UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
SEMESTER TWO FINAL EXAMINATION PAPER
MAY 2009

COURSE CODE: NUR 431

TITLE OF THE COURSE: ADVANCED MED-SURG NURSING

TIME ALLOCATED: 2 HOURS

MARKS ALLOCATED: 75

INSTRUCTIONS

1. ANSWER ALL QUESTIONS
2. EACH QUESTION CONSISTS OF 25 MARKS
3. WRITE CLEARLY
4. ONE MARK FOR A SUBSTANTIVE FACT

QUESTION 1
MULTIPLE CHOICE

Select the most appropriate answer for each of the following questions

1.1 Vasogenic cerebral oedema increases intracranial pressure by

a. shifting fluid in the grey matter
b. altering the endothelial lining of cerebral capillaries
c. leaking molecules from the intracellular fluid to the capillaries
d. altering the osmotic gradient flow into the intravascular component

1.2 A patient with intracranial pressure monitoring has pressure of 12 mm Hg. The nurse understands that this pressure reflects:

a. a severe decrease in cerebral perfusion pressure
b. an alteration in the production of cerebrospinal fluid
c. the loss of autoregulatory control of intracranial pressure
d. a normal balance between brain tissue, blood and cerebrospinal fluid

1.3 The nurse plans care for the patient with increased intracranial pressure with the knowledge that the best way to position the patient is to:

a. keep the head of the bed flat
b. elevate the head of the bed to 30 degrees
c. maintain patient on left side with head supported on pillow
d. use a continuous-rotation bed to continuously change patient position

1.4 The nurse is alerted to a possible acute subdural haematoma in the patient who:

a. has a linear skull fracture crossing a major artery
b. has a focal symptoms of brain damage with no recollection of a head injury
c. develops decreased level of consciousness and a headache within 48 hours of a head injury.
d. Has an immediate loss of consciousness with a brief lucid interval followed by decreasing level of consciousness.

1.5 During admission of a patient with a severe head injury to the emergency department, the nurse places the highest priority on assessment for

a. patency of airway
b. presence of a neck injury
c. neurological status with the Glasgow Coma Scale
d. cerebrospinal fluid leakage from the ears or nose

1.6 The factor related to cerebral blood flow that most often determines the extent of cerebral damage from a stroke is the:

a. amount of cardiac output
b. oxygen content of the blood
c. degree of collateral circulation
d. level of carbon dioxide in the blood

1.7 Information provided by the patient that would help differentiate a haemorrhage stroke from a thrombosic stroke includes:

a. sensory disturbance
b. a history of hypertension
c. presence of motor weakness
d. sudden onset of severe headache

1.8 A patient with right-sided hemiplegia and aphasia resulting from a stroke most likely has involvement of the:

a. brainstem
b. vertebral artery
c. left middle cerebral artery
d. right middle cerebral artery

1.9 The nurse explains to the patient with a stroke who is scheduled for angiography that the test is used to determined the:

a. Presence of increased ICP
b. Site and size of the infarction
c. Presence of blood in the cerebrospinal fluid
d. Patency of the cerebral blood vessels

1.10 Nursing management of a patient with hemiplegia during the acute phase of a stroke includes:

a. Restricting active movement
b. Positioning each joint higher than the proximal joint
c. Performing passive range of motion on all limbs every 4 hours
d. Maintaining the patient in a recumbent, side-lying position. maximum physical functioning.

1.11 Bladder training in a male patient who has urinary incontinence after a stroke includes:

a. Limiting fluid intake
b. Keeping a urinal in place at all times
c. Catheterising the patient every 4 hours
d. Assisting the patient to stand to void.

1.12 The most common response of the stroke patient to the change in body image is:

a. denial.
b. depression
c. disassociation
d. intellectualization

1.13 During assessment of a patient with obstructive jaundice the nurse would expect to find:

a. clay-coloured stools
b. dark urine and stools
c. pyrexia and severe pruritus
d. elevated urinary urobilinogen

1.14 A patient with hepatitis A is in the prodromal (preicteric) phase. The nurse plans care for the patient based on the knowledge that:

a. pruritus is a common problem with jaundice in this phase
b. the patient is most likely to transmit the disease during this phase
c. gastrointestinal symptoms are not as severe in hepatitis A as they are in hepatitis B
d. extrahepatic manifestation of glomerulonephritis and polyarteritis are common in this phase

1.15 A patient with hepatitis B is being discharged in 2 days. The nurse includes in the discharge teaching plan instructions to:

a. avoid alcohol for 3 weeks
b. use a condom during sexual intercourse
c. have family members get an injection of immunoglobulin
d. follow a low-protein, moderate-carbohydrate, moderate-fat diet.

1.16 The patient with advanced cirrhosis asks the nurse why his abdomen is so swollen. The nurse's response to the patient is based on the knowledge that:

a. a lack of clotting factors promotes the collection of blood in the abdominal cavity
b. portal hypertension and hypoalbuminemia cause a fluid shift into the peritoneal space.
c. Decreased peristalsis in the GI tract contributes to gas formation and distension of the bowel
d. bile salts in the blood irritate the peritoneal membranes, causing oedema and pocketing of fluid

1.17 When caring for a patient with hepatic encephalopathy, the nurse may give enemas, provide a low-protein diet, and limit physical activity. These measures are done to:

a. promote fluid loss
b. decrease portal pressure
c. eliminate potassium ions
d. decrease the production of ammonia.

1.18 In planning care for a patient with metastasic cancer of the liver, the nurse includes interventions that:

a. focus primarily on symptomatic and comfort measures
b. reassure the patient that chemotherapy offers a good prognosis for recovery
c. promote the patient's confidence that surgical excision of the tumour will be successful
d. provide information necessary for the patient to make decisions regarding liver transplantation.

(18)

B. Describe the nursing intervention for a patient diagnosed with anaemia

(7)

TOTAL MARKS 25

QUESTION 2

A 65 year old man is admitted into your ward with a medical diagnosis of cerebrovascular accident (stroke).

(a) Discuss briefly the nursing assessment you would conduct on this client. (10)

(b) What nursing intervention would you do under the following goals?

(i) Enhancing tissue perfusion [3]
(ii) Maintain adequate nutrition [6]
(iii) Maintaining stable body function [6]

TOTAL 25 MARKS

QUESTION 3

You are working in a medical ward and assigned three (3) clients. Describe your interventions for the following.

A. Liver cirrhosis (10)
B. Diabetic ketoacidosis (8)
C. Congestive heart failure (7)

TOTAL 25 MARKS