**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**END OF YEAR 2 SEMESTER 1 EXAMINATION**

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

**ALIMENTARY AND BILIARY DISORDERS EXAMINATION**

DATE: 26/2/2015 TIME:8.30 – 11.30pm

**INSTRUCTIONS**

1. Enter your examination number and question number on each page used.
2. ALL questions are compulsory.
3. For part 1 (MCQs), write the answer in the spaces provided on the answer booklet.
4. For Part 2 (SHORT ANSWER QUESTIONS), answer the questions following each other.
5. For Part 3 (LONG ANSWER QUESTIONS), answer to each question MUST start on a separate page.
6. 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.
7. Do NOT use a pencil.
8. Mobile phones are NOT allowed in the examination hall.

For Examiner:

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| --- | --- | --- | --- | --- |
| **MCQS** | **SAQS** | **LAQS 1** | **LAQS 2** | **TOTAL** |
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***PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) ALIMENTARY & BILIARY DISORDERS– 10***

Q.1. Mechanical causes of intestinal obstruction include:

1. Muscular dystrophy, amyloidosis, intussusception.
2. Hernia, intussusception, neoplasmas.
3. Neoplasmas, intussusception, muscular, dystrophy.
4. Amyloidosis, hernia, neoplasmas.

Q.2. Endocrine function of the pancrease include:

1. Secrete insulin, glucagon.
2. Concentrate bile.
3. Produce bile.
4. Storage of undigested intestinal content.

Q.3. In gastritis:

1. Stomach lavage is encouraged.
2. Neutralize acids with lemon juice or dilute vinegar.
3. NSAIDs are the best analgesics to manage the pain.
4. Dietary indiscretion can be the cause.

Q.4. Which of the following is true about gastric ulcers:

1. Hypersecretion of stomach hydro chronic acid.
2. Abdominal pain is common 2 – 3 hours after meals.
3. Hematemesis is common.
4. Weight gain is common.

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

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

Q.6. Predominant signs and symptoms in ulcerative colitis include:

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

Q.7. Following haemorrhoidectomy pain is relieved by use of:

1. Site baths, stool softener, analgesics.
2. Strong analgesics, light diet, good perineal hygiene.
3. Stool softener, high fibre diet, lateral position in bed.
4. Liquid diet for the first 3 days, site baths, laxatives.

***PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) ALIMENTARY & BILIARY DISORDERS– 10***

Q.8. All the following can be done to rule out cancer of the oesophagus except:

1. Esophagogastroduodenoscopy.
2. Barium swallow.
3. CT scan.
4. Laparascopy.

Q.9. The procedure that involves surgical removal of the distal two thirds of the stomach is:

1. Vagostomy.
2. Gastroectomy.
3. Gastrotomy.
4. Gastroplasty.

Q.10. The most common cause of duodenal ulcers is:

1. Ingestion of non-steroids anti-inflammatory drugs.
2. Increased secretion of gastric juice.
3. Presence of helicobacter pylori bacteria in the stomach.
4. Presence of colon commensals in the duodenum.

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

Q.1. State five (5) nursing diagnosis for patient with cholelithiasis. 5 marks

Q.2. Outline three (3) types of jaundice. 3 marks

Q.3. State five (5) contributing factors to bleeding of eosophageal varices. 5 marks

Q.4. Briefly explain the pathophysiology of liver abscess. 5 marks

Q.5. List four (4) clinical manifestations of hepatic dysfunction. 2 marks

***PART THREE: LONG ANSWER QUESTIONS – ALIMENTARY & BILIARY DISORDERS – 20 MKS***

Q.1. Mr J, 40 years old was admitted in the ward with liver cirrhosis.

(a) Define liver cirrhosis. 1 mark

(b) Explain the four (4) functions of the liver. 4 marks

(c) Explain four (4) nursing diagnosis for this patient. 4 marks

(d) Describe management of Mr J while in the ward. 11marks