

UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
SEMESTER 1
FINAL EXAMINATION
DECEMBER 2017

COURSE : **HEALTH ASSESSMENT AND DIAGNOSIS**
COURSE CODE : **NUR 420**
TIME ALLOWED : **2 HOURS**
MARKS ALLOCATED : **75**

INSTRUCTIONS:

- 1. READ INSTRUCTIONS AND QUESTIONS CAREFULLY AND WITH UNDERSTANDING**
- 2. ANSWER ALL QUESTIONS**
- 3. WRITE NEATLY AND CLEARLY**
- 4. DO NOT OPEN THIS QUESTION PAPER UNTIL YOU ARE TOLD TO DO SO BY THE INVIGILATOR**

QUESTION 1

MULTIPLE CHOICE QUESTIONS

The following are multiple choice questions. Select the most appropriate response. In your answer sheet write for example: 30 = A

1. Which of the following would be considered a modifiable risk factor for coronary artery disease?
 - A. Age
 - B. Gender
 - C. Smoking
 - D. Family history

2. Professional nurses are responsible for making clinical decisions hence;
 - A. Prove traditional methods of providing nursing care to patients.
 - B. Take immediate action when a patient's condition worsens.
 - C. Apply clear textbook solutions to patients problems.
 - D. Formulate standardized care plans for groups of patients.

3. To gather information about a patient's home and work surroundings, the nurse will need to utilize which method of data collection?
 - A. Carefully review lab results.
 - B. Conduct the physical assessment before collecting subjective information.
 - C. Perform a thorough nursing health history.
 - D. Prolong the termination phase of the interview.

4. While interviewing an older female patient of Asian descent, the nurse notices that the patient looks at the ground when answering questions. This nurse should
 - A. Notify the physician to recommend a psychological evaluation.
 - B. Consider cultural differences during this assessment.
 - C. Ask the patient to make eye contact to determine her affect.

D. Continue with the interview and document that the patient is depressed.

5. While the patient's lower extremity, which is in a cast, is assessed, the patient tells the nurse about an inability to rest at night. The nurse disregards this complaint, thinking that no correlation has been noted between having a leg cast and developing restless sleep. A more theoretically sound approach would be to first

A. Document the sleep patterns and complaint in the patient's chart.

B. Tell the patient you are just focused on the leg right now.

C. Explain that a more thorough assessment will be needed next shift.

D. Ask the patient about his usual sleep patterns and the onset of having difficulty resting.

6. A nursing student is completing an assessment on an 80-year-old patient who is alert and oriented. The patient's daughter is present in the room. Which of the following actions made by the nursing student requires the nursing professor to intervene?

A. The nursing student is making eye contact with the patient.

B. The nursing student is speaking only to the patient's daughter.

C. The nursing student nods periodically while the patient is speaking.

D. The nursing student leans forward while talking with the patient.

7. Which nursing diagnosis related to alterations in urinary function in an older adult should be a nurse's first priority?

A. Self-care deficit related to decreased mobility

B. Risk for infection

C. Anxiety related to urinary frequency

D. Impaired self-esteem related to lack of independence

8. Which assessment question should the nurse ask if stress incontinence is suspected?

A. "Does your bladder feel distended?"

B. "Do you empty your bladder completely when you void?"

C. "Do you experience urine leakage when you cough or sneeze?"

D. "Do your symptoms increase with consumption of alcohol or caffeine?"

9. A patient continues to report postsurgical incision pain at a level of 9 out of 10 after pain medicine is given. The next dose of pain medicine is not due for another hour. What should the critically thinking nurse do first?

- A. Explain to the patient that nothing else has been ordered.
- B. Explore other options for pain relief.
- C. Offer to notify the health care provider after morning rounds are completed.
- D. Discuss the surgical procedure and reason for the pain.

10. A patient verbalizes a low pain level of 2 out of 10 but exhibits extreme facial grimacing while moving around in bed. What is the nurse's best action in response to her observation?

- A. Proceed to the next patient's room while making rounds.
- B. Offer a massage because the patient does not want any more pain medicine.
- C. Administer the pain medication ordered for moderate to severe pain.
- D. Ask the patient about the facial grimacing with movement.

11. When assessing tactile fremitus, the nurse recalls that it is normal to feel tactile fremitus most intensely over which location?

- A. Between the scapulae
- B. Third intercostal space, Mid Clavicular Line
- C. Fifth intercostal space
- D. Over the lower lobes, posterior side

12. The nurse is assessing a client's breath sounds. Which assessment finding has been correctly linked to the nurse's primary intervention?

- A. Hollow sounds heard over trachea; increase oxygen flow rate.
- B. Crackles heard in bases; have the client cough forcefully.
- C. Wheezes heard in central areas; administer inhaled bronchodilator.
- D. Vesicular sounds heard over the periphery; have the client breathe deeply.

13. The nurse is caring for an older adult client with a pulmonary infection. Which nursing assessment is a priority with this client?

- A. Encouraging the client to increase fluid intake

- B. Raising the head of the bed to at least 45 degrees
- C. Providing the client with humidified oxygen
- D. Assessing the client's level of consciousness

14. What is accommodation?

- A. Adaption of the eye for near vision
- B. Divergence
- C. Convergence and divergence of the eye
- D. Near-sighted testing

15. All the following are assessed when performing a neurological recheck **EXCEPT?**

- A. Level of consciousness
- B. Testing coordination
- C. Motor function
- D. Verbal function

TRUE/FALSE

For the following statements write T if the statement is true or F if the statement is false

- | | |
|---|-------|
| 16. Crackles occur with obstructive disease | T. F. |
| 17. S2 is best heard at the mitral area | T. F. |
| 18. Broncho – vesicular sounds are musical in quality | T. F. |
| 19. If the thyroid gland is enlarged bilaterally, listen for a bruit in the carotid artery | T. F. |
| 20. Lymph nodes in the neck are normally mobile, soft and non-tender | T. F. |
| 21. Oral malignancies are more likely to develop on the tongue | T. F. |
| 22. The examiner notices a fine tremor when the patient sticks out his or her tongue a disorder associated with hyperthyroidism | T. F. |
| 23. A papule is a colour change, flat less than 1 cm like petechia | T. F. |
| 24. One of the factors that contribute to heart murmurs is structural valve defect. | |

25. Typically one breast is usually larger than the other

T. F

T. F

QUESTION 2

2.1 **Scenario:** A 24 year old arrives in your facility with suspected to have brain injury, your lecturer instructs you to conduct superficial reflexes specifically plantar reflex. Explain how you would conduct the examination and state abnormal findings.

(3 marks)

2.2 How would you assess tandem during musculo – skeletal examination?

(2 marks)

2.3 What is graphesthesia?

(1 mark)

2.4

i) When during the menstrual cycle should you conduct breast self – examination?

(1 mark)

ii) How should a woman of child bearing age conduct self-breast examination?

(5 marks)

2.5 A patient visits your facility for a routine eye check-up. How should you go about when testing a patient for accommodation of the eye?

(2 marks)

2.6 What would be the normal response of the eye?

(1 mark)

2.7 What does 20/100 mean when you are assessing visual acuity in a patient?

(1 mark)

2.8 Explain how you should take carotid pulse?

(3 marks)

2.9. A thirty – five (35) year old complains of pain in the vaginal opening. You then decide to conduct a vaginal examination. One of the areas you need to examine is the Bartholin's glands.

Explain how you would undergo the examination what would you need to determine

(4 marks)

2.10. A 30 years old male comes to your facility you suspect that he has a femoral hernia.

Explain how you would palpate for the hernia (2 marks)

Total – 25 marks

QUESTION 3

3.1. A 55-year-old client visits the outpatient clinic with complaints of pain in the leg that is aggravated with walking. On inspection, the nurse finds that the client has rope-like, bulging, and contorted veins in the leg.

a. How should you perform manual compression test to elicit other related data from the client? (5 marks)

b. Why is manual compression test done? (1 mark)

c. What would be the possible findings in a patient with varicose veins? (1 mark)

3.2. Read the following scenario and answer the questions below.

Scenario: During routine check-up (“I schedule one every year now because I want to live a healthy life”). Zanele tells you that she is concerned with the lumps and tenderness that occur just a few days before menstrual period. In response to questioning, she relates that she is a “heavy drinker of coffee” and is stressed at work. She reports that her maternal aunt died of breast cancer. She wants to know if the lumps are cancerous or what can be done to eliminate her problem. On examination you note that her breast feel nodular but without discrete masses. No inflammation, no enlargement, no nipple drainage. You suspect that she has fibrocystic changes.

From the information above address the following;

a) Identify abnormal data and strengths (4 marks)

b) Identify two (2) cue clusters (2 marks)

c) Draw two (2) inferences (2 marks)

d) From the two (2) inferences draw possible actual nursing diagnoses
(2 marks)

3.3. A 45 year old male is admitted to your ward and is suspected to have appendicitis.

Give a detailed account how you would conduct rebound tenderness test for the patient and state your findings.
(4 marks)

3.4. If you are tasked to assess musculo – skeletal for a 12 year old what would you palpate for? State four (4) things

(2 marks)

3.5 Explain how you would assess flexion and extension of the cervical spine

(2 marks)

Total – 25 marks

GRAND TOTAL – 75 MARKS