

UNIVERSITY OF FORT HARE

MEDICAL AND SURGICAL NURSING

NBG 222 E

SUPPLEMENTARY EXAMINATIONS

JANUARY 2020

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Time: 3 HOURS

Subject: NBG 222 E

Marks: 100

This paper consists of 5 pages including the cover page

Internal Examiners

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INSTRUCTIONS

1. Answer all four question
2. Write clearly and legibly

QUESTION 1.

1.1 Choose the correct answer for each statement and write only the number and letter e.g. 1.1.1. d (5)

1.1.1. A fasting blood sugar should be taken before meals and range between:

- a. 10 – 12mmol/l
- b. 4 – 5.5mmol/l
- c. 1 -1.5mmol/l
- d. 12 -15 mmol/l

1.1.2. A patient diagnosed with type 1 Diabetes mellitus will have

- a. No production of insulin
- b. Partial production of insulin
- c. Be insulin resistant
- d. Will have no effect on the production of insulin

1.1.3. An excessive fluid loss to excrete excess glucose is known as:

- a. Polydipsia
- b. Polyuria
- c. Polyphagia
- d. Glycosuria

1.1.4. Common diagnostic investigations for pyelonephritis include

- a. M&S of urine, full blood count
- b. Blood urea and ALT
- c. Creatinine and specific gravity of urine
- d. Culture and sensitivity of urine

1.1.5. The most common and dangerous complication of portal hypertension is:

- a. Ascites
- b. Cardiac arrest
- c. Hepatic coma
- d. oesophageal varicities.

1.1.6. In rheumatic fever one of the sign and symptoms are

- a. Joint pains or joint inflammation in the small joints e.g. fingers and toes
- b. Will affect the functioning of the pancreases
- c. Thrombocytopenia
- d. Joint pains or joint inflammation in the big joints e.g. knees, elbows, shoulders

1.1.7. In Rheumatic fever, a patient may experience jerky movements, ataxia and weakness this is known as:

- a. Parkinson's
- b. Subcutaneous nodules

- c. Chorea
- d. Epileptic fit

1.1.8. Hepatitis A can be transmitted through:

- a. Droplet infection
- b. Oral to oral contact
- c. Sexual contact
- d. Poor sanitation

1.1.9. Hepatitis B can be transmitted through:

- a. Droplet infection
- b. Oral to oral contact
- c. Sexual contact
- d. Poor sanitation

1.1.10. People at high risk of contracting Hepatitis D are:

- a. Travellers
- b. Drug users
- c. Immigrants
- d. A person living with someone who is infected with Hepatitis D.

1.2. Match different condition in column A to the signs and symptoms in column B.

You may only use the sign and symptom once but you must choose two signs and symptoms for each condition. Some conditions may share signs and symptoms but choose those that are unique to the condition first. Only write the question number and the answer chosen in column B. e.g. 1.2.1. M,N (6)

1.2.1. Hyperthyroidism	A. Polyuria
1.2.2. Hypothyroidism	B. Uraemia
1.2.3. Renal Failure	C. Haematuria
1.2.4. Glomerular nephritis	D. BUN and creatinine levels rise
1.2.5. Pyelonephritis	E. Hyperglycaemia
1.2.6. Diabetic Ketone acidosis	F. Pyrexia
	G. Dehydration
	H. Constipation
	I. Oedema
	J. Palpitations
	K. Sensitive to cold
	L. Sensitive to heat

1.3. Miss N., a 44-year-old woman is admitted to the hospital with unexplained weight loss despite increase in appetite, a fine tremor and irritability. On examination, you notice an enlarged gland on the trachea and a startled look on her eyes. She is diagnosed with hyperthyroidism.

1.3.1 Describe the pathophysiology of hyperthyroidism for Miss N. (5)

1.3.2. Explain to Miss N. which diagnostic test she would need monitored and how often to ensure she is correctly treated. (3)

1.3.3. Outline the medical management of hyperthyroidism (1)

1.3.4. Hyperthyroidism has many complications, which include a thyroid crisis/storm, describe the treatment for a thyroid crisis/storm (5)

(25)

QUESTION 2

2.1. John, a 42-year-old male is complaining of frequent micturition, tiredness and loss of weight even though he is always feeling hungry and thirsty. His blood glucose level is 18 mmol/l. His diagnosis is Diabetes type 2.

2.1.1. Differentiate between Diabetes type 1 and diabetes type 2 according to definition. (3)

2.1.2. Describe the pathophysiology of John's condition (diabetes type 2). (6)

2.1.3. Outline complications of the Diabetes mellitus. (4)

2.1.4. Discuss the health Education you would give regarding dietary modification and rationalise the changes for controlling blood glucose levels. (6)

2.1.5. Draw a care plan for a patient with diabetes mellitus with regards to risk of infection (6)

(25)

QUESTION 3

3.1. Peter, a known alcoholic is admitted with cirrhosis of the liver. Discuss his condition according to the following headings:

3.1.1. Describe the pathophysiology of cirrhosis of the liver. (5)

3.1.2. Discuss the nursing management of this patient. (6)

3.2. Nathan, a patient in your ward was admitted after experiencing palpitations after playing rugby. He gives a history of having a sore throat 2 weeks ago. His diagnosis is Rheumatic Fever.

3.2.1. Discuss the management of this patient with rheumatic fever (6)

3.2.2. Identify the diagnostic tests to be performed on this patient (2)

- 3.2.3. Draw a care plan with regards to:
Decreased cardiac output related to the disturbances on the closure of the mitral valve. (6)

(25)

QUESTION 4

- 4.1. Define the following terms in connection with renal conditions. (5)
- 4.1.1. Stress incontinence (1)
 - 4.1.2. Urolithiasis (1)
 - 4.1.3. Pyelonephritis (1)
 - 4.1.4. Residual urine (1)
 - 4.1.5. Urine culture and sensitivity (1)

- 4.2. Urinary tract infection causes severe discomfort and may lead to serious renal complications if it is not early and properly treated

4.2.1. Describe the risk factors of urinary tract infection (5)

4.2.2. Describe the signs and symptoms of Urinary Tract infection (5)

- 4.3. Another patient in your ward is Mrs. Lee, she has been diagnosed with pyelonephritis.

4.3.1. Describe the nursing interventions, which will be implemented when taking care of Mrs. Lee. (6)

4.3.2. Outline the health education you would give Mrs, Lee (4)

(25)

[TOTAL 100]