

امتحانات الفرقة الأولى باطنه وجراحة لعام 2016.2017

مقرية بالمهنا وجراحيا



الاسم:

Zagazig University/ College /Nursing Band /First Semester/ 1 st year Department / Medical Surgical Nursing Date / 1/1/2017 First Semester 2016 /2017	Theoretical exam Subject /Medical Surgical Nursing Time / 3 hours Total Score / 120 Number of questions / 4 Number of questions paper / 13 double-sided paper Number/ 7
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Answer all of the following questions: Total mark 120

First question: (55 scores)
MCQ questions choose only one correct answer
It consists of 55 questions
Correct answer equal to 1 score

Second question: (20 scores)
Write T if the statement is true and F if the statement is false
It consists of 20 questions
Correct answer equal to 1 score

Third question: (25 scores)
Complete statement by giving scientific word
It consists of 25 questions

Fourth question: (20 scores)
Discuss the following questions

1. Discuss in details' (5 Scores)
2. Discuss in details' (5 Scores)
3. Discuss in details' (5 Scores)
4. Discuss in details' (5 Scores)

Wishing good luck and success

Medical nursing staff

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Faculty of nursing
Medical-surgical department

**Final Exam For 1st year (2016-2017)
Medical Surgical Nursing course (101) (First term)**

Date: 1/ 1/ 2017
Time: 3 Hours

Total marks: 120 Marks

I: Read the following MCQ questions and choose only one correct answer:
(55 Marks)

1. Which of the following represents verbal communication?
 - A. Touch
 - B. Gestures
 - C. Silence
 - D. Electric record
2. A nurse enters the room of a patient with cancer. The patient is crying and states "I feel so alone". Which statements is the most appropriate?
 - A. The nurse stands at the patient's bedside and states, "I understand how you feel. My mother said the same thing when she was ill.
 - B. The nurse places a hand on the patient's arm and states, "you feel so alone"
 - C. The nurse stands in the patient's room and asks, "Why do you feel so alone? Your wife has been here every day".
 - D. The nurse hold the patient's hand and asks" what makes you feel so alone"
3. A nurse is providing instruction to the patient's regarding the procedure to change his colostomy bag. During the teaching session; He asks, "What type of foods should I avoid to prevent gas? The question the patient has asked allow for which of the following?
 - A. A closed-ended answer
 - B. Information clarification
 - C. The nurse to give advice
 - D. A yes or no answer
4. The nurse is implementing strategies to promote communication for patient who is cognitively impaired. Which of the following would be appropriate for the patient in this situation?
 - A. Orient the patient to the arrangement in the room
 - B. Keep environment noises at low level as possible.
 - C. Be sure eye glasses are clean and intact
 - D. Use open ended questions
5. Which of the following the nurse can use for effective communication skills?
 - A. Rolling eyes
 - B. Asking Leading questions
 - C. Asking questions containing how
 - D. Sit when communicating with a patient

6. The patient asks, "When I expect to be told about my insulin? The nurse responds " let's discuss your diet now so that you will know what to eat when you get home. We can discuss your insulin some other day. This is an example of which of the following?
- Cliché
 - Being judgmental
 - Changing the subjects
 - Giving false assurance
7. Which of the following can be considered as a barrier of communication?
- Leading questions
 - Keep the conversation as neutral as possible
 - Humor
 - Using silence
8. Which of the following is true about nonverbal communication?
- It is all that is observed and heard
 - It should be accepted as the true message from the person
 - It should be measured against the person's words
 - It includes posture, gait and dress but not facial expression
- 9..... is one of pain rating scales which usually consist of a series of numbers ranging from 0 to 10
- Behavioral pain scale
 - Visual scales
 - Verbal rating scales
 - Numerical rating scales
10. A patient complains of abdominal pain that is difficult to localize. The nurse documents this as which type of pain?
- Cutaneous
 - Visceral
 - Superficial
 - Somatic
11. All the following sentences can be used to describe acute pain except
- May be accompanied by depression
 - Has a short duration
 - Has warning sign
 - Usually has a well-defined cause
12. Which of the following represents physiologic response to pain?
- Increased blood glucose
 - Fainting or unconsciousness
 - Pupils constriction
 - Grimacing, moaning and crying
13. When the nurse uses pain scales; she assesses which of the following characteristics?
- Quantity of pain
 - Quality of pain
 - Alleviating factors
 - Chronology of pain
14. Respiratory depression is a commonly feared side effect of:
- Opioid analgesics
 - Nonopioid analgesics
 - Adjuvant analgesics
 - Transcutaneous electrical nerve stimulation.

15. A nurse has decided to focus on educating the community about health promotion and wellness. Which of the following would be an example of primary prevention?
- Assessing the growth and development of children
 - Teaching self-insulin injection for a patient who has diabetes
 - Implementing an exercise class for clients who have had a stroke
 - Teaching a class about first aid
16. A 32 years old female has a family history of heart disease. To decrease her risk of developing heart disease, she regularly participates in a program of aerobic activity including race walking and light weight lifting. For her, aerobic exercise is:
- Health protection and secondary prevention
 - Health promotion
 - Primary prevention
 - Primary promotion and secondary prevention
17. Self-monitoring of blood glucose for diabetic patient is on what level of prevention?
- Primary
 - Secondary
 - Tertiary
 - None of the above
18. A record contains descriptive, objective information about what a nurse see, hears, feel, and smells is one of characteristics of quality documentation and referred to:
- Accurate
 - Factual
 - Current
 - Organized
19. A nurse is careful to cover the patient during a bath. This action describes which of the following nursing roles?
- Caregiver
 - Communicator
 - Teacher
 - Change agent
20.working with another health professional, illustrate the overlapping responsibilities and reflect the collegial relationship between them.
- Consultant
 - Collaborator
 - Advocate
 - Caregiver
- 21..... process of helping a client to recognize cope with stressful psychological or social problems
- Counselor
 - Leader
 - Consultant
 - Change agent

- 22. Which of the following represents external factors that affects health status and believes?**
- A. Lifestyle
 - B. Family and cultural beliefs
 - C. Body-mind interaction
 - D. Developmental level
- 23. In which of stages of illness; the sick person may try self-management?**
- A. Medical care contact
 - B. Sick role
 - C. Symptoms experience
 - D. Recovery or rehabilitation
- 24. This is the first stage of illness wherein, the person starts to believe that something is wrong. Also known as the transition phase from wellness to illness.**
- A. Symptom Experience
 - B. Assumption of sick role
 - C. Medical care contact
 - D. Dependent patient role
- 25. The following are true with regards to aspect of the sick role except**
- A. One is excused from his societal role
 - B. The doctor determines whether there is an illness or not
 - C. The person may continue self-management
 - D. The person is motivated to seek professional help.
- 26. Your patient has a fever, localized pain and purulent drainage from a wound. Your patient is in which stage of the infectious process**
- A. Incubation period
 - B. Prodromal stage
 - C. Full stage of illness
 - D. Convalescent period
- 27. Which of the following techniques best exhibits surgical asepsis?**
- A. Disinfecting an item before adding it to a sterile field
 - B. Allowing sterile gloved hands to fall below the waist
 - C. Clean gloves are used to change a wound dressing
 - D. Keeping the sterile field in eyesight
- 28. Which of the following instructions is the most important to give for a client who is about to be discharged and has a surgical wound?**
- A. Adjust your diet so it contains more fruits and vegetables.
 - B. Keep the wound dressing clean and dry.
 - C. Notify your physician if you notice edema, heat, or tenderness at the wound site.
 - D. Take prescribed medications.
- 29. The nurse assesses patients to determine their risk for health care associated infections. Which hospitalized patient is most at risk for developing this type of infection?**
- A. A 60 years old patient who smokes two packs of cigarette daily
 - B. A 40 years old patient who has a white blood cell count of 6.000/mm³
 - C. A 65 years old patient who has an indwelling catheter in place
 - D. A 60 years old patient who is vegetarian and slightly underweight

30. The nurse has just stuck herself with a syringe while dropping it into a sharps container that was too full in a client's room. Which of the following steps should be taken next, for a puncture?
- Complete an injury report.
 - Encourage bleeding.
 - Initiate first aid.
 - Wash/clean the area with soap and water
31. The registered nurse is conducting a staff in-service on Standard Precautions. Which of the following statements is correct and should be included in the presentation?
- Cut the needle off a syringe after using it to give a client an injection.
 - Change gloves between tasks on the same patient as necessary.
 - Keep visitors 3 feet from the infected patient
 - Wear a mask when in direct contact with all clients
32. A patient is admitted to the medical unit with an infected pressure ulcer. The most appropriate nursing action would be to place the client on precautions.
- Contact precaution
 - Air borne precautions
 - Droplet precautions
 - Standard precaution
- 33.....it is one of infection stages in which early signs and symptoms are present but they are vague and nonspecific.
- Full stage of illness
 - Incubation period
 - Convalescent period
 - Prodromal stage
- 34.....occurs when fine particles are suspended in the air for a long time or when dust particles contain pathogens, which can be inhaled by or deposited on the skin of a susceptible host.
- Vehicle transmission
 - Air-born transmission
 - Droplet transmission
 - Vector transmission
35. Which of the following is the exact order of the infection chain?
- Susceptible host
 - Portal of entry
 - Portal of exit
 - Etiologic agent
 - Reservoir
 - Mode of transmission
- 1,2,3,4,5,6
 - 5,4,2,3,6,1
 - 4,5, 3,6,2,1
 - 6,5,4,3,2,1
36. Contact transmission of infectious organism in the hospital is usually caused by:
- Urinary catheterization
 - Spread from patient to patient
 - Spread by cross contamination via hands of caregivers
 - caused by unclean instruments used by doctors and nurses

37. Which of the following is not true in implementing medical asepsis?
- Wash hands before and after contact
 - Keep soiled linen from touching the clothes
 - Shake the linen to remove dust
 - Practice good hygiene
38. All the following you should consider when dealing with disinfectants except
- Place bowls and containers upright
 - The object must be rinsed with tap water
 - Instruments must be opened, disassembled
 - Items should be dry before submerging
39. Nursing theories focus on the phenomena of nursing and nursing care. Which of the following is true of phenomena?
- They are aspects of reality that can be consciously sensed or experienced.
 - They convey the general meaning of concepts in a manner that fits the theory.
 - They are statements that describe concepts or connect two concepts that are factual.
 - They are mental formulations of an object or event that come from individual perceptual experience
40. Which theory categorized nursing activities into 14 components?
- Hildegard Peplau's theory
 - Jean Watson 's theory
 - Henderson's theory
 - M. Rogers's theory
41. Nursing's paradigm includes:
- Health, person, environment, and theory
 - Concepts, theory, health, and environment
 - Nurses, physicians, models, and client needs
 - The person, health, environment/situation, and nursing
42. On your morning rounds you note that one of your patients has a reddened area on both heels. This is evidence of which pressure ulcer stages
- Stage I
 - Stage II
 - Stage III
 - Stage IV
43. All the following is true concerning the physiological effects of immobility except
- Thrombus formation
 - Increased lung expansion
 - Foot drop
 - Weakness in respiratory muscle.
44. The nurse puts elastic stockings on a patient with bed rest. The nurse teaches the patient that the stockings are used to:
- Reducing orthostatic hypotension
 - Prevent muscular atrophy.
 - Ensure joint mobility and prevent contractures.
 - Promote venous return to the heart.

45. Which stage of pressure ulcer would just have partial thickness skin loss involving epidermis, dermis and subcutaneous tissue?
- Stage I
 - Stage II
 - Stage III
 - Stage IV
46. The nurse adheres to turning and position routine of immobilized patient, the main reason for this intervention is:
- Support comfort
 - Promote elimination
 - Maintain skin integrity
 - Facilitate respiratory function
47. Which complication of immobility would be of most concern?
- Constipation
 - Incontinence
 - Contractures
 - Hypertension
48. In assessing a patient's risk for complications of immobility, the nurse should be aware that there are several reasons for a person becoming immobile. A therapeutic reason may be
- To reduce the workload of the heart.
 - Lack of motivation.
 - Pneumonia
 - To decrease flexibility and strength
49. The nurse is teaching a patient how to prevent complications of being immobile. The nurse knows that the best medicine for immobility is:
- Dietary supplements.
 - Fluids.
 - Adequate fiber.
 - Exercise
50. Using Abraham Maslow's hierarchy of human needs, a nurse assigns highest priority to which client need?
- Security
 - Elimination
 - Safety
 - Belonging
51. Maslow's Hierarchy of basic human needs is useful when planning and implementing nursing care as it provides a structure for:
- Making accurate nursing diagnoses
 - Establishing priorities of care
 - Communicating concerns more concisely
 - Integrating science into nursing care
52. According to Maslow's hierarchy of needs, which of the following has the highest priority?
- Encouraging spiritual practices
 - Using electrical equipment properly
 - Encouraging visitors, cards and telephone calls
 - Encouraging a person to walk after surgery

53. All the following nursing activities can be used to meet patient's physical needs except

- A. Using skill when moving and ambulating patients
- B. Providing safe, comfortable and quiet environment.
- C. Measuring vital signs
- D. Inserting a urinary catheter

54. Which of the following are correct about Code of ethics regarding element of nurses and practice?

- A. The nurse maintains a standard of personal health
- B. The nurse takes appropriate action to safeguard individuals
- C. Developing a core of research-based professional knowledge.
- D. Individual receives sufficient information

55. An elderly patient falls at home and has a fractured hip. In the emergency room, the nurse acts to provide pain medication as soon as possible this is an act of:

- A. Fidelity
- B. Veracity
- C. Beneficence
- D. Autonomy

II: Write the letter "T" if the statement is true and "F" if the statement is false:
(20 Marks)

- 1 () Nonopioid analgesics are contraindicated with bleeding disorders.
- 2 () Biofeedback and acupuncture can be used as non-pharmacological approaches for management of pain.
- 3 () Cutaneous pain originates in tendons, ligaments, bones, blood vessels and nerves.
- 4 () Lymphocytic blood count is usually unaffected by infection.
- 5 () A suffix is a word element placed at the end of a root to change the meaning.
- 6 () Eye protection, a plastic apron, and gloves must be worn when glutaraldehyde liquid is made up, disposed of, and used.
- 7 () Gastrointestinal effects of immobility may include fecal impaction.
- 8 () When break through into deep fascia, muscle or bone; severity of pressure ulcer can be classified as Stage II.
- 9 () Chronic illness has a rapid onset of symptoms and last only relatively short time.
- 10 () Risk factors are something that increases a person's chance for illness or injury. The presence of risk factors doesn't mean that the disease will develop.
- 11 () Construct is a statement of relationship between concepts.
- 12 () Concept is a mental idea of a phenomenon.
- 13 () A theory is set of related statements that describes or explains phenomena in a systematic way.
- 14 () A safety and security need is the most basic in the hierarchy of needs.
- 15 () Self-esteem needs is the most higher need in Maslow's hierarchy of needs
- 16 () Fidelity refers to accuracy or conformity to truth.
- 17 () Root of medical term is a word element that is placed at the beginning of word.
- 18 () Factors influencing nursing practice include family structure, economics and women's movement.

- 19 () According to stages of illness; the client resumes former roles and responsibilities in dependent client role.
- 20 () Place the patient on lower dose of heparin therapy to decrease the risk of deep venous thromboembolisms.

III: Complete the following by Give scientific words: (25 Marks)

- 1..... It is a pharmaceutical agent that relieves pain.
- 2..... Is a procedure which achieves the removal or destruction of vegetative microorganisms to safe or relatively safe levels, but not necessarily the spores.
- 3..... Are used for all clients to protect against blood and body fluid transmission of potential infective organisms.
- 4..... the receiver response to message
- 5..... It is a form of communication which uses words either written or spoken.
- 6..... Is a conceptualization of aspect of nursing communicated for the describing, predicting, and prescribing nursing care.
- 7..... It is a principle of ethics which refers to the avoidance of harm or hurt.
- 8..... Is a set of ethical principles that are accepted by all members of a profession.
- 9..... An alteration in body functions resulting in a reduction of capacities or a shortening of the normal life span.
- 10..... Focuses on the early diagnosis and detection of disease, prevention of complications disabilities, promotes intervention health maintenance for individuals experiencing health problems.
- 11..... Written instructions about a client's health care preferences regarding life-sustaining measures (e.g. living will and durable power of attorney for health care).
- 12..... Is a valuable source of data that is used by all members of the health care team.
- 13..... Nurses communicate information about clients so that all team members can make appropriate decisions about their care.
- 14..... Is an intervention prescribed when the client is restricted to bed for therapeutic reasons.
- 15..... They are statement that describe connects or connect two concepts or that are factual they are accepted as truthful and represent value, beliefs or goals.
- 16..... Is state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.
- 17..... Is actual communication product from the source.
- 18..... Refers to the way in which the organism moves or is carried from the source's portal of exit.
- 19..... Is the process of exposing articles to steam under pressure long enough to kill all microorganisms and spores.

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4. Five types of reports made by nurses are:

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