

CHUKA



UNIVERSITY

UNIVERSITY EXAMINATIONS

EXAMINATION FOR THE AWARD OF BACHELOR
OF SCIENCE IN NURSING

NURS 441: MEDICAL- SURGICAL NURSING SPELICIALITIES I

STREAMS: BSC (NURS)

TIME: 2 HOURS

DAY/DATE: MONDAY 02/12/2019

2.30 P.M. – 4.30 P.M.

INSTRUCTIONS: ALL QUESTIONS ARE COMPULSORY

MULTIPLE CHOICE QUESTIONS (20MARKS)

- 1) Corneal sensations are diminished in:
 - a) Herpes simplex
 - b) Conjunctivitis
 - c) Fungal infections
 - d) Marginal keratitis
- 2) A patient is most likely to experience pain due to infection of the ethmoidal air cells sinus
 - a) At the base of the skull.
 - b) On the forehead.
 - c) In the cheeks.
 - d) Between the eyes.
- 3) A recurrent bilateral conjunctivitis occurring with the onset of hot weather in young boys with symptoms of burning, itching, and lacrimation with large flat topped cobble stone papillae raised areas in the palpebral conjunctiva is:
 - a) Trachoma
 - b) Phlyctenular conjunctivitis
 - c) Mucopurulent conjunctivitis

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- d) Vernal keratoconjunctivitis
- 4) A young child suffering from fever and sore throat began to complain of lacrimation. On examination, follicles were found in the lower palpebral conjunctiva with tender preauricular lymph nodes. The most probable diagnosis is:
- a) Trachoma
 - b) Staphylococcal conjunctivitis
 - c) Adenoviral conjunctivitis
 - d) Phlyctenular conjunctivitis
- 5) A female patient 18 years old, who is contact lens wearer since two years, is complaining of redness, lacrimation and foreign body sensation of both eyes. On examination, visual acuity was 6/6 with negative fluorescein test. The expected diagnosis can be:
- a) Acute anterior uveitis.
 - b) Giant papillary conjunctivitis.
 - c) Bacterial corneal ulcer.
 - d) Acute congestive glaucoma
- 6) The most important symptom differentiating orbital cellulitis from panophthalmitis is:
- a) Vision
 - b) Pain
 - c) Redness
 - d) Swelling
- 7) After 48 hours of a cataract extraction operation, a patient complained of ocular pain and visual loss. On examination, this eye looked red with corneal oedema. The first suspicion must be:
- a) Secondary glaucoma.
 - b) Anterior uveitis.
 - c) Bacterial endophthalmitis.
 - d) Acute conjunctivitis

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- 8) A young patient with sudden painless loss of vision, with systolic murmur and ocular examination reveals a cherry red spot with clear Anterior Chamber, the likely diagnosis is:
- a) Central Retinal Artery Occlusion
 - b) Central Retinal Vein Occlusion
 - c) Diabetes Mellitus
 - d) Branch Retinal Vein Occlusion
- 9) The type of optic atrophy that follows retro-bulbar neuritis is:
- a) Secondary optic atrophy
 - b) Consecutive optic atrophy
 - c) Glaucomatous optic atrophy
 - d) Primary optic atrophy
- 10) A male patient 30 years old with visual acuity of 6/6 in both eyes. Twelve hours ago he presented with drop of vision of the left eye. On examination, visual acuity was 6/6 in the right eye and 6/60 in the left eye. Fundus examination showed blurred edges of the left optic disc. The most probable diagnosis is:
- a) Raised intra cranial pressure
 - b) Raised ocular tension
 - c) Central retinal artery occlusion
 - d) Optic neuritis
- 11) In retinal detachment, fluid accumulates between:
- a) Outer plexiform layer and inner nuclear layer.
 - b) Neurosensory retina and layer of retinal pigment epithelium
 - c) Nerve fiber layer and rest of retina.
 - d) Retinal pigment epithelium and Bruch's membrane.

- 12) The inspection of internal structures of the eye is done by
- a) Snellen`s chart
 - b) Ophthalmoscope
 - c) Naked eye
 - d) Tonometry
- 13) Cataracts is
- a) The opacity of the lens
 - b) Increased intra-ocular pressure
 - c) Treated with broad spectrum antibiotics
 - d) Infectious
- 14) The normal range of aqueous humor pressure in the eye is
- a) 20 – 31mmHg
 - b) 30 – 41mmHg
 - c) 10 – 21mmHg
 - d) 0 – 11mmHg
- 15) In Angle Closure Glaucoma
- a) There is persistent dull pain in the eye
 - b) Permanent blindness is impossible
 - c) Intraocular pressure may exceed 50mmHg
 - d) The eye enlarges
- 16) Early signs of Retinoblastoma include
- a) Leukokoria and strabismus
 - b) Lacrimation and poor vision
 - c) Red eye
 - d) Painful eye
- 17) Visual fields is
- a) Visual acuity
 - b) Area that is visible during fixation of vision in one direction
 - c) Optic pathways

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- d) Area that is not visible during fixation of vision in one direction
- 18) Risk factors for Retina detachment include
- a) Conjunctivitis
 - b) Myopia
 - c) Hyperopia
 - d) Strabismus
- 19) A painless red eye can result from
- a) Conjunctivitis and Pterygium
 - b) Keratitis and Iridocyclitis
 - c) Acute angle closure glaucoma
 - d) Episcleritis and Scleritis
- 20) Dry eyes and Dacryocystitis are disorders of
- a) Lacrimal system
 - b) Meibomian glands
 - c) Anterior and posterior chambers
 - d) Ciliary processes

SHORT ANSWER QUESTIONS (30 MARKS)

- Q1) Compare and contrast myopia and hyperopia (4 marks)
- Q2) State 5 functions of tears in the eye (5 marks)
- Q3) Describe three risk factors to development of strabismus (6 marks)
- Q4) State 5 clinical features of Open Angle Glaucoma (5 marks)
- Q5) Describe the post-operative nursing care following an eye surgical operation (4 marks)
- Q6) Describe the 3 types of cataracts (6 marks)

LONG ANSWER QUESTION (20 MARKS)

QUESTION ONE

Trachoma is infectious and a leading cause of preventable blindness

- i) Outline the WHO classification of trachoma (10 marks)
- ii) Explain the preventive measures of trachoma (10 marks)

