**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**END OF FIRST SEMESTER EXAMINATION**

**MARCH 2013 KRCHN CLASS (PRE-SERVICE)**

**FUNDAMENTALS OF NURSING EXAMINATION**

DATE: 11/9/2013 TIME: ..................

**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) FUNDAMENTALS OF NURSING – 23 MARKS**

Q.1. A professional nurse is the one who is:

1. Uses sound judgment and sympathizes with the patient.
2. Provides holistic care to patients, family and community.
3. Displays high standards of performance and acts under emotions.
4. Depends on the basic training for his performance.

Q.2. The following are definitions of ethics except:

1. Moral principles.
2. Code of behaviour.
3. Study of behaviour.
4. Rules and regulations in a society.

Q.3. The functions of National Nurses Association (NNAK) include:

1. Establishing and improving all branches of nursing profession in the country.
2. Acts as a local representative body of the nursing profession.
3. Prescribing and regulating syllabuses for training of professional nurses.
4. Prescribing and conducting examination for persons seeking registration and enrolment.

Q.4. The nurses’ bill of rights are:

1. Safe environment, choosing where to work.
2. Right to risk allowance, know the hospital rules.
3. Right to opportunities for further education, career development.
4. Right to know all patients by name, right to house allowance.

Q.5. In a ward set up, the officer in-charge of nursing services is:

1. Medical officer of health (MOH).
2. Medical superintendent.
3. Nursing officer in-charge of the hospital.
4. Health administrative officer.

Q.6. For a patient who is unconscious hygiene can be maintained by:

1. Daily bed bath and oral toilet.
2. Daily assisted bed bath and oral toilet.
3. Daily bath in bathroom and cleaning mouth and teeth.
4. Daily assisted bath in bathroom and cleaning mouth and teeth.

Q.7. Pressure sore can be predisposed by:

1. Helplessness / unconsciousness, falling from bed.
2. Incontinence in patient, intensive exercise in bed.
3. Patients with poor circulation, paralysis.
4. Frequent change of position, changing soiled linen immediately.

Q.8. In making bed in a hospital set up:

1. All patients should be out of bed.
2. One nurse should make all the beds.
3. Extra assistance should be availed always.
4. Cover the patient from head to toe for privacy.

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) FUNDAMENTALS OF NURSING – 23 MARKS**

Q.9. A bed cradle is used to:

1. Keep the weight of the bed clothes off the patients’ body.
2. Assist the patient to a sitting up position.
3. Elevate the bottom or top of the bed.
4. Prevent Mattresses from sagging.

Write True or False for **Q.10** – **Q.11**.

Q.10. (a) In prone position, the patient lies flat on his front with one pillow under his head which

is turned to one side. FALSE

(b) Semi-prone position is used for patient who have a severe cardiac and pulmonary

problem.FALSE

Q.11. (a) Aseptic technique is a method aimed at reducing the pathological micro-organism.TRUE

(b) In boiling instruments, the higher the temperature of the boiling water the longer the

period of boiling.FALSE

Q.12. A patient who cannot digest and absorb food nutrients can be fed through:

1. Parental nutrition.
2. Naso-gastric tube feeding.
3. Intravenous fluids.
4. Gastrostomy feeding.

Q.13. When giving an injection on the buttocks, care is taken not to injure all the following except:

1. Sciatic nerve.
2. Superior gluteal nerve.
3. Circumflex nerve.
4. Superior gluteal artery.

Q.14. According to Callista Roys theory (1979), health is defined as:

1. A state and proves of being and becoming intergrated and whole person.
2. A state of well being and one uses his power to the fullest.
3. A patient’s ability to perform unaided.
4. A state of being free from diseases.

Q.15. The following is Some of the abnormalities a nurse should observe in stool:

1. Amount, ova and cyst.
2. Colour, amount, smell and cyst.
3. Colour, amount, consistent, amount.
4. Smell, occult, blood.

Q.16. The following is hypertonic solution:

1. Ringer’s solution.
2. Normal saline.
3. 10% dextrose.
4. Half strength darrows.

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Q.17. While taking pulse a nurse avoid the following:

1. Get accustomed to the beat before counting and counting should take one minute.
2. Retain fingers on radial artery and take respirations.
3. Remove fingers from radial artery and take respirations.
4. None of the above.

Q.18. According to Kubler Rose, ‘Anger’ stage a patient can say:

1. ‘No not me’DENIAL AND ISOLATION.
2. ‘Yes me but’BARGAINING.
3. ‘Why me?’ANGER
4. ‘Yes me that is okay’.ACCEPTANCE

Write True or False on **Q.19.**

Q.19. Disinfection is a chemical agent used on the skin and mucous membrane to kill or remove micro-organisms.FALSE

Q.20. The following are characteristics of a nursing process except:

1. Hemanistic.
2. Universally applicable.
3. Permits creativity.
4. Non-individualized.

Q.21. A comprehensive type of assessment in nursing process:

1. It is done several months after initial assessment.
2. Is ongoing and screening for a specific problem done.
3. Done on first contact with client.
4. All of the above.

Q.22. The following are the elements of informed consent except:

1. Must be given by a client or individual.
2. Must be given voluntarily.
3. Must be done by nurses only.
4. Client must be given enough information to make decision.

Q.23. Changes on nursing care plan of a patient are done to the following except:

1. Changes in patient’s problem.
2. Changes in priorities of the problems.
3. Additional information about the patient’s state of health.
4. All of the above.

**PART TWO: SHORT ANSWER QUESTIONS FUNDAMENTALS OF NURSING – 40 MARKS**

Q.1. (a) Define nursing process. 1 mark

(b) Give five (5) reasons for using nursing process. 5 marks

Q.2. State four (4) reasons for taking history from a patient. 4 marks

Q.3. Explain any three (3) nursing positions used in nursing. 6 marks

Q.4. Differentiate the following terminologies:

1. Barrier nursing and isolation nursing.
2. Disinfectant and antiseptic.
3. Decontamination and sterilization. 6 marks

Q.5. State the three (3) functions of Nursing Council of Kenya. 6 marks

Q.6. Explain briefly how to collect amid-stream urine from a female patient. 6 marks

Q.7. Explain stages of death according to Kubler Ross. 6 marks

**PART THREE: LONG ANSWER QUESTIONS (ESSAYS) FUNDAMENTALS OF NURSING – 40 MARKS**

Q.1. Discuss Orems Theory of nursing under the following endings:

1. Theory of self care. 5 marks
2. Theory of self care deficit. 7 marks
3. Theory of nursing systems. 8 marks

Q.2. Mr Onyango aged 60 years was admitted to a medical ward with a terminal illness.

1. Differentiate terminally ill patient and a critically ill patient. 4 marks
2. Describe the management of Mr Onyango from admission and while in

the ward. 12 marks

1. What factors are taken into consideration when a terminally ill patient is

taken home for home care. 4 marks