



(University of Choice)

**MASINDE MULIRO UNIVERSITY OF
SCIENCE AND TECHNOLOGY
(MMUST)**

MAIN CAMPUS

UNIVERSITY EXAMINATIONS

2022/2023 ACADEMIC YEAR

2ND YEAR TRIMESTER 2 EXAMINATIONS

FOR THE DEGREE OF

BACHELOR OF SCIENCE IN NURSING

COURSE CODE: NCD 222

**COURSE TITLE: MEDICAL SURGICAL NURSING URINARY,
NERVOUS AND SKIN DISORDERS**

DATE: 8TH APRIL 2024

TIME: 11:30AM- 2:30PM

INSTRUCTIONS TO CANDIDATES

ANSWER ALL QUESTIONS

TIME: 3 HOURS

MMUST observes ZERO tolerance to examination cheating

This Paper Consists of Printed Pages. Please Turn Over.

SECTION A
MULTIPLE CHOICE QUESTIONS (60 MARKS)
ANSWER ALL QUESTIONS

1. A client with head trauma develops a urine output of 300 ml/hr, dry skin, and dry mucous membranes. Which of the following nursing interventions is the most appropriate to perform initially?
 - A. Evaluate urine specific gravity.
 - B. Anticipate treatment for renal failure.
 - C. Provide emollients to the skin to prevent breakdown.
 - D. Slow down the IV fluids and notify the physician.
2. When evaluating an ABG from a client with a subdural hematoma, the nurse notes the PaCO₂ is 30 mm Hg. Which of the following responses best describes this result?
 - A. Appropriate; lowering carbon dioxide (CO₂) reduces intracranial pressure (ICP).
 - B. Emergent; the client is poorly oxygenated.
 - C. Normal
 - D. Significant; the client has alveolar hypoventilation
3. A client who had a transsphenoidal hypophysectomy should be watched carefully for hemorrhage, which may be shown by which of the following signs?
 - A. Bloody drainage from the ears
 - B. Frequent swallowing
 - C. Guaiac-positive stools
 - D. Hematuria
4. A client comes into the ER after hitting his head in an MVA. He's alert and oriented. Which of the following nursing interventions should be done first?
 - A. Assess full ROM to determine extent of injuries.
 - B. Call for an immediate chest x-ray.
 - C. Immobilize the client's head and neck.
 - D. Open the airway with the head-tilt-chin-lift maneuver.
5. A client with a C6 spinal injury would most likely have which of the following symptoms?
 - A. Aphasia
 - B. Hemiparesis
 - C. Paraplegia

D. Tetraplegia

6. Which of the following interventions describes an appropriate bladder program for a client in rehabilitation for spinal cord injury?
 - A. Insert an indwelling urinary catheter to straight drainage.
 - B. Schedule intermittent catheterization every 2 to 4 hours.
 - C. Perform a straight catheterization every 8 hours while awake.
 - D. Perform Crede's maneuver to the lower abdomen before the client voids.
7. Nurse Harry documents the presence of a scab on a client's deep wound. The nurse identifies this as which phase of wound healing?
 - A. Inflammatory
 - B. Migratory
 - C. Proliferative
 - D. Maturation
8. A client calls the nurse with a complaint of sudden deep throbbing leg pain. What is the appropriate FIRST action by the nurse?
 - A. Apply ice to the extremity
 - B. Ambulate for several minutes
 - C. Maintain the client on bed rest
 - D. Administer analgesics
9. A male client is diagnosed with herpes simplex. Which statement about herpes simplex infection is true?
 - A. During early pregnancy, herpes simplex infection may cause spontaneous abortion or premature delivery.
 - B. Genital herpes simplex lesions are painless, fluid-filled vesicles that ulcerate and heal in 3 to 7 days.
 - C. Herpetic keratoconjunctivitis usually is bilateral and causes systemic symptoms
 - D. A client with genital herpes lesions can have sexual contact but must use a condom
10. In which skin disorder do T-cells induce a sudden increase in cytokines leading to hyperplasia of skin cells resulting in raised skin plaques?
 - A. Dermatitis
 - B. Eczema
 - C. Psoriasis
 - D. Impetigo
11. Nurse Terry plans to administer dexamethasone cream to a client who has dermatitis over the anterior chest. How should the nurse apply this topical agent?

- A. With a circular motion, to enhance absorption.
 - B. With an upward motion, to increase blood supply to the affected area.
 - C. In long, even, outward, and downward strokes in the direction of hair growth
 - D. In long, even, outward, and upward strokes in the direction opposite hair growth.
12. Which of the following would the nurse describe to the patient is development of a sprain?
- A. Direct trauma to skin with rupture of underlying micro-circulation
 - B. Shearing force to the muscles
 - C. Damage to tendons
 - D. Damage to ligaments
13. When planning care for a male client with burns on the upper torso, which nursing diagnosis should take the highest priority?
- A. Ineffective airway clearance related to oedema of the respiratory passages
 - B. Impaired physical mobility related to the disease process
 - C. Disturbed sleep pattern related to facility environment
 - D. Risk for infection related to breaks in the skin
14. The micturition reflex center is located in the:
- A. Kidney
 - B. Cerebrum.
 - C. Sacral segment of the spinal cord
 - D. Hypothalamus
15. The primary morphology of a macule-type lesion is
- A. Flat and non-palpable
 - B. Elevated and palpable
 - C. Lesion that can be either elevated or depressed
 - D. Firm lesion that extends into subcutaneous tissue
16. Which of the following symptom is a sign of acute renal failure for a patient who is day one post-operative following surgery for abdominal aortic aneurysm repair?
- A. Anuria
 - B. Diarrhoea
 - C. Oliguria
 - D. Vomiting

17. The client complains of fever, perineal pain, and urinary urgency, frequency, and dysuria. To assess whether the client's problem is related to bacterial prostatitis, the nurse would look at the results of the prostate examination, which should reveal that the prostate gland is:
- A. Tender, indurated, and warm to the touch
 - B. Soft and swollen
 - C. Tender and oedematous with echymosis
 - D. Reddened, swollen, and boggy
18. You're developing a care plan with the nursing diagnosis risk for infection for your patient that received a kidney transplant. A goal for this patient is to:
- A. Remain afebrile and have negative cultures.
 - B. Resume normal fluid intake within 2 to 3 days.
 - C. Resume the patient's normal job within 2 to 3 weeks
 - D. Try to discontinue cyclosporine as quickly as possible
19. What is the priority nursing diagnosis with your patient diagnosed with end-stage renal disease?
- A. Activity intolerance
 - B. Fluid volume excess
 - C. Knowledge deficit
 - D. Pain
20. Which of the following symptoms do you expect to see in a patient diagnosed with acute pyelonephritis?
- A. Jaundice and flank pain
 - B. Costovertebral angle tenderness and chills
 - C. Burning sensation on urination
 - D. Polyuria and nocturia
21. What is the appropriate infusion time for the dialysate in your 38 year old patient with chronic renal failure undergoing peritoneal dialysis?
- A. 15 minutes
 - B. 30 minutes
 - C. 1 hour
 - D. 2 to 3 hours

22. An 18 year old student is admitted with dark urine, fever, and flank pain and is diagnosed with acute glomerulonephritis. Which would most likely be in this student's health history?
- A. Renal calculi
 - B. Renal trauma
 - C. Recent sore throat
 - D. Family history of acute glomerulonephritis
23. You expect a patient in the oliguric phase of renal failure to have a 24 hour urine output less than:
- A. 50ml
 - B. 200ml
 - C. 400ml
 - D. 800ml
24. A patient is experiencing which type of incontinence if she experiences leaking urine when she coughs, sneezes, or lifts heavy objects?
- A. Overflow
 - B. Reflex
 - C. Stress
 - D. Urge
25. The nurse is caring for a client following a kidney transplant. The client develops oliguria. Which of the following would the nurse anticipate to be prescribed as the treatment of oliguria?
- A. Encourage fluid intake
 - B. Administration of diuretics
 - C. Irrigation of Foley catheter
 - D. Restricting fluids
26. During a client's urinary bladder catheterization, the bladder is emptied gradually. The best rationale for the nurse's action is that completely emptying an over distended bladder at one time tends to cause:
- A. Renal failure
 - B. Abdominal cramping
 - C. Possible shock
 - D. Atrophy of bladder musculature
27. A client is receiving a radiation implant for the treatment of bladder cancer. Which of the following interventions is appropriate?

- A. Flush all urine down the toilet.
 - B. Restrict the client's fluid intake.
 - C. Place the client in a semi-private room
 - D. Monitor the client for signs and symptoms of cystitis.
28. Which of the following is the correct sequence in which urine flows through the kidney toward the urinary bladder?
- A. Renal pelvis, major calyx, minor calyx, papillary duct, ureter.
 - B. Papillary duct, minor calyx, major calyx, renal pelvis, ureter.
 - C. Minor calyx, major calyx, papillary duct, renal pelvis, ureter.
 - D. Papillary duct, major calyx, minor calyx, ureter, renal pelvis
29. Which of the following diagnostic tests is definitive for diagnosis of Herpes zooster infection
- A. Patch test
 - B. Skin biopsy
 - C. Culture of the lesion
 - D. Wood light examination
30. When assessing a lesion diagnosed as malignant melanoma, the nurse in charge most likely expects to note which of the following
- A. irregular shaped lesion
 - B. A small papule with a dry, rough scale
 - C. A firm, nodular lesion topped with crust
 - D. A pearly papule with a central crater and a waxy border
31. The nurse determines that which of the following individuals is at the greatest risk for the development of an integumentary disorder?
- A. An adolescent
 - B. An older female
 - C. A physical education teacher
 - D. An outdoor construction worker
32. A male client scheduled for a skin biopsy is concerned and asks the nurse how painful the procedure is. The appropriate response by the nurse is:
- A. "There is no pain associated with this procedure"
 - B. "The local anesthetic may cause a burning or stinging sensation"
 - C. A preoperative medication will be given so you will be sleeping and will not feel any pain"
 - D. "There is some pain, but the physician will prescribe an opioid analgesic following the procedure"

33. The nurse is assessing a male client admitted with second-and third-degree burns on the face, arms, and chest. Which finding indicates a potential problem?
- A. Partial pressure of arterial oxygen (PaO₂) value of 80 mm Hg
 - B. Urine output of 20 ml/hour
 - C. White pulmonary secretions
 - D. Rectal temperature of 100.6° F (38° C)
34. A female client exhibits purplish bruises to the skin after a fall. The nurse would document this finding most accurately using which of the following terms?
- A. Purpura
 - B. Petechiae
 - C. Ecchymosis
 - D. Erythema
35. A female client with cellulitis of the lower leg has had cultures done on the affected area. The nurse reading the culture report understands that which of the following organisms is not part of the normal flora of the skin?
- A. Staphylococcus epidermidis
 - B. Staphylococcus aureus
 - C. Escherichia coli (E. coli)
 - D. Candida albicans
36. A nurse is reviewing the medical record of a male client to be admitted to the nursing unit and notes documentation of reticular skin lesions. The nurse expects that these lesions will appear to be:
- A. Ring-shaped
 - B. Linear
 - C. Shaped like an arc
 - D. Net-like appearance
37. During the client's dialysis, the nurse observes that the solution draining from the abdomen is consistently blood-tinged. The client has a permanent peritoneal catheter in place. Which interpretation of this observation would be correct?
- A. Bleeding is expected with a permanent peritoneal catheter.
 - B. Bleeding indicates abdominal blood vessel damage.
 - C. Bleeding can indicate kidney damage.
 - D. Bleeding is caused by too-rapid infusion of the dialysate
38. During a client's urinary bladder catheterization, the bladder is emptied gradually. The best rationale for the nurse's action is that completely emptying an over distended bladder at one time tends to cause:

- A. Renal failure
 - B. Abdominal cramping
 - C. Possible shock
 - D. Atrophy of bladder musculature
39. A 72-year old male client with a history of BPH presents to the emergency department extremely uncomfortable and has been unable to void for the past 12 hours. The best method for the nurse to use when assessing for bladder distention in a male client is to check for:
- A. A rounded swelling above the pubis.
 - B. Dullness in the lower left quadrant.
 - C. Rebound tenderness below the symphysis.
 - D. Urine discharge from the urethral meatus.
40. A client has urge incontinence. Which of the following signs and symptoms would the nurse expect to find in this client?
- A. Inability to empty the bladder.
 - B. Loss of urine when coughing.
 - C. Involuntary urination with minimal warning.
 - D. Frequent dribbling of urine.
41. The nurse is conducting a postoperative assessment of a client on the first day after renal surgery. Which of the following findings would be most important for the nurse to report to the physician?
- A. Temperature, 99.8°F
 - B. Urine output, 20 ml/hour
 - C. Absence of bowel sounds
 - D. A 2×2 inch area of sero sanguineous drainage on the flank dressing.
42. The most serious complication with regards to the AV shunt is:
- A. Septicemia
 - B. Clot formation
 - C. Exsanguination
 - D. Vessel sclerosis
43. Which of the following diets would be most appropriate for a client with chronic renal failure?
- A. High carbohydrate, high protein
 - B. High calcium, high potassium, high protein
 - C. Low protein, low sodium, low potassium

D. Low protein, high potassium

44. A client who is admitted to the ER for head trauma is diagnosed with an epidural hematoma. The underlying cause of epidural hematoma is usually related to which of the following conditions?
- A. Laceration of the middle meningeal artery.
 - B. Rupture of the carotid artery.
 - C. Thromboembolism from a carotid artery.
 - D. Venous bleeding from the arachnoid space.
45. A 23-year-old client has been hit on the head with a baseball bat. The nurse notes clear fluid draining from his ears and nose. Which of the following nursing interventions should be done first?
- A. Position the client flat in bed.
 - B. Check the fluid for dextrose with a dipstick.
 - C. Suction the nose to maintain airway patency.
 - D. Insert nasal and ear packing with sterile gauze.
46. A 40-year-old paraplegic must perform intermittent catheterization of the bladder. Which of the following instructions should be given?
- A. "Clean the meatus from back to front."
 - B. "Measure the quantity of urine."
 - C. "Gently rotate the catheter during removal."
 - D. "Clean the meatus with soap and water."
47. Which neurotransmitter is responsible for many of the functions of the frontal lobe?
- A. Dopamine
 - B. GABA
 - C. Histamine
 - D. Norepinephrine
48. A client arrives at the ER after slipping on a patch of ice and hitting her head. A CT scan of the head shows a collection of blood between the skull and dura mater. Which type of head injury does this finding suggest?
- A. Subdural hematoma
 - B. Subarachnoid hemorrhage
 - C. Epidural hematoma
 - D. Contusion

49. Which of the following nursing interventions is appropriate for a client with an ICP of 20 mm Hg?
- A. Give the client a warming blanket.
 - B. Administer low-dose barbiturate.
 - C. Encourage the client to hyperventilate.
 - D. Restrict fluids.
50. Which technique is applied to open the airway when there is suspected cervical spine injury?
- A. By inserting a nasopharyngeal airway.
 - B. By inserting an oropharyngeal airway.
 - C. By performing a jaw thrust maneuver.
 - D. By performing the head-tilt, chin-lift maneuver
51. The client with a head injury has been urinating copious amounts of dilute urine through the Foley catheter. The client's urine output for the previous shift was 3000 ml. Which of the following drugs should the nurse administer?
- A. Desmopressin (DDAVP, Stimate)
 - B. Dexamethasone (Decadron)
 - C. Dexamethasone (Decadron) C. ethacrynic acid (Edecrin)
 - D. Mannitol (Osmitrol)
52. The nurse is caring for the client in the ER following a head injury. The client momentarily lost consciousness at the time of the injury and then regained it. The client now has lost consciousness again. The nurse takes quick action, knowing this is compatible with:
- A. Skull fracture
 - B. Concussion
 - C. Subdural hematoma
 - D. Epidural hematoma
53. The nurse is caring for a client who suffered a spinal cord injury 48 hours ago. The nurse monitors for GI complications by assessing for:
- A. A flattened abdomen.
 - B. Hematest positive nasogastric tube drainage.
 - C. Hyperactive bowel sounds.
 - D. A history of diarrhea.

54. The nurse is caring for a client admitted with spinal cord injury. The nurse minimizes the risk of compounding the injury most effectively by
- A. Keeping the client on a stretcher.
 - B. Logrolling the client on a firm mattress.
 - C. Logrolling the client on a soft mattress.
 - D. Placing the client on a Stryker frame
55. A client is at risk for increased ICP. Which of the following would be a priority for the nurse to monitor?
- A. Unequal pupil size
 - B. Decreasing systolic blood pressure
 - C. Tachycardia
 - D. Decreasing body temperature
56. Which of the following respiratory patterns indicate increasing ICP in the brain stem?
- A. Slow, irregular respirations
 - B. Rapid, shallow respirations
 - C. Asymmetric chest expansion
 - D. Nasal flaring
57. Which findings should the nurse expect in a 36-year-old man sustains a C6 fracture with spinal cord transaction ?
- A. Quadriplegia with gross arm movement and diaphragmatic breathing.
 - B. Quadriplegia and loss of respiratory function.
 - C. Paraplegia with intercostal muscle loss.
 - D. Loss of bowel and bladder control.
58. In planning the care for a client who has had a posterior fossa (infratentorial) craniotomy, which of the following is contraindicated when positioning the client?
- A. Keeping the client flat on one side or the other.
 - B. Elevating the head of the bed to 30 degrees.
 - C. Logrolling or turning as a unit when turning.
 - D. Keeping the head in a neutral position.
59. Which of the following findings would be ABSENT in a client has been pronounced brain dead
- A. Decerebrate posturing
 - B. Dilated nonreactive pupils
 - C. Deep tendon reflexes
 - D. Absent corneal reflex

60. The production of incoherent, jumbled speech is known as

- A. Nonfluent aphasia
- B. Disruptive aphasia
- C. Fluent aphasia
- D. Anomic aphasia

SECTION B

SHORT ANSWER QUESTIONS (20 Marks)

ANSWER ALL QUESTIONS

1. Explain the nursing management of a patient with bacterial meningitis (5marks)
2. Explain the pathophysiology of multiple sclerosis (6 marks)
3. State any four (4) clinical manifestations of acne vulgaris (4 marks)
4. Explain any five (5) indications for urinary diversion (5 marks)

SECTION C

LONG ANSWER QUESTIONS (20 MARKS)

ANSWER ALL QUESTIONS

1. Using the nursing process, describe the management of a patient on dialysis (20 marks)