



**AMREF INTERNATIONAL UNIVERSITY
SCHOOL OF MEDICAL SCIENCES
DEPARTMENT OF NURSING & MIDWIFERY SCIENCES
END OF SEMESTER EXAMINATION
BSC. IN NURSING**

COURSE CODE & TITLE: BSN 412: Medical Surgical Nursing V

DATE 3RD DEC 2025

DURATION: 2 HOURS

START: 2:00 PM

FINISH: 4:00PM

INSTRUCTIONS

1. This exam is out of 70 marks
2. This Examination comprises THREE Sections. Section I : Multiple Answer 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

SECTION I: MULTIPLE ANSWER QUESTIONS(20 MARKS)

1. A patient with advanced cancer refuses further chemotherapy, preferring comfort measures instead. As the nurse, your best response should be guided by which ethical principle: -
 - a. Autonomy
 - b. Beneficence
 - c. Fidelity
 - d. Non maleficence
2. An ethical principle that advocates for equitable access to pain medication: -
 - a. Veracity
 - b. Justice
 - c. Beneficence
 - d. Fidelity
3. A prostate cancer patient reports severe pain despite being on oral morphine. The pain worsens at night. Best action by the palliative care nurse:-
 - a. Administer an additional short acting opioid for breakthrough pain
 - b. Increase morphine dose immediately
 - c. Switch to a non-opioid analgesic
 - d. Stop morphine and start sedative.
4. A nurse caring for a patient receiving morphine notes shallow breathing and drowsiness. What should the nurse do first:-
 - a. Decrease the next morphine dose
 - b. Continue monitoring and document the findings
 - c. Administer naloxone as prescribed and reassess respiration
 - d. Stop morphine administration and notify the physician
5. Best medication for management of a patient complaining of burning, shooting pain in the lower limbs: -
 - a. Paracetamol
 - b. Brufen
 - c. Gabapentin
 - d. Diazepam
6. Best nursing response for a patient who expresses fear of becoming addicted to morphine
 - a. You should avoid using morphine unless the pain is unbearable.”
 - b. “Addiction rarely occurs when opioids are used correctly for cancer pain.”
 - c. “Let’s switch to herbal remedies to avoid dependence.”
 - d. “Addiction is expected, but it’s not a concern in your case.”
7. A middle-aged man lost his wife three months ago. He reports sadness and occasional crying but has resumed work and participates in family activities. Which type of grief is he most likely experiencing: -
 - a. Complicated grief
 - b. Anticipatory grief
 - c. Normal (uncomplicated) grief
 - d. Disenfranchised grief

8. Priority unhealthy coping behavior displayed by a bereaved spouse who drinks excessively and avoids self-care:-
 - a. Neglecting self care
 - b. Eating disorder
 - c. Withdrawal and isolation
 - d. Substance abuse
9. Symptom not assessed by the Edmonton Symptom Assessment Scale (ESAS)
 - a. Pain and fatigue
 - b. Anxiety and depression
 - c. Shortness of breath and appetite
 - d. Swelling of arms and legs
10. On the symptom thermometer, a score of 4 or higher suggests:
 - a. The patient is experiencing no or minimal distress.
 - b. The symptom is well-controlled and no intervention is needed.
 - c. Moderate-to-severe distress, suggesting the need for further assessment or intervention.
 - d. Only physical problems are contributing to the distress.
11. According to the key considerations for using the ESAS, whose perception of symptom severity is considered the "gold standard"
 - a. The family caregiver perception
 - b. The health care professional assessment
 - c. The average score from all healthcare providers involved in the patient's care
 - d. The patient's own perception
12. All are goals of palliative care, EXCEPT:-
 - a. Managing pain and other symptoms.
 - b. Avoiding the prolongation of the dying process.
 - c. Achieving a sense of self-control and finding meaning in life.
 - d. Initiating aggressive curative treatment.
13. What is the key distinction between Palliative Care and Hospice Care as defined in the document's introductory section: -
 - a. Palliative Care is making life easy for patients and families living with serious illness, while Hospice care is specifically for when there is a life expectancy of 6 months or less.
 - b. Palliative Care is also called comfort care, while Hospice care is not.
 - c. Hospice care includes physical, emotional, social, and spiritual support, while Palliative Care does not.
 - d. Palliative Care begins at death, while Hospice care begins at diagnosis.
14. Aging theory that suggest that to age successfully, older adults should substitute new roles for those they have lost (e.g., retirement, widowhood):-
 - a. Activity theory
 - b. Disengagement theory
 - c. Wear-and-tear theory
 - d. Continuity theory

15. Cardiovascular age related changes that should be monitored by the nurse:-
 - a. Increased elasticity and compliance of blood vessels.
 - b. A thickening and rigidity of heart valves and arterial walls.
 - c. Decreased peripheral resistance leading to lower blood pressure.
 - d. A decrease in the size of the left ventricle.
16. Nurse advocacy role in geriatric nursing: -
 - a. Documenting vital signs every two hours as per hospital policy.
 - b. Explaining a new medication's mechanism of action to the patient.
 - c. Ensuring the patient has signed an informed consent form for a procedure.
 - d. Intervening on behalf of an elderly patient to ensure their advanced directive is respected by the medical team.
17. Main purpose of chain of custody :-
 - a. To ensure the physical integrity of the victim's body.
 - b. To provide psychological support to the victim during collection.
 - c. To classify the wounds and injuries sustained by the victim.
 - d. To document the unbroken chronological sequence of who had possession of the evidence.
18. Actus Reus refers to: -
 - a. The criminal intent or "guilty mind."
 - b. The absence of a legal justification or excuse.
 - c. The direct link between the act and the harm (causation).
 - d. The physical act or omission that constitutes the crime.
19. When a forensic nurse presents their findings in court, they typically function as:-
 - a. Expert Witness, providing specialized opinion testimony within their scope of knowledge.
 - b. Fact Witness, testifying only to direct observations of the crime scene.
 - c. Hearsay Expert, providing testimony on what others told them.
 - d. Law Enforcement Agent, advocating for the prosecution's case.
20. The concept of Mandatory Reporting Obligations primarily serves which function in forensic nursing and public health:-
 - a. To protect the nurse's legal privilege and confidentiality.
 - b. To ensure accurate evidence documentation for litigation purposes.
 - c. To protect vulnerable populations (e.g., children, elders) from ongoing abuse or neglect.
 - d. To limit the involvement of social services and law enforcement.

SECTION II: : SHORT ANSWER QUESTIONS (30 MARKS)

1. Briefly explain the scope of forensic nursing practice (5 Marks)
2. Explain the significance of maintaining the chain of custody in forensic evidence management (5 Marks)
3. Outline five principles of palliative care in nursing (5 Marks)
4. Outline five main domains of palliative care assessment (5 Marks)
5. Discuss the ethical and legal responsibilities of the nurse in advocating for the patient and ensuring protection of their rights (5 Marks)
6. Describe how you would conduct a risk assessment and make appropriate referrals to bereavement support services (5 Marks)

SECTION III: LONG ANSWER QUESTION (20 MARKS)

1. The *Edmonton Symptom Assessment System (ESAS)* is a standardized tool used in palliative care to assess and monitor common symptoms experienced by patients with life-limiting illnesses.
 - a. Describe 5 ways on how the results of ESAS can be used to guide symptom management and interdisciplinary care planning (10 Marks)
 - b. Explain 5 potential limitations of using ESAS in clinical settings and suggest strategies to overcome them (10 Marks)