



AMREF INTERNATIONAL UNIVERSITY
DEPARTMENT OF NURSING AND MIDWIFERY SCIENCES
KENYA REGISTERED COMMUNITY HEALTH NURSING
END OF SEMESTER EXAMINATIONS

DNS 114: Professionalism and Fundamentals of Nursing

DATE: FRIDAY 10TH APRIL 2026

TIME: 2 Hours Start: 0900 HOURS Finish: 1100 HOURS

INSTRUCTIONS

1. This exam will be marked **out of 70 Marks**
2. ALL Questions are compulsory.
3. The Examination has Three Sections: Section I- Multiple Choice Questions, Section II: Short Answer Questions, Section II: Long Essay 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 I: MULTIPLE CHOICE QUESTIONS (20 MARKS)

1. Nasogastric tube feeding is indicated in:-
 - a. Adequate gastric emptying , short-term feeding
 - b. Absent bowel sounds, Long term feeding
 - c. Impaired enteric function, short term feeding
 - d. Esophageal dysfunction, long term feeding

2. The appropriate position for Nasogastric tube insertion in a conscious patient is:-
 - a. Sims
 - b. Semi Fowlers
 - c. High Fowlers
 - d. Trendelenburg

3. The NEX index, as used in the measurement of the length of nasogastric tube for insertion stands for:-
 - a. Nose to Epiglottis to Xiphoid process
 - b. Nares to Ear canal to Xiphoid process
 - c. Nose to Earlobe to Xiphoid process
 - d. Nose to Earlobe to Umbilicus

4. The role of the nurse characterized by instituting therapeutic interventions intended to restore health is that of the :-
 - a. Advocate
 - b. Caregiver
 - c. Manager
 - d. Educator

5. The step of the nursing process characterized by analyzing collected data to define the patient's problem is:-
 - a. Assessment
 - b. Evaluation
 - c. Planning
 - d. Diagnosis

6. Nursing diagnosis is best defined as a(n):-
 - a. Clinical judgment about the client responses to actual or potential problems
 - b. Physiological complication that nurses monitor to detect changes in clients' health status
 - c. Identified health problem that requires the assistance of other health care professionals
 - d. Clinical judgement about the client that is managed by a physician

7. In history taking, information on self-initiated interventions to manage the problem that has necessitated care seeking, is outlined under:-
 - a. Biographic data
 - b. Presenting complaint
 - c. History of presenting complaint
 - d. Past Medical Surgical history

8. The following is an example of a universal precaution in infection prevention and control:-
 - a. Use of gloves when assisting the patient with elimination needs
 - b. Use of a particulate respirator when caring for patients with tuberculosis
 - c. Donning a surgical mask when providing care for patients with streptococcal pneumonia
 - d. Proper waste segregation at the point of use

9. The following crystalloid solutions are isotonic:-
 - a. 0.9% Sodium Chloride
 - b. 0.45% Sodium Chloride
 - c. Mannitol
 - d. Dextrose 10% in Water (D10W)

10. Indicate True (T) or False regarding the statements below:- :-
 - a. An independent nursing intervention routinely implemented for patients with limited mobility include active or passive range of motion exercises, 2 hourly change of position
 - b. Nutritional needs for all patients with limited mobility are met through Total parenteral nutrition

11. To minimize pain during administration of intramuscular medications:-
 - a. Distract patient, bunch up or stretch out the muscle
 - b. Push syringe contents within 2 seconds, Ensure needle bevel faces down
 - c. Reassure patient, seek consent to administer the medication
 - d. Use the largest gauge of needle possible, Push contents of syringe slowly

12. The ethical principle in nursing practice, requiring use of screens, curtains and covering up of clients appropriately during procedures is:-
- Beneficence
 - Dignity
 - Autonomy
 - Fidelity
13. When using peripheral veins for cannulation:-
- Use the most proximal ,accessible vein in the upper extremity first.
 - Use the largest, most visible vein in the upper extremity first
 - Use the easiest most accessible vein wherever on the body first
 - The lower limb is contraindicated
14. Discussing patient diagnosis and care plan with a loud tone and within earshot of other patients in the unit constitutes a tort known as :-
- Defamation
 - Invasion of privacy
 - Slander
 - Breach of confidentiality.
15. The nutritional protocol for preparing a patient for a surgical procedure constitutes:-
- Give a patient a heavy meal just before surgery
 - Nil per Oral 0-10 hours before surgery, Last heavy meal 12 hours prior to surgery
 - Clear liquid diet upto 2 hours prior to surgery, NPO 0-2 Hours prior to surgery
 - Full liquid diet upto 2 hours prior to surgery, Clear liquid diet 0-2 hours prior to surgery
16. A nurse who sedates an agitated patient without following due process is liable for the tort:-
- Assault
 - Battery
 - False imprisonment
 - Invasion of privacy

17. The appliance used to prevent external rotation of the hips and maintain proper alignment in immobile patients is:-
- Anderson frame
 - Foot board
 - Trapeze bar
 - Trochanter roll
18. The appropriate position to place a patient due for catheterisation is:-
- Dorsal recumbent position
 - Supine position
 - Sims position
 - Genu pectoral position
19. According to the colour coding system for sorting hospital generated waste, used wound bandages are discarded in the:-
- Yellow bin
 - Red bin
 - Black bin
 - White bin
20. The following are historical events and phenomenon that positively contributed to professionalisation of Nursing: -
- Protestant movement, Florence nightingale
 - Religion, World War 1 & 2
 - Patriarchy, Protestant movement
 - Florence nightingale, Patriarchy

SECTION II: SHORT ANSWER QUESTIONS (30 MARKS)

- Outline four (4) functions of the Nursing Council of Kenya (4 Marks)
- Outline four (4) principles of surgical asepsis (4 Marks)
- State four (4) characteristics of nursing that makes it a profession (4 Marks)
- Outline five (5) priority post-operative nursing interventions within the first 6 hours for a client returned to the ward after major surgery (5 Marks)
- State Four (4) specific nursing interventions for a patient on oxygen therapy (4 Marks)
- Outline five (5) specific routine nursing interventions for catheterized patients (5 Marks)
- Outline four (4) strategies to prevent development of pressure ulcers in immobile patients (4 Marks)

SECTION III: LONG ANSWER QUESTIONS (20 MARKS)

1. Mr. B is a patient admitted to the medical unit with clinical features of an infection. He has a fever, decreased oral intake, altered physical mobility, altered bowel elimination patterns has been admitted for diagnostic investigations and further management.
 - a. Outline five (5) nursing interventions to manage fever in Mr. B (5 Marks)
 - b. List four (4) complications associated with immobility (2 Marks)
 - c. Highlight three (3) nursing responsibilities in pre-test phase of diagnostic testing (3 Marks)
 - d. Outline five (5) nursing measures to optimize oral feeding in Mr. B (5 Marks)
 - e. State five (5) nursing measures you will institute in Mr. B to optimize normal bowel elimination patterns (5 Marks)

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