

CHUKA



UNIVERSITY

UNIVERSITY EXAMINATIONS

**FIRST YEAR EXAMINATION FOR THE AWARD OF
BACHELOR OF SCIENCE IN NURSING**

NURS 192: HEALTH ASSESSMENT /FUNDAMENTALS OF NURSING PRACTICE II

STREAMS: Y1 S2

TIME: 2 HOURS

DAY/DATE: WEDNESDAY 31/3/2021

8.30 AM – 10.30 AM

INSTRUCTIONS:

1. Do not write anything on the question paper.
2. Mobile phones and any other reference materials are NOT allowed in the examination room.
3. The paper has three sections. Answer ALL the questions.
4. All your answers for Section I (MCQs) should be on one page.
5. Number ALL your answers and indicate the order of appearance in the space provided in the cover page of the examination answer booklet.
6. Write your answers legibly and use your time wisely

Multiple choice questions (20mks).

1. In a person with good cardiac function and distal perfusion, how long should a capillary refill take?
 - A. Less than 3 seconds
 - B. More than 3 seconds
 - C. More than 5 seconds
 - D. Around 5 seconds
2. Cramp-like pain in the lower extremities usually after walking is
 - A. Ischemia
 - B. Claudication
 - C. Hypoventilation
 - D. Atelectasis

3. Which of the following is not a peripheral pulse?
 - A. Ulnar
 - B. Femoral
 - C. Brachial
 - D. Humoral
4. Heard in patients with coronary artery disease after MI (myocardial infarction), heard late in diastole when the atria contracts.
 - A. S1
 - B. S2
 - C. S3
 - D. S4
5. When does normal heart sound S2 occur?
 - A. With the closure of the AV valve and signals the end of systole
 - B. With the opening of the AV valve and signals opening of systole
 - C. With the opening of the semilunar valves and signals the beginning of systole.
 - D. With the closure of the semilunar valves and signals the end of systole
6. How do we know that the nurse knows the right time to do a physical assessment?
 - A. 'I will do it as soon as possible'
 - B. 'I think the next shift will have to do it'
 - C. 'After I give the medication'
 - D. 'Maybe later, when I am done with others'
7. The nurse tells a 75 year old patient that she will have to do a "head to toe" assessment on him. The patient asks, "what is that"? What would be her best answer?
 - A. I will need to determine the etiology of any pathologic symptoms you might have.
 - B. Oh nothing, it is just something that we do.
 - C. It is a way for us to know how we are going to take care of you later
 - D. Maybe you can tell me how you got here.
8. A patient who is just being admitted complains of pain on his right foot. What is the proper way to provide this patient with proper physical assessment?
 - A. Do a focused assessment on the foot first and then do a complete physical assessment later
 - B. If a complete physical assessment is necessary, it is best to assess any painful areas last.
 - C. Focus on the pain and provide comfort before anything else.
 - D. Since the patient is new admit, concentrate on the general physical assesment only
9. During Advanced Cardiac Life Support (ACLS) defibrillation in is only delivered for
 - a. Irregular rhythms
 - b. shockable rhythms.
 - c. Non shockable rhythms
 - d. Regular rhythms
10. PERRLA refers to
 - A. Motor function
 - B. Order of assessment
 - C. Level of consciousness

- D. Pupillary response
11. When the nurse is conducting the physical examination, which of the following findings should be reported to the physician based on the client's symptoms?
 - A. Bowel sounds present in all the four quadrants
 - B. Skin warm
 - C. Tenderness to palpation of lower quadrants with guarding
 - D. None of the above
 12. After completing the health history, the nurse begins to ask more detailed questions to clarify points and follow up on concerns expressed by the client during the interview. This portion of the health assessment is:
 - A. Focused interview
 - B. Objective data
 - C. Interpretation of findings
 - D. Informal teaching
 13. During the interview with Ms. Wong, she complains of nausea, vomiting, diarrhea, and fever. Which of Ms. Wong's symptoms needs to be assessed first?
 - A. Fever
 - B. Diarrhea
 - C. Vomiting
 - D. Nausea
 14. During the health interview, the client mentions that she is "very stressed about her home situation." The nurse sees this information as impacting the client's level of pain control. Which approach is the nurse using during the health interview?
 - A. Cultural
 - B. Communication
 - C. Developmental
 - D. Holistic
 15. You're performing a head-to-toe assessment on a patient admitted with abdominal pain. During inspection of the abdomen, you note the abdominal contour to be round and distended with no masses or lesions present. The patient reports that their last bowel movement was one hour ago, and the stool was loose. In addition, the patient states that the abdominal pain is located below the umbilicus and is sharp in quality. After inspection of the abdomen, you will:
 - A. Perform light palpation on the abdomen, followed by deep palpation.
 - B. Percuss the abdomen.
 - C. Auscultate for bowel sounds by starting in the right lower quadrant.
 - D. Palpate for bruits and rebound tenderness.
 16. The nurse is looking at the information collected during the health interview in an effort to cluster or group the data together. The nurse is demonstrating which phase of the nursing process?
 - A. Diagnosis
 - B. Assessment
 - C. Planning
 - D. evaluation

17. After completing the health history, the nurse begins to ask more detailed questions to clarify points and follow up on concerns expressed by the client during the interview. This portion of the health assessment is:
 - A. Informal teaching
 - B. Objective data
 - C. Interpretation of findings
 - D. Focused interview
18. A Rubbing, grating or squeaky sound upon auscultation; as if two pieces of leather are being rubbed together
 - A. Pulmonary friction
 - B. Pleural friction rub
 - C. Pulmonary bruising
 - D. Whooping cough
19. When auscultating for lung sounds, which part of the stethoscope is designed to transmit the higher pitch of abnormal sounds
 - A. Ear piece
 - B. Bell
 - C. Diaphragm
 - D. Tubes
20. An abnormal cycle of respiration that begin with slow, shallow respiration that become rapid, then become slower and are followed by periods of apnea (20 seconds). Normally caused by heart failure, opioid overdose, renal failure, meningitis, and severe head ache.
 - A. Kussmaul
 - B. Cheyne-stokes
 - C. Botte's
 - D. Whooping sneeze

Short answer questions (30marks).

1. Describe the abdominal assessment the nurse is likely to carry out on a patient during physical examination (8 marks)
2. Describe the significance of three(3) observations that may be noted on the nails during physical examinations. (6 marks)
3. State seven (7) primary lesions that may be found on the skin during physical examination (7marks)
4. Describe the procedure and the significance of Weber's test (5marks)
5. State four important sites/ areas you would elicit heart sound on auscultation (4marks)

Long answer questions (20marks).

1. Wendo 30 years old lady is admitted in the ward with a diagnosis of brain trauma.
 - a) Define Glasgow Coma Scale (GCS) (2marks)
 - b) Using Glasgow Coma Scale, assess Wendos level of consciousness (8marks)
 - c) Describe five (5) ways of Testing Wendo's Sensory function (10 marks)