



**AMREF INTERNATIONAL UNIVERSITY
SCHOOL OF MEDICAL SCIENCES
DEPARTMENT OF NURSING & MIDWIFERY SCIENCES
END OF SEMESTER MAY-AUGUST 2024 EXAMINATIONS**

COURSE CODE AND TITLE: BSN 417- MEDICAL SURGICAL NURSING

DATE: Tuesday 6th August 2024

Duration: 2 HOURS

Start: 9:00 AM

Finish: 11:00 AM

INSTRUCTIONS

1. This exam is out of 70 marks
2. This Examination comprises THREE Sections. Section I: Multiple Choice Questions (20 marks)
Section II: Short Answer Questions (30 marks) and Section III: Long Answer Questions (20 marks)
3. Answer ALL Questions.
4. Do Not write anything on the question paper -use the back of your booklet for rough work if need be.

SECTION I: MULTIPLE CHOICE QUESTIONS**(20 MARKS)**

1. A 65-year-old patient arrived at the triage area with complaints of diaphoresis, dizziness and left sided chest pain. This patient should be prioritized into which category?
 - A. Emergent
 - B. Urgent
 - C. Non urgent
 - D. High urgent
2. Activated charcoal is given in an emergency because;-
 - A. Interferes with gastric lavage
 - B. Increase absorption of medications
 - C. Decrease absorption of medications
 - D. Cause severe gastric ulcers
3. Placement of a nasogastric tube is contraindicated in;-:
 - A. Inhalation injury.
 - B. Intra-abdominal bleed.
 - C. Head or facial trauma
 - D. Cervical spine fracture.
4. The nursing intervention performed during the exploration step of the secondary survey is:
 - A. Obtain full set of vital signs.
 - B. Remove the patient's clothing and assess.
 - C. Elicit history and head to toe assessment
 - D. Obtain a full Glasgow coma scale assessment
5. The pre-operative phase encompasses;-
 - A. Entry to the operating suite until admission to the post anaesthetic care unit.
 - B. Entry to the operating suite until discharge from hospital.
 - C. Decision to have surgery until admission to the post anaesthetic care unit.
 - D. The decision to have surgery until entry to the operating suite.
6. The following patient's pre-surgery laboratory results would indicate a need to contact the surgeon;-
 - A. Platelet count of 250,000/cu. nm.
 - B. Total cholesterol of 325 mg/dl.
 - C. Blood urea nitrogen (BUN) 17mg/dl.
 - D. Haemoglobin 9.5 mg/dl.
7. As a member of the surgical team, the perioperative nurse might occupy any of the following:
 - A. First assistance to the surgeon
 - B. Circulating nurse.
 - C. scrub assistant.
 - D. Anaesthetist.

8. When the scrub nurse and the circulating nurse find a discrepancy in the swab count, the circulating nurse should;-
- A. Contact the surgical nurse in charge.
 - B. Complete an occurrence form.
 - C. Re-count all swabs.
 - D. Notify the patient's surgeon.
9. The flow of traffic within the surgical suite is designed to meet the ultimate objective of:
- A. Optimal care of entry and exit by surgical personnel.
 - B. Allowing the patient to be moved to be moved to the inner core of the surgical suite without passing through the outer core.
 - C. prevention of cross contamination from one area of the surgical suite to another.
 - D. Separation of patients from all surgical supplies and equipment.
10. While caring for a patient in the post anaesthetic care unit (PACU), you noticed that the patient is tachycardic, tachypnoeic and anxious, the patient could be demonstrating symptoms of:
- A. Hypovolemic shock.
 - B. Atelectasis.
 - C. Uncontrolled pain.
 - D. Hyperventilation.
11. The following post-operative findings should be reported to the physician;-
- A. The patient pushes out the oral airway with his tongue.
 - B. The patient's urine output has been 20mls/hr for the past 2 hours.
 - C. The patient's vital signs are as follows: BP-100/70mmHg, PR-95/min, RR- 14 T-36.8 degrees centigrade
 - D. The patient's wound drainage.
12. A 5-year-old male is admitted with acute glomerulonephritis. On assessment, you note mild edema predominately in the face and tea-colored urine. The patient's blood pressure is 165/110, heart rate 95, oxygen saturation 98% on room air, and temperature 36.9 'C. In your nursing care plan, what nursing interventions will you include in this patient's plan of care?
- A. Initiate and maintain a high sodium diet daily.
 - B. Encourage patient to ambulate every 2 hours while awake.
 - C. Weigh patient every daily on a standing scale.
 - D. Encourage the patient to consume 4 L of fluid per day.
13. The following should be situated in the intensive care unit;-
- A. Fully equipped laboratory.
 - B. Fully functioning radiological department.
 - C. Counseling rooms.
 - D. Equipment assembly room.

14. In preparing a patient in the ICU for endotracheal intubation, The nurse should;-
- A. Place the patient supine with the head extended.
 - B. Tell the patient that the tongue must be extruded while the tongue is being inserted.
 - C. Position the patient supine with the head hanging over the edge of the bed to align the mouth and the trachea.
 - D. Inform the patient that while it will not be possible to talk during the insertion of the tube, speech will be possible after it is correctly placed.
15. A nurse should recognize that fluid shift in a patient with burn injury results from increase in the:
- A. Total volume of circulating whole blood.
 - B. Total volume of intravascular plasma.
 - C. Permeability of capillary walls.
 - D. Permeability of kidney tubules.
16. The most accurate assessment of fluid balance in a patient with renal failure is:
- A. Voiding pattern.
 - B. Daily weight.
 - C. laboratory studies.
 - D. Skin turgor.
17. Urea and creatinine are considered ideal substances for evaluating renal function because:
- A. Both are bound to glucose.
 - B. neither is reabsorbed in the tubules.
 - C. Both are measured using random urine testing.
 - D. Neither is influenced by other disease states.
18. The following statements about the use of personal protective equipment (PPE) in the ICU is correct;-
- A. PPE should be removed before leaving the patient's room.
 - B. PPE can be reused if not visibly soiled.
 - C. Gloves should be worn at all times, even when not in contact with patients.
 - D. Masks are only necessary for airborne precautions.
19. An important aspect of ICU nursing in relation to family members is;-
- A. Limiting family visits to prevent disturbances.
 - B. Providing clear and regular communication about the patient's status.
 - C. Allowing family to make medical decisions without consulting physicians.
 - D. Discouraging family involvement in patient care.
20. The role of glucose in the dialysate solution is;-
- A. To sterilize the solution.
 - B. To help draw excess fluid and waste products from the blood into the dialysate.
 - C. To replace lost electrolytes.
 - D. To provide energy to the patient.

SECTION II: SHORT ANSWER QUESTIONS

(30 MARKS)

1. Explain one role of the peri-operative nurse during each phase of the peri-operative nursing (6 marks)
2. Explain emergency management of a patient who presents to the emergency department with anaphylactic reaction (6 marks)
3. A patient is admitted to the accident and emergency department with severe asthmatic attack.
 - a) State 4 signs of severe asthmatic attack (4 marks)
 - b) State 4 medications the patient is likely to receive while in the emergency department (4 marks)
4. State 4 pre-transplant evaluations required for a patient being prepared for kidney transplant (4 marks)
5. Explain 3 ethical challenges that may arise during the care of patients in the ICU (6 marks)

SECTION III: LONG ANSWER QUESTION –

(20 MARKS)

1. Mr. C who has end stage kidney disease is admitted to the renal unit for haemodialysis
 - a) Define haemodialysis (2 marks)
 - b) State four indications for haemodialysis (4 marks)
 - c) Explain 2 principles on which haemodialysis operate (4 marks)
 - d) List 4 subjective or objective data that may be elicited during assessment of Mr. C (2 marks)
 - e) State 4 possible nursing diagnosis for Mr. C and one nursing intervention for each identified nursing diagnosis (8 marks)