

**UNIVERSITY OF SWAZILAND**  
**FACULTY OF HEALTH SCIENCES**  
**GENERAL NURSING SCIENCE DEPARTMENT**

**FINAL EXAMINATION**

**MAY 2017**

COURSE NAME: FUNDAMENTALS OF NURSING

COURSE CODE: GNS 100

TOTAL MARKS: 75

ALLOCATED TIME: 2 HOURS

TOTAL NUMBER OF PAGES INCLUDING COVER PAGE: 6

**INSTRUCTIONS:**

- ANSWER ALL QUESTIONS
- EACH QUESTION CARRIES 25 MARKS
- ANSWER EACH QUESTION ON A NEW PAGE
- WRITE CLEARLY

DO NOT OPEN THE PAPER UNTIL INSTRUCTED BY THE INVILIGATOR

**QUESTION 1: [Total = 25]**

**For the multiple-choice questions, please select the best response from the options provided, and on your answer sheet, write your choice letter against the corresponding number. e.g. 1. A.**

1. The nurse is caring for an elderly patient with a hearing deficit. During a teaching session, the nurse should encourage:
  - A. The family to leave, so the patient receives the instructions directly
  - B. Helping the patient by finishing his or her sentences
  - C. Trying to anticipate their questions
  - D. Using short sentences and simple words.
  
2. A nurse is recording the health history of a newly admitted client. The nurse asks the client to explain what he or she means when the client is providing health information. Which therapeutic communication technique is being utilized by the nurse?
  - A. Informing
  - B. Restating
  - C. Clarification
  - D. Reflection
  
3. An infection acquired in the hospital is called:
  - A. Nosocomial
  - B. Iatrogenic
  - C. Exogenous
  - D. Endogenous
  
4. The nurse understands that TB is a droplet nuclei of less than 5  $\mu\text{m}$  and therefore requires:
  - A. Standard precautions: use universal precautions for all patient contact
  - B. Airborne precautions: use respirator mask for all patient contact
  - C. Droplet precautions: use surgical face mask for all patient contact
  - D. Contact precautions: use gloves for all patient contact
  
5. Patients with apnoea experience:
  - A. Lack of oxygen to the body tissue
  - B. Painful and difficult respirations that requires a lot of effort
  - C. Irregular respiration, slowness in breathing followed by rapid breathing
  - D. Cessation of breathing that may be temporary.
  
6. By removing excess blankets from a patient with fever acts to decrease body temperature through:
  - A. Conduction
  - B. Convection
  - C. Evaporation
  - D. Radiation

7. Poor oxygenation of the blood ordinarily will affect the pulse rate and cause it to become:
- A. Bounding
  - B. Irregular
  - C. Faster than normal
  - D. Slower than normal
8. The normal adult urine output per day is:
- A. 1000ml
  - B. 1500-1600ml
  - C. 3000-3200ml
  - D. 4000ml
9. Maintaining a Foley catheter bag in the dependant position prevents:
- A. Urinary reflex
  - B. Urinary retention
  - C. Reflex incontinence
  - D. Urinary incontinence
10. Hospital acquired urinary tract infection is often related to poor hand hygiene and:
- A. Poor perineal hygiene
  - B. Urinary drainage bags
  - C. Poor urinary output
  - D. Improper catheter care
11. A blood pressure cuff that is wrapped loosely will give a Bp reading that is:
- A. Erroneously low
  - B. Erroneously high
  - C. Difficult to read because the sound may be muffled
  - D. Weak and thready.
12. The nurse is eliciting objective data when asking the patient to:
- A. State her name, the time, and where she is.
  - B. State if her pain in a scale of 0 to 10
  - C. State when the pain started
  - D. State if she could be pregnant
13. One of these statements is NOT true of Post Exposure Prophylaxis (PEP)
- A. Can be given to rape victims
  - B. Occupationally, all nurses must receive PEP as an IPC (infection prevention and control) measure
  - C. PEP reduces the transmission of infection by 79%
  - D. PEP must be administered according to the hospital protocol

14. Which client meets the criteria for selection of the apical site for the assessment of the pulse rather than the radial pulse?
- A. A client who is in shock
  - B. The pulse changes with body positions changes
  - C. A client with an arrhythmia
  - D. A client with less than 24 hours after surgical operation
15. Mrs J. is complaining of shortness of breath. Her respirations are 28b/min and laboured. The bed is currently in the flat position. In which position can you put Mrs. J. to improve her breathing pattern?
- A. Prone
  - B. Semi-Fowlers
  - C. Genu-Pectoral
  - D. Reverse Trendelenburg
16. Mr. D. has diabetes mellitus, thus has very dry skin on the feet and lower extremities. Which of the following can you advise your client to do to maintain the integrity of the skin?
- A. Frequently soak the feet
  - B. Use a non-perfumed lotion
  - C. Apply foot powder
  - D. Avoid-knee high elastic stockings.
17. Joel is admitted in ward 15 for head injury. He is unresponsive and requires total care by the nursing staff. Which assessment does the nurse check first before providing special oral care to Joel?
- A. Presence of pain
  - B. Gag reflex
  - C. Range of Motion
  - D. Condition of the heart
18. The nurse does not take shortcuts, e.g. estimating the patient's vital signs. This is an example of which critical thinking attitude?
- A. Fairness
  - B. Responsibility and accountability
  - C. Thinking independently
  - D. Discipline
19. The nurse uses a procedure manual to confirm how suctioning is done. The level of critical thinking the nurse is using is:
- A. Complex critical thinking
  - B. Scientific method
  - C. Commitment
  - D. Basic critical thinking

20. The nurse identifies ways he can improve his own performance by reflecting on his clinical experiences. Which of the following core critical thinking skills this example represents?
- A. Self-regulation
  - B. Inference
  - C. Explanation
  - D. Analysis
21. Joanne is a 55 years old diabetic client and she complained of leg pain and described it as dull, burning sensation. Which of the following types of pain is described by Joanne?
- A. Physiological
  - B. Somatic
  - C. Visceral
  - D. Neuropathic
22. The nurse understands that patient teaching is successful when:
- A. It changes behaviour
  - B. It is demonstrated back correctly once
  - C. It is evaluated by testing
  - D. The patient asks questions
23. A patient is learning how to use crutches for the first time. This skill will require learning in which domain:
- A. Cognitive
  - B. Affective
  - C. Global
  - D. Psychomotor
24. The nurse performs range of motion exercises on an immobile client to avoid which complication associated with immobility
- A. Urinary stasis
  - B. Contractures
  - C. Constipation
  - D. Dependent edema
25. A widow of 10 days says to the nurse from hospice who has called to invite her to a grieving support group meeting "I feel like I am losing my mind. I see my husband in the house, in the yard, sometimes even at the store. I even find myself talking to him about things that happen." Which is the best response for the nurse to make?
- A. "If these things are still going on in 3 months then you may need to worry about losing your mind but you don't need to worry now."
  - B. "That is a serious concern. Tell me more about what is going on with you."
  - C. "I understand you find these events very disturbing but they are normal parts of the grieving process."
  - D. "You need to relax; things will improve with time."

**QUESTION 2****[Total = 25]**

- 2.1 Compare acute with chronic pain. [8]
- 2.2 Identify and Explain the position that is recommended for the following patients:
- 2.2.1 Immediately after lumbar puncture
  - 2.2.2 When recovering after an epileptic seizure
  - 2.2.3 A patient with difficulty exhaling
  - 2.2.4 A client with heart condition and has problem breathing
  - 2.2.5 A female client for pelvic examination [10]
- 2.3 Outline the plan of care for a patient with altered bowel elimination, related to bed confinement and decreased fiber intake. [4]
- 2.4 List 3 benefits of a clear liquid diet [3]

**QUESTION 3****[Total = 25]**

Mrs Maziya is a 77 years old patient with AIDS. She is admitted in ward 18, the last cubicle because her symptoms are suggestive of Pulmonary TB. She has lost a considerable amount of weight. She has a dry cough, dyspnoea, complained of poor appetite and has difficulty in performing activities of daily living. Lately, she had difficulty getting out of bed and sometimes soiled herself. She also has difficulty sleeping and now that she is admitted, the problem of insomnia (sleep deprivation) has worsened. When the nurse checked her vital signs in the morning, they were:

- T- 38.3<sup>0</sup>C;
- P - 68 beats/min;
- R-28 b/min.
- Bp- 110/82mmHg.
- Urine output-150ml of brown urine in 12 hours.
- Skin is slightly pale, dry with poor skin turgor.

- 3.1 Identify the risk factors in this case and explain how they may contribute to the development of pressure sores. [10]
- 3.2 Outline how you would assist Mrs. Maziya to attain adequate sleep whilst admitted. [5]

*After a week of investigations, Mrs. Maziya's diagnostic results showed that she has a positive TB smear.*

- 3.3 Explain the infection prevention and control (IPC) measures that must be observed when caring for Mrs. Maziya to prevent the transmission of PTB to staff and other patients. [10]

**END OF PAPER: #GOOD LUCK!!!**

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