1. Hypotension in acute pancreatitis is mainly caused by;
2. Profuse vomiting
3. Loss of large amounts of protein rich fluid into tissues and peritoneal cavity.
4. Bleeding into the tissues and peritoneal cavity.
5. Profuse sweating and anxiety
6. Clinical manifestations of neurogenic shock include;
   1. Tachycardia, hypotension and dysrythmias.
   2. Hypotension, hyperthermia and tachypnea.
   3. Warm dry skin, bradycardia and hypothermia.
   4. Hypothermia, warm dry skin and tachycardia.
7. Hysteroscopy is indicated in ;
8. Cases of infertility and cervical carcinoma.
9. Endometrial carcinoma & infertility.
10. Unexplained per vaginal bleeding & recurrent early pregnancy loss.
11. Retained intra-uterine device & acute pelvic inflammation.
12. Abnormal findings on Breast examination includes;
13. Longstanding nipple inversion, breast tenderness before menses.
14. Unilateral venous prominence, skin dimpling.
15. Lumpiness before menstruation, skin dimpling.
16. Longstanding nipple inversion, edema
17. Early signs of cervical cancer include;
18. Bleeding between menstrual periods, dyspareunia and prolonged bleeding.
19. Heavy bleeding post intercourse, pelvic pain and unusual discharge.
20. Pelvic pain, unusual vaginal discharge and increased urinary frequency.
21. Prolonged bleeding, dyspareunia and bleeding between menstrual periods.

1. The primary outcome of the assessment component of the nursing process is;
2. Complete data base
3. Comprehensive system review.
4. Detailed nursing history
5. Nursing diagnosis.
6. Fracture immobilization is meant to achieve the following;
7. Pain relieve, reduced movement and correction of malunion
8. Prevention of displacement, pain relieve and reduced deformities.
9. Prevent muscle spasms, bone alignment and increased circulation.
10. Reduce malformations, restore circulation and relieve pain

For questions 8 and 9 match the drugs in column A with the descriptions in column B.

**Column A**. **Column B.**

8. a. Ethambutol i) causes smooth muscle contraction

b. Vasopressin ii) causes peripheral visual loss.

9. c. Neostigmine iii) used for staphylococcal septicaemia

d. Flucloxacillin iv) Is a cholinergic drug.

v) Causes hepatitis & cardiac toxicity

10. The stratified epithelium lines the following;

1. Kidney tubules, buccal cavity and the throat.
2. Lungs, heart and inner lining of blood vessels.=squamous epithelium
3. Eye conjunctiva,vagina and oesophagus
4. Inner lining of blood vessels, buccal cavity and lungs.

11. A third degree burn involves;

1. The epidermis and a portion of the dermis.=1st
2. Epidermis, upper dermis & a portion of deeper dermis.
3. Epidermis, entire dermis, subcutaneous & connective tissue.
4. Muscles and the bones only c+d.=4th

12. The common causative bacterial pathogens for otitis media are;

1. Staphylococcus aureus, pneumococci.
2. Klebsiella spp., pseudomonas spp.
3. Staphylococcus aureus, pseudomonas spp.
4. Streptococcus spp. *Neisseria menengitidis*

13. The stages of urine formation are in the order of:-

a) Filtration, urine concentration, secretion and reabsorption.

b) Secretion, urine concentration, filtration and reabsorption.

c) Filtration, reabsorption, secretion and urine concentration.

d) Urine concentration, filtration, secretion and reabsorption.

14. While caring for a patient in the recovery room after an operation under general anaesthesia, the nurse should notify the physician if the;

1. Patient pushes out the airway.
2. Respiration is regular but shallow.
3. Systolic pressure drops from 130mmhg to 100mmhg.
4. Patient has snoring respirations.

15. Contact dermatitis is initially suspected if the rash appears;

1. Erythematous with raised papules.
2. Dry & scaly flaking skin.
3. Inflamed with weeping and crusting lesion
4. Excoriated with multiple fissures.

16. Prior craniotomy the nurse should;

1. Rule out facial oedema, shave the surgical site & restrict fluid intake.
2. Ensure the patient is on antiseizures, shave the head & stop all other medications.
3. Rule out neurological deficits, ensure patient is well hydrated and insert indwelling urinary catheter.
4. Relieve pain, obtain results for all investigations & restrict fluid intake.

17. To assess the level of consciousness using the Glasgow coma scale, the nurse should check;

1. Pupil size, orientation and muscle tone.
2. Eye opening, motor and verbal response.
3. Grasp strength, pupil size and response to commands.
4. Flexing of limbs, muscle strength and orientation.

18. Indicate whether the following statements are **true** (T) or **false** (F) in the provided answer sheet.

1. The skin should be cleaned with an alcohol swab before insulin injection is administered .F
2. The onset of action for glucagon injection is 8-10min. T

19. The 24 hr urine collection is meant for the following investigations;

1. Glomerula filtration rate and creatinine clearance.
2. Blood urea nitrogen (BUN) and conjugated bilirubin levels determination.
3. Analysis of adrenaline metabolite levels and blood urea nitrogen (BUN).
4. Glomerula filtration rate (GFR) and serum potassium levels.

20. Clinical manifestations of retinal detachment include;

1. Pain, luminous rays and floaters in the field of vision.
2. Painless changes in vision, flashing lights & floaters in field of vision.
3. Pain in the affected eye, headache & reduced visual acuity for near objects.
4. Painless changes in vision, excessive lacrimation & photophobia.
5. The Na+ K+ ATPase pump:-
   1. Extrudes potassium ions from the cell and takes two sodium ions into the cell
   2. Extrudes three sodium ions from the cell and takes two potassium ions into the cell
   3. Has a coupling ratio of 2:1
   4. Is found mainly in the intravascular fluid compartment
6. The three major factors associated with increased risk of pancreatic carcinoma are:-
   1. Diabetes mellitus,obesity,high protein diet
   2. Obesity,hypertension,age 35 - 40 years
   3. Hypertension, tobacco use, age 35 – 40 years
   4. Diabetes mellitus, tobacco use, high fat diet
7. Conductive hearing loss can be caused by:-
   1. Ototoxic medication,otitis externa
   2. Presbycusis,ototoxic medication
   3. Meniere’s disease,otosclerosis
   4. Otosclerosis,tympanic memberane retraction
8. When measuring central venous pressure (CVP) the nurse should;
   1. Mark the location of the right atrium.
   2. Identify the location of the left atrium.
   3. Always ensure the patient lies in supine position.
   4. Allow Normal saline to drip rapidly into the client for 5 min before taking CVP reading.
9. During thoracocentesis
   1. Fluid is aspirated from the peritoneal space
   2. Consent is not necessary
   3. Medications can be instilled into the pleural space
   4. Local anaesthesia is not advisable
10. The carcinogenic risk factors for laryngeal cancers include:-
    1. Tar products, mustard gas, chronic laryngitis
    2. Asbestos, chronic laryngitis, voice straining
    3. Voice straining, high fibre diet, tobacco
    4. Asbestos, tobacco, tar products
11. Sympathetic stimulation of the cardiovascular system causes:-
    1. Increased heart rate and constriction of coronary arteries.
    2. Constriction of GIT secretory gland vessels with increased flow of digestive juices.
    3. Increased peripheral resistance and dilatation of coronary arteries.
    4. Increased force of heart contraction & reduced peripheral resistance.
12. When preparing a patient for barium enema, the nurse will inform the patient that:-
    1. He should take the radio-opaque substance orally a day before the procedure
    2. Nothing should be taken orally after midnight
    3. ‘The procedure will take 2-4 hours
    4. An evacuating enema or laxative will not be necessary after the procedure
13. A potential nursing diagnosis for a patient with breast cancer is:-
    1. Potential for pain related to surgical incision as evidenced by irritability
    2. Disturbed body image related to loss of part or all of the breast
    3. Potential for impaired mobility related to shoulder immobility
    4. Anxiety related to fear of cancer as manifested by difficulty in falling asleep
14. Post thyroidectomy,the nurse can rule out laryngeal nerve damage by;
    1. Asking the patient to speak.
    2. Stimulating the patient’s gag reflex.
    3. Determining the patient’s ability to swallow.
    4. Telling the patient to extend his tongue.
15. Relaxation of the intercostals muscles and diaphragm results in:-
    1. Downward and outward movement of the rib cage and elastic recoil of the lungs
    2. Upward and inward movement of the ribcage and elastic recoil of the lungs
    3. Downward and inward movement of the rib cage and elastic recoil of the lungs
    4. Enlargement of the thoracic cavity from back to front
16. A deteriorating condition for a patient with head injury will be indicated by;
    1. Widening pulse pressure and irregular respiratory pattern.
    2. Narrowing pulse pressure and escalation of discomfort.
    3. Bradycardia and Kussmaul breathing.
    4. Oliguria and narrow pulse pressure.
17. The primary causes of acute otitis media are;-
    1. Escherichia coli and proteus spp.
    2. Streptococcus pneumonia and Haemophilus influenza.
    3. Staphylococcus aureus and haemophilus influenza.
    4. Proteus spp. and Streptococcus pneumonea.
18. When suctioning a laryngeal tube;-
    1. It should take about 10 seconds.
    2. A clean and not asceptic technique should be used.
    3. Suction is applied while inserting the catheter into the tube.
    4. Suctioning should be done continuously till secretions clear.
19. The appropriate intervention in decreasing absorption of an ingested poison is:-
    1. Performing haemodialysis
    2. Administering milk
    3. Performing gastric lavage
    4. Administering activated charcoal
20. The drug that would be used to control oedema of the spinal cord in a patient with a spinal cord injury at level T12 is:-
    1. Acetazolamide
    2. Furosemide
    3. Methylpredinsolone
    4. Sodium bicarbonate
21. In Fallot’s tetralogy there is;
    1. Pulmonary artery stenosis, ventricular septal defect, aortic misplacement & right ventricular hypertrophy.
    2. Coarctation of the aorta, patent ductus arteriosus, aortic stenosis and ventricular septal defect.
    3. Ventricular hypertrophy, coarctation of the aorta, atrial septal defect and Blue babies syndrome.
    4. Atrial-ventricular hypertrophy, coarctation of the aorta, ventricular septal defect and pulmonary artery stenosis.
22. In myocardial infarction,Nitroglycerin is administered to;-
    1. Dilate arteries in small doses.
    2. Decrease ischemia by reducing myocardial oxygen consumption.
    3. Increase the preload.
    4. Enable the patient achieve muscle relaxation.
23. A patient with Angina Pectoris manifests with:-
    1. An acute onset of dyspnea and pleuritic chest pain
    2. Severe crushing chest pain that is not relieved by nitroglycerin
    3. Pressure in the chest that is relieved by morphine sulphate
    4. Substernal chest pain that is usually accompanied by diaphoresis
24. Fluid filled blisters that are greater than 0.5cm in diameter are referred to as:-
25. Macules-flat non-palpable skin colour change<1cm
26. Vesicles-elevted palpable mass containing serous fluid<0.5cm
27. Papules-elevated palpable solid mass<0.5cm
28. Bullae
29. Antidiuretic hormone;
30. Is released by the anterior pituitary gland
31. Excessive production cause dilutional hyponatremia
32. Causes increased potassium excretion
33. Stimulates production of aldosterone
34. The following antituberculosis drug increases metabolism of oral contraceptives;
35. Isoniazid
36. Rifampicin
37. Ethambutol
38. Pyrazinamide
39. Nursing interventions for a patient with chronic obstructive pulmonary disease (COPD) include;
40. Maintaining the room temperature at 370c
41. Nursing the patient in a supine position
42. Restricting fluid intake
43. Performing postural drainage with percussion and vibration daily
44. Rheumatic endocarditis is;
45. More common in older people
46. Non infectious
47. Common in people with prosthetic heart valves
48. Caused by staphylococcus
49. Management of a patient with myocardial infarction include;
50. Moderate physical activity, high calorie diet
51. Low sodium diet, low fibre diet
52. Supine positioning, high calorie diet
53. Low calorie diet, bed rest
54. Nursing diagnosis for a patient with leukaemia include;
55. Impaired gaseous exchange, hypothermia
56. Excess fluid volume, impaired skin integrity
57. Risk for injury (bleeding), impaired gaseous exchange
58. Pain , hypothermia
59. Duodenal ulcers,
60. Are more common in people above 50 years
61. Are more common in females than males
62. Have a higher risk of malignancy than gastric ulcers
63. Pain is commonly experienced 3 hours after meals.
64. Peritonitis is commonly caused by;
65. *Escherichia Coli, Klebsiella, Proteus*
66. *Streptococci, Escherichia Coli, Proteus*
67. *Staphylococci, Streptococci, Klebsiella*
68. *Proteus, Pseudomonas, staphylococci*

9 The following is amineralocor ticoid

1. Aldosterone ;
2. Cortisol-glucocorticoid} adrenal cortex
3. Adrenal corticotrophic hormone
4. Epinephrine
5. Nephrotic syndrome presents with;
6. Increased albumin in blood, loss of protein in urine.
7. High serum cholesterol, presence of blood in urine
8. Decreased albumin in blood, high serum cholesterol
9. Loss of albumin in urine, presence of blood in urine
10. Risk factors to breast cancer include;
11. Late menarche, nulliparity
12. Obesity, early menopause
13. Late menopause, nulliparity
14. Early menarche, multiparity
15. Systemic effects of burns include;
16. Hypovolemia, generalized vasoconstriction
17. Decreased cardiac output, bronchospasm
18. Hypotension, peripheral vasodilatation
19. Decreased capillary permeability, hypovolemia
20. Chemosis is;
21. Seeing one object as two
22. Oedema of the conjunctiva
23. Dilatation of the vasculature of the conjunctiva
24. Presence of blood in the anterior chamber of the eye
25. A patient post eye surgery should be advised to;
26. Perform frequent coughing exercises to prevent respiratory complications
27. Perform deep breathing exercises to prevent respiratory complications
28. Lie on the affected side immediately post operatively to promote drainage of secretions
29. Take a low fibre diet
30. Meniere’s disease management include;
31. High sodium diet, antibiotic administration
32. Administration of antibiotic and antihistamine
33. Administration of antiemetic and antihistamine
34. High potassium diet and antibiotics administration
35. Post intracranial surgery a patient requires strict temperature regulation **mainly** to;
36. Detect infection
37. Prevent increased metabolic demand
38. Prevent hypothermia
39. Enhance cerebral perfusion
40. Management of a patient during a seizure include;
41. Restricting the jerking movements to prevent injury
42. Inserting an oral airway to protect the tongue
43. Putting pillows and raising the side rails if the patient is in bed
44. Removing pillows and raising the side rails if the patient is in bed.
45. A patient with a sprained ankle should be advised to avoid;
46. Resting the foot
47. Applying a heating pad
48. Applying an elastic compression bandage
49. Elevating the ankle on a pillow while sitting or lying down
50. Risk for osteoporosis is greatest in;
    1. A 36-year-old man who has asthma
    2. A 70-year-old man who consumes alcohol
    3. A sedentary 65-year-old woman who smokes cigarette
    4. A 25-year-old woman who jogs
51. The following indicate infection in a casted extremity
52. Diminished distal pulse
53. Presence of a “hot spot” on the cast
54. Coolness and pallor of the extremity
55. Dependent edema