



# MERU UNIVERSITY OF SCIENCE AND TECHNOLOGY

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UNIVERSITY EXAMINATIONS 2024/2025

THIRD YEAR FIRST SEMESTER EXAMINATION FOR THE DEGREE OF BACHELOR  
OF SCIENCE IN NURSING

**NND 3325 – MEDICAL SURGICAL NURSING III**

**DATE: JANUARY 2025**

**TIME: 3 HOURS**

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**INSTRUCTIONS:** *All questions are compulsory*

Ensure that all your answers are properly numbered

Part 1 Multiple Choice Questions (MCQs): Write the correct answer on the space provided in the answer booklet. Each MCQ is one mark.

Part 11: Short Answer Questions-Answer questions following each other on the answer booklet

Part 111: Long Answer Questions-Answer

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**SECTION A: MCQ (20 MARKS)**

1. On reading the urinalysis results of a dehydrated patient, the nurse would expect to find;
    - A. A PH Of 8.4
    - B. Red Blood Cells (RBCs) of 4/hpf.
    - C. Color: yellow, cloudy.
    - D. Specific gravity of 1.035.
  2. Normal finding expected by the nurse on physical assessment of the urinary system include;
    - A. Auscultation of renal artery bruit.
    - B. Costovertebral angle (CVA) tenderness elicited by a kidney punch.
    - C. No CVA tenderness elicited by a kidney punch.
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- D. Palpable bladder to the level of the pubic symphysis.
3. A diagnostic study that indicates renal blood flow, glomerular filtration, tubular function, and excretion is a(n);
    - A. Intravenous Pyelogram (IVP).
    - B. Voiding Cystourethrogram (VCUG).
    - C. Renal scan.
    - D. Loopogram.
  4. Diuretics are ordered for a patient. What would be the best time of day for the nurse to schedule this medication?
    - A. Anytime
    - B. Nighttime
    - C. Morning
    - D. Noon
  5. A patient has an indwelling urinary catheter, and urine is leaking from a hole in the collection bag. Which nursing intervention would be the MOST appropriate?
    - A. Cover the hole with tape.
    - B. Remove the catheter and collection bag, replace the bag, and insert a new catheter, using sterile technique.
    - C. Disconnect the drainage bag from the catheter and replace it with a new bag.
    - D. Place a towel under the bag to prevent spillage of urine on the floor, which could cause the patient to slip and fall.
  6. A patient diagnosed with chronic renal failure is informed that he must start hemodialysis. During patient teaching, the nurse should instruct the patient to:
    - A. Follow a high-potassium diet.
    - B. Strictly follow the hemodialysis schedule.
    - C. Recognize that the disorder will cause lifestyle changes.
    - D. Use alcohol to clean the skin because of integumentary changes.
  7. A nurse is teaching a patient with chronic kidney disease which foods to avoid. It would be most accurate for the nurse to teach the patient to avoid foods high in:
    - A. Monosaccharides.
    - B. Disaccharides.
    - C. Iron.



D. Protein

8. A nurse is planning a teaching session for a female patient who had a Urinary Tract Infection (UTI). Which point should the nurse include?
- A. Limit fluid intake to reduce the need to urinate.
  - B. Take the prescribed antibiotic until symptoms subside.
  - C. Notify the health practitioner if urinary urgency, burning, frequency, or difficulty occurs.
  - D. Wear only nylon underwear to reduce the chance of irritation.
9. A nurse is caring for a patient with acute kidney injury. The nurse should expect hypertonic glucose, insulin infusions, and sodium bicarbonate to be used to treat:
- A. Hypernatremia.
  - B. Hypokalemia.
  - C. Hypercalcemia.
  - D. Hyperkalemia.
10. A nurse is performing an assessment on an elderly client. Which assessment data would indicate a potential complication associated with the skin?
- A. Crusting
  - B. Wrinkling
  - C. Deepening of expression lines
  - D. Thinning and loss of elasticity of the skin
11. Which procedure would best minimize negative effects associated with relocating an older person from one nursing home to another?
- A. Involve the person in planning the move
  - B. Accomplish the relocation as soon as possible
  - C. Ensure that the new nursing home differs substantially from the old one
  - D. Anticipate the person's needs and make decisions accordingly
12. An 88-year-old woman in a long-term care facility is having difficulty remembering where her room is. Which of the following solutions would best help her?
- A. Put a light-blue painting on the door to her room
  - B. Assign her a buddy who will help her when she gets lost
  - C. Put her picture and her name in large letters on the door to her room
  - D. Assign her the room next to the nurses' station so that the staff can assist her



13. A nurse is preparing a client environment that will reduce the chance of falls. Which action is appropriate?
- A. Keep the half side rails down on the side the client uses to get out of bed
  - B. Beep the lights down since glare bothers some clients
  - C. Call housekeeping to clean up the spilled water
  - D. Make sure that a path is cleared to assist the client when walking
14. A nurse enters the room of an adult who is having a grand mal seizure. Which initial action is appropriate?
- A. Put a padded tongue blade in the client's mouth
  - B. Restrain the client
  - C. Turn the client's head to the side
  - D. Call the physician immediately
15. Mr. Job was admitted with traumatic brain injury and is on mannitol IV. What should the nurse monitor closely regarding this type of medication?
- A. Deep tendon reflexes
  - B. Urine output
  - C. Level of orientation
  - D. Pulse rate
16. The client asks, "What does an elevated Prostate Specific Antigen (PSA) test mean?" On which scientific rationale would the nurse base the response?
- A. An elevated PSA can result from several different causes
  - B. An elevated PSA can be only from prostate cancer
  - C. An elevated PSA can be diagnostic for testicular cancer
  - D. An elevated PSA is the only test used to diagnose benign prostatic hypertrophy
17. A young adult patient is admitted with a diagnosis of Guillain-Barre syndrome. Which nursing action will be of highest priority as the nurse plans care?
- A. Range-of-motion exercises
  - B. Monitor respirations
  - C. Turn every two hours
  - D. Provide emotional support



18. When performing a comprehensive geriatric assessment of an older adult, the nurse should focus on the patient's:
- A. Chronic illnesses
  - B. Immunologic function
  - C. Physical signs of aging
  - D. Functional abilities
19. Aging affects respiratory function because of all of the following except:
- A. The amount of exchanged air is decreased
  - B. Mucous membranes become drier and more fragile
  - C. Chest wall and airways become less rigid and more elastic
  - D. Decrease in efficiency of the immune system
20. The nurse is reviewing laboratory result of a patient with nephrotic syndrome. The data is likely to show:
- A. Proteinuria and leucopenia.
  - B. Proteinuria, hyperalbuminemia.
  - C. Hypoalbuminemia, proteinuria.
  - D. Hypoalbuminemia, leucopenia.

### **SECTION B: SHORT ANSWER QUESTIONS (40 MARKS)**

1. State six (6) complications or problems associated with urine incontinence among the adult patients. (6marks)
2. Explain the pathophysiology of traumatic brain injury. (5marks)
3. State five (5) indications of urinary catheterization. (5marks)
4. Outline six (6) basic competencies necessary for nurses to provide optimum care to older adults and their families. (6marks)
5. a). State five (5) clinical features in a patient with meningitis. (5marks)  
b) State two (2) actual nursing diagnoses for a patient diagnosed with bacterial meningitis. (4marks)
6. state four (4) health promotion strategies for a patient with epilepsy. (4marks)
7. State five (5) forms of elderly abuse. (5marks)



## SECTION C: LONG ANSWER QUESTION (40 MARKS)

1. Mr. Walter, 50years old, is brought to the hospital and is diagnosed with Cerebrovascular Accident (CVA).
  - a) State four (4) clinical manifestations of Cerebrovascular accident (4marks)
  - b) State six (6) risk factors for CVA (6marks)
  - c) Develop a nursing care plan for Mr. Walter; include at least one (1) actual nursing diagnosis and at least two (2) nursing interventions for the nursing diagnosis and a rationale for each intervention. Do not evaluate the nursing care. (10marks)
2. Mr. Kelly has been received from operation suite where suprapubic prostatectomy was performed.
  - a) List six (6) signs and symptoms of BPH. (3 marks)
  - b) Explain pathophysiology of BPH. (5 marks)
  - c) Describe specific nursing interventions for Mr. Kelly post-prostatectomy. (12 marks)

