatient clinic and reports a lump in her breast. Transplant recipients are:
- A. At increased risk for cancer due to immunosuppression caused by cyclosporine (Neoral)
  - B. Consumed with fear after the life-threatening experience of having a transplant
  - C. At increased risk for tumors because of the kidney transplant
  - D. At decreased risk for cancer, so the lump is most likely benign

28. You're developing a care plan with the nursing diagnosis risk for infection for your patient that received a kidney transplant. A goal for this patient is to:
- A. Remain afebrile and have negative cultures
  - B. Resume normal fluid intake within 2 to 3 days
  - C. Resume the patient's normal job within 2 to 3 weeks
  - D. Try to discontinue cyclosporine (Neoral) as quickly as possible
29. You suspect kidney transplant rejection when the patient shows which symptoms?
- A. Pain in the incision, general malaise, and hypotension
  - B. Pain in the incision, general malaise, and depression
  - C. Fever, weight gain, and diminished urine output
  - D. Diminished urine output and hypotension
30. A 25-year-old male patient sustained severe renal injury due to Road traffic accident (RTA). Grade IV of renal injury refers to ...
- A. Non-expanding peri-renal hematoma
  - B. Microscopic hematuria or gross hematuria
  - C. Laceration of 1cm parenchymal depth renal cortex without collecting system rupture
  - D. Parenchymal laceration extending to renal cortex, medulla and collecting system
31. A client with acute kidney injury has a potassium level of 6.2 mEq/L .The priority action of the nurse is\_\_\_\_\_
- A. Check sodium level
  - B. Place the client in semi-fowlers position
  - C. Increase fluid intake of the patient
  - D. Place the client on cardiac monitor



32. A patient being hemodialyzed becomes short of breath and complains of chest pain and looks pale. The nurse suspects air embolism and the priority action should be
- A. Monitor vital signs every 15 minutes for next one hour
  - B. Continue dialysis slowly as you continue to check the lines for air
  - C. Discontinue the dialysis and notify the Health care provider
  - D. Bolus the client with 500ml of saline to break up the air embolism
33. The nurse is assessing the patency of client's left arm arterio-venous fistula prior to initiating hemodialysis. Which findings indicate the fistula is patent?
- A. Palpation of radial pulse in the left arm
  - B. Absence of a bruit on auscultation of the fistula
  - C. Palpation of a thrill over the fistula
  - D. Capillary refill less than 2 seconds in the nail beds of the left arm
34. A 50-year-old female patient is admitted with massive GI bleed. The patient is at risk for which type of acute kidney injury?
- A. Post-renal
  - B. Intra-renal
  - C. Pre-renal
  - D. Intrinsic –renal
35. A nurse is teaching a 60-year-old male patient with Type II diabetes mellitus and how to avoid Diabetic nephropathy. Which statement made by the patient indicates the teaching has been successful?
- A. Smoking tobacco products decrease the risk of kidney damage
  - B. I can help control blood pressure by avoiding food stuffs high in salt
  - C. I will maintain my blood glucose level above 180 mg/dL
  - D. I should have yearly dilated eye exam by an Ophthalmologist

36. The Goal of nutritional care in chronic kidney disease patients is to:
- A. Increase fluid intake along with the treatment of renal replacement therapy
  - B. Enhance intake of foods rich in triglycerides
  - C. Minimize uremia while maintaining positive nitrogen balance
  - D. Encourage patients to take food stuffs high in potassium and sodium
37. The purpose of citrate use in Continuous renal replacement therapy (CRRT) is: -
- A. Citrate binds with urea and easily excreted via CRRT
  - B. Citrate acts as a catalyst to speed up the process of osmosis
  - C. Citrate inhibits the coagulation cascade by lowering ionized calcium
  - D. Citrate is more superior to anticoagulants like heparin
38. The patient with End stage renal disease (ESRD) has a low level of erythropoietin (EPO).  
The patient is at risk for
- A. Hyperkalemia
  - B. Anemia
  - C. Blood clots
  - D. Hyponatremia
39. One of the following classifications of drugs causes severe nephrotoxicity to patients with Chronic Kidney disease patients
- A. Oral hypoglycemic agents
  - B. Non-steroid anti-inflammatory drugs
  - C. Anti-hypertensives
  - D. Anti-arrhythmia
40. Which criterion is required before a patient can be considered for continuous peritoneal dialysis?
- A. The patient must be hemodynamically stable
  - B. The vascular access must have healed
  - C. The patient must be in a home setting
  - D. Hemodialysis must have failed

41. Inadequate cellular perfusion can lead to
- A. Impaired cellular metabolism
  - B. Tissue Damage
  - C. Organ dysfunction
  - D. All the above
42. Cardiogenic shock can result from
- A. Sepsis
  - B. Brain Injury
  - C. Pulmonary embolism
  - D. None of the above
43. Hypovolemic shock
- A. Treatment almost always requires surgery
  - B. Can only result from bleeding
  - C. Fluids may not be sufficient to treat it
  - D. Is caused by loss of volume
44. \_\_\_\_\_ shocks leads to peripheral vasodilation
- A. Cardiogenic shock
  - B. Distributive shock
  - C. Hypovolemic shock
  - D. Obstructive shock
45. The best fluid to use in burns resuscitation is
- A. Normal Saline
  - B. Dextrose in Saline
  - C. Ringers Lactate
  - D. Half strength darrows
46. In pediatric management of burns
- A. Dextrose should be added in the fluid of resuscitation
  - B. Always monitor the BP as a measure of hydration status
  - C. Always fix a central venous catheter
  - D. Intubation should be considered early

47. The leading cause of death post a traumatic incidence is
- A. Head Injury
  - B. Abdominal trauma
  - C. Bleeding
  - D. Airway obstruction
48. Which of the following is a component of the secondary survey
- A. Radiological studies
  - B. Targeted History taking
  - C. Bleeding control
  - D. Intubation
49. Mr Brown presents to the emergency department after a motor vehicle crash unresponsive. Upon a sternal rub, he opens his eyes and tries to remove your hand from his chest. He frequently asks for his wife and his brother informs you that his wife died 5 years ago. What is his GCS.
- A. 3
  - B. 7
  - C. 12
  - D. 11
50. \_\_\_\_\_ is a priority in management of Tension Pneumothorax
- A. Xray
  - B. Needle decompression
  - C. Ct scan of the chest
  - D. Chest tube insertion
51. \_\_\_\_\_ are triage categories
- A. Emergent
  - B. Urgent
  - C. Non-urgent
  - D. All the above
52. An antidote to carbon monoxide poisoning includes:
- A. Oxygen
  - B. Methylene Blue
  - C. Ethanol
  - D. Naloxone

53. \_\_\_\_\_ a priority in managing burns
- A. Airway management
  - B. Stop the burning process
  - C. Fluid administration
  - D. Cover the burns
54. Glucagon is an antidote to the following
- A. Morphine overdose
  - B. Beta blockers overdose
  - C. Nitrite poisoning
  - D. Anti-cholinergics
55. The ECG characteristics of hyperkalemia include
- A. Short PR Interval
  - B. Flattened T wave
  - C. ST Changes
  - D. Short QRS complex
56. \_\_\_\_\_ hormones are steroid derivatives
- A. Oestrogen
  - B. Progesterone
  - C. Testosterone
  - D. All the above
57. \_\_\_\_\_ is true about the Hypothalamus
- A. It is an exocrine gland
  - B. It contains ducts
  - C. It directly stimulates secretion of the Pituitary Gland hormones
  - D. It secretes aldosterone
58. \_\_\_\_\_ hormones are secreted by the posterior pituitary gland
- A. Cortisol
  - B. Vasopressin
  - C. Thyroid stimulating hormone
  - D. Melatonin

59. \_\_\_\_\_ hormones are secreted by the anterior pituitary gland.
- A. Vasopressin
  - B. Anti Diuretic Hormone
  - C. Thyroid Stimulating Hormone
  - D. Oxytocin
60. \_\_\_\_\_ is a function of the growth hormone.
- A. It increases glucose levels
  - B. It promotes breakdown of proteins
  - C. It promotes storage of fats
  - D. It increases water reabsorption.
61. \_\_\_\_\_ is true about prolactin
- A. Its release is stimulated by prolactin inhibiting hormone
  - B. Its secreted during pregnancy
  - C. It aids in maturation of the ovum
  - D. It has a role to play in menarche
62. \_\_\_\_\_ hormone plays a role in promoting maternal nurturing behaviour
- A. Growth hormone
  - B. Oxytocin
  - C. Prolactin
  - D. Progesterone
63. The Pineal gland:
- A. Hypertrophies after puberty
  - B. Promotes growth and development of the sex organs after puberty
  - C. Coordinates the circadian and diurnal rhythms
  - D. All the above
64. Thymosin is produced by
- A. Thymus gland
  - B. Thyroid gland
  - C. Hypothalamus
  - D. Parathyroid Gland

65. \_\_\_\_\_ is crucial in formation of the thyroid hormones

- A. Tyrosine
- B. Iodine
- C. Monoiodotyrosine
- D. All the above

66. Calcitonin

- A. Is produced by the follicular cells
- B. Promotes reabsorption of calcium in the renal tubules
- C. Its release is stimulated by a reduction of calcium in blood
- D. None of the above

67. The parathyroid glands

- A. They are 4 in number
- B. They increase excretion of calcium
- C. They promote reabsorption of phosphates
- D. All the above

68. \_\_\_\_\_ cells are responsible for bone formation

- A. Osteoclasts
- B. Parafollicular cells
- C. Follicular cells
- D. Osteoblasts

69. Most of the secreted T3 and T4 hormones are bound to:

- A. Albumin
- B. Globulin
- C. T lymphocytes
- D. Haemoglobin

70. \_\_\_\_\_ hormones are secreted by the adrenal medulla

- A. Glucocorticoids
- B. Epinephrine
- C. Mineralocorticoids
- D. Aldosterone