**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**MARCH 2012 KRCHN CLASS (PRE-SERVICE)**

**END OF SECOND BLOCK EXAMINATION**

**ALIMENTARY AND BILIARY CONDITIONS EXAM**

DATE: 1/4/2014 TIME:1.30 – 4.30 pm

**INSTRUCTIONS**

1. Enter your examination number and question number on each page used.
2. ALL questions are compulsory.
3. Omission of and or wrong numbering of a question or part of the question will result in 10% deduction of the marks scored from the relevant part.
4. Do NOT use a pencil.
5. Mobile phones are NOT allowed in the examination hall.

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) ALIMENTARY & BILIARY CONDITIONS – 20 MKS**

Q.1. The diet that should be implemented by the nurse while caring for patient with pancreatitis is:

1. Low carbohydrate diet.
2. High fat diet.
3. Low fat diet.
4. High protein diet.

Q.2. Hepatic encephalopathy occurs due to:

1. Viral inflammation of the brain tissues.
2. Nitrogen compounds and ammonia acting s false neurotransmitters.
3. Capillary bleeding due to increased portal vein pressure.
4. Reduced blood supply to the brain tissue.

Q.3. Functions of gastric juice include:

1. Kills ingested pathogens, provide acidic environment needed for effective digestion of proteins.
2. Digestion of carbohydrates and fats.
3. Activates trypsin, initiates digestion of carbohydrates.
4. Emulsify fats, digestion of proteins.

Q.4. The most common cause of small bowel obstruction is:

1. Adhesions.
2. Hernias.
3. Neoplasm.
4. Diverticulitis.

Q.5. The most common complication of peritonitis is:

1. Ascitis.
2. Increased intestinal motility.
3. Constipation.
4. Paralytic ileus.

Q.6. The procedure that involves surgical removal of the distal two thirds of the stomach is known as:

1. Vugostomy.
2. Gastrectomy.
3. Gastrotomy.
4. Gastroplasty.

Q.7. Priority nursing interventions for a patient with peritoneal abscess is to:

1. Administer analgesics for relief of pain.
2. Administer intravenous fluids to maintain fluid volume balance.
3. Reassure the patient to relieve anxiety and co-operate during pre-operative preparation.
4. Administer parenteral nutrition to obtain optimum weight gain while the gut is rested.

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) ALIMENTARY & BILIARY CONDITIONS – 20 MKS**

Indicate true or false for **Q.8.**

Q.8. (a) Hepatitis A is mainly transmitted through the fecal-oral route.

(b) Persons with hepatitis A also have hepatitis B infection.

Q.9. Predominant signs and symptoms in ulcerative colitis include:

1. Fever, constipation, abdominal pain.
2. Constipation, rectal bleeding, weight loss.
3. Vomiting, diarrhoea, constipation.
4. Diarrhoea, abdominal pain, rectal bleeding.

Q.10. Mechanical cause of intestinal obstruction include:

1. Trauma, infection, malignant tumours.
2. Mesenteric ischaemia, intussusceptions, gallstones.
3. Volvulus, strangulated hernia, peritoneal adhesions.
4. Volvulus, paralytic ileus, strangulated hernia.

**PART TWO: SHORT ANSWER QUESTIONS ALIMENTARY & BILIARY CONDITIONS – 20 MARKS**

Q.1. State five (5) signs and symptoms of liver cirrhosis. 5 marks

Q.2. Differentiate between peptic and gastric ulcers. 4 marks

Q.3. Describe briefly the specific pre-operative management of a patient with intestinal

obstruction. 6 marks

Q4. Outline five (5) specific nursing diagnosis a nurse would obtain while assessing a patient

suffering from gastro-intestinal tract conditions. 5 marks

**PART THREE: LONG ANSWER QUESTIONS ALIMENTARY & BILIARY CONDITIONS – 20 MARKS**

Q.1. Mrs Gekonge is admitted to surgical ward and a surgeon has made a diagnosis of appendicitis.

1. Explain the pathophysiology of appendicitis. 5 marks
2. State five (5) clinical manifestation of appendicitis. 5 marks
3. Describe the specific nursing management of Mrs Gekonge. 10 marks