



# MERU UNIVERSITY OF SCIENCE AND TECHNOLOGY

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## UNIVERSITY EXAMINATIONS 2021/2022

FIRST YEAR, THIRD SEMESTER SPECIAL/SUPPLEMENTARY EXAMINATION FOR  
BACHELOR OF SCIENCE IN NURSING

### NND 3135: FUNDAMENTALS OF NURSING PRACTICE II

**DATE: OCTOBER 2023**

**TIME: 3 HOURS**

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#### INSTRUCTIONS:

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 the questions on the answer booklet

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#### SECTION A: MULTIPLE CHOICE QUESTIONS (20 MARKS)

1. When using a glass thermometer at home to accurately assess axillary temperature, the nurse should tell the parent of a 1½ year-old child to:
    - a) Hold the thermometer at the bulb end
    - b) Cleanse the thermometer in hot water
    - c) Assess the thermometer for 5 minutes
    - d) Allow the child to hold the thermometer
  2. The student nurse is assessing the vital signs of a 10-year-old client. The expected values for a client of this age are:
    - a) P=140 beats/min, R=50 breaths/min, BP=80/50 mm Hg
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- b) P=100 beats/min, R=40 breaths/min, BP=90/60 mm Hg
  - c) P=80 beats/min, R=22 breaths/min, BP=110/70 mm Hg
  - d) P=60 beats/min, R=12 breaths/min, BP = 160/90 mm Hg
3. A client who is unconscious needs frequent mouth care. When performing a mouth care, the best position of a client is:
- a) Fowler's position
  - b) Side lying
  - c) Supine
  - d) Trendelenburg
4. A client is hospitalized for the first time, which of the following actions ensure the safety of the client?
- a) Keep unnecessary furniture out of the way
  - b) Keep the lights on at all time
  - c) Keep side rails up at all time
  - d) Keep all equipment out of view
5. When changing a sterile abdominal dressing, which nursing would violate the principles of asepsis?
- a) Donning clean gloves to remove the soiled dressing
  - b) Placing the soiled dressing in an infectious waste container
  - c) Performing hand hygiene before donning sterile gloves
  - d) Cleaning the wound from the outer edge toward the center
6. A nurse should notify the physician if a client with an indwelling catheter has a urine output of
- a) 24 ml in 1 hour
  - b) 64 ml in 2 hours
  - c) 90 ml in 3 hours
  - d) 125 ml in 4 hour
7. Before regor mortis occurs, the nurse is responsible for:
- a) Providing a complete bath and dressing change
  - b) Placing one pillow under the body's head and shoulders
  - c) Removing the body's clothing and wrapping the body in a shroud
  - d) Allowing the body to relax normally

8. Which of the following patients would most likely develop a pressure ulcer from shearing forces?
- a) A patient sitting in a chair who slides down
  - b) A patient who lifts himself up on his elbows
  - c) A patient who lies on wrinkled sheets
  - d) A patient who must remain on his back for long periods of time
9. When performing nursing actions associated with successful tube feedings, the nurse should do which of the following?
- a) Check tube placement by adding food dye to the tube feed as a means of detecting aspirated fluid
  - b) Check the residual before each feeding or every 4 to 8 hours during a continuous feeding
  - c) Assess for bowel sounds at least four times per shift to ensure the presence of peristalsis and a functional intestinal tract
  - d) Prevent contamination during enteral feedings by using an open system
10. Which of the following nursing interventions would be least effective when trying to maintain safety for patient with an undwelling catheter?
- a) Maintain a closed drainage system
  - b) Restrict fluid intake
  - c) Apply a topic antibiotic ointment to urinary meatus
  - d) Report signs of infection immediately
11. Which nursing action best determines if a client has a fecal impaction?
- a) Auscultating the bowel sounds
  - b) Measuring the abdominal girth
  - c) Inserting a finger within the rectum
  - d) Assessing for diarrhea
12. A fracture bedpan should be used for the patient who:
- a) Has a spinal cord injury
  - b) Is on bedrest
  - c) Has dementia
  - d) Is obese

13. An observation that indicates need for additional teaching for a nurse who performing perineal care
- Uses a clean portion of the washcloth for each stroke
  - Wipes from the pubis to the rectum
  - Uses clean gloves
  - Does not retract the foreskin
14. The nurse is to administer 0.5mL of a medication by intramuscular injection to an older emaciated client. Which is the most appropriate for the nurse to use?
- A tuberculin syringe, 25-27 gauge, 1/4-to 5/8-inch needle
  - Two 3-mL syringes, 20-23 gauge, 1½ inch needle
  - 2-mL syringe, 25 gauge, 5/8-inch needle
  - 2-mL syringe, 20-23 gauge, 1-inch needle
15. The best indication of proper placement of a nasogastric tube in the stomach is;
- Client is unable to speak
  - Client gags during insertion
  - pH of the aspirate is less than 5
  - fluid is easily instilled into the tube
16. The major objectives of this diet are to prevent dehydration and minimize stimulation of the gastrointestinal tract
- Diet as tolerated
  - Full liquid diet
  - Soft diet
  - Clear liquid diet
17. An action that represents the appropriate nursing management of a client wearing a condom catheter?
- Ensure that the tip of the penis fits snugly against the end of the condom
  - Check the penis for adequate circulation 30 minutes after applying
  - Change the condom every 8 hours
  - Tape the collecting tubing to the lower abdomen
18. The purpose of the oxygen reservoir bag in the partial rebreather mask is to
- Encourage CO<sub>2</sub> rebreathing
  - Reduce the fraction of oxygen by recycling the expired oxygen

- c) Allow a precise method for controlling the client's fraction of oxygen
  - d) Allow client to re-breathe the first third of exhaled air
19. The husband of a patient who has died cannot express his feeling of loss and at times denies them. His bereavement has extended over a lengthy period. Which of the following types of grief would the husband be experiencing?
- a) Anticipatory grief
  - b) Inhibited grief
  - c) Normal grief
  - d) Unresolved grief
20. When determining a site for an IV infusion, the nurse should consider which of the following guidelines?
- a) Scalp veins should be selected for infants because of their accessibility
  - b) Antecubital veins should be used for long term infusions
  - c) Veins in the leg should be used to keep the arms free for their patient's use
  - d) Veins in surgical areas should be used to increase the potency of medication

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

1. Enumerate five factors that may influence an individual's nutritional needs  
(5 marks)
2. Outline five ways a nurse uses body mechanics in the patient care environment  
(5 marks)
3. Explain three nursing interventions in the management of clients with urinary incontinence  
(6 marks)
4. Identify five roles of a nurse in the administration of a blood transfusion (5 marks)
5. Outline five nursing responsibilities regarding care of a client with a newly created colostomy  
(5 marks)
6. Explain four nursing interventions to break the chain of infection with a ward  
(8 marks)
7. Explain the cardiac chain of survival in first aid  
(6 marks)

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

1. Mrs Lisu is to receive an intravenous injection of Cefuroxime 650 mg via the intramuscular route as per the medication order.
  - a) State two advantages and two disadvantages of intravascular route of medication administration (4 marks)
  - b) Describe the medication administration procedure you will undertake. Note: Cefuroxime formulation is in a vial containing 1000mg of powdered drug. A single vial is diluted with 10mls of sterile injection water (16 marks)
2. A male patient who was admitted to a surgical ward has been discharged following a successful abdominal surgery
  - a) Explain a nurse's responsibilities during patient discharge (16 marks)
  - b) Outline four specific teachings you will give the patient regarding care of the wound at home (4 marks)