UNIVERSITY OF ESWATINI

FACULTY OF HEALTH SCIENCES ~ GENERAL NURSING SCIENCE

MNSc FAMILY NURSE PRACTITIONER PROGRAMME

FINAL EXAMINATION: MAY 2019

COURSE CODE: GNS628

COURSE NAME: ADVANCED HEALTH ASSESSMENT

TIME ALLOWED: TWO (2) HOURS

PAGES:

10 INCLUDING COVER PAGE

MARKS:

75

INSTRUCTIONS:

- THERE ARE THREE (3) PARTS TO THIS EXAM.
- ANSWER ALL QUESTIONS IN ALL PARTS.
- START EACH PART ON A NEW PAGE.
- WRITE LEGIBLY

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For each choose the single best answer.

- 1. In addition to the body mass index (BMI) which of the following measurements is important for determining risk for cardiac and metabolic disease in adults?
 - A. Waist circumference.
 - B. Z-score.
 - C. Height to weight ratio.
 - D. Chest diameter.
- 2. Rectal examination in males is critical after age 50 for identifying which of the following:
 - A. Prostatitis.
 - B. Benign prostatic hypertrophy.
 - C. Hernia.
 - D. Prostate cancer.
- 3. A varicocele is
 - A. A general name for an enlarged prostate.
 - B. A varicose vein in the spermatic cord.
 - C. An abnormal growth in the scrotal sac.
 - D. Cystic fluid around the testis.
- 4. What is the best description of the review of systems as part of the health history?
 - A. Evaluation of the past and present health state of each body system.
 - B. A statement that describes the overall health of the patient.
 - C. Documentation of the problems as described by the patient.
 - D. Recording of the objective data as found by the practitioner.
- 5. A genogram is used to document
 - A. Past health history.
 - B. The characteristics of presenting symptoms.
 - C. Hospitalizations and surgeries.
 - D. Family history.

- 6. A 57-year-old auto mechanic comes to outpatient for assessment of decreased vision in his right eye. You perform a fundoscopic exam and refer him for evaluation of a cataract. Which finding lead you to this conclusion?
 - A. Haemorrhage in the fundus.
 - B. Lack of a red reflex.
 - C. Arteriovenous (AV) nicking
 - D. Blurred optic disc margins.
- 7. A 3-year-old boy is brought by his mother for evaluation of a fever, loss of appetite, and emesis. His symptoms have been present for two days. The fever is temporarily improved with paracetamol. You perform a physical examination and diagnose otitis media. Which is the most likely physical finding on otoscopic examination?
 - A. Erythematous, bulging tympanic membrane.
 - B. Erythematous, retracted tympanic membrane.
 - C. Erythematous external auditory canal.
 - D. Purulent drainage with tenderness to palpation of tragus.
- 8. A 55-year-old woman presents with swelling in her right arm that is persistent. The onset was three months after her right radical mastectomy. The condition is uncomfortable and it interferes with her ability to use the arm in her work weaving baskets. She is likely suffering from
 - A. Psychosomatic swelling due to the psychological trauma of the mastectomy.
 - B. Lymphedema resulting from removal of her right axillary lymph nodes during surgery.
 - C. Recurrence of the cancer.
 - D. She is likely experiencing normal post-op swelling and is exaggerating the severity.
- 9. In a patient with pneumothorax, what findings would you expect with auscultation of the thorax on the affected side?
 - A. Wheezes.
 - B. Ronchi.
 - C. Absent breath sounds.
 - D. Coarse crackles.

- 10. When examining the breasts of a 30-year-old woman you note a mass that is soft, round, mobile, and slightly tender to palpation. These characteristics are most often found in which type of breast mass?
 - A. Cyst.
 - B. Fibroadenoma.
 - C. Breast cancer.
 - D. Mastitis or abscess.
- 11. A 50-year-old high school teacher is brought to the emergency room/casualty for a sudden onset of confusion. When you ask him questions he seems to understand what you are saying and attempts to answer you but you cannot understand his words—they are garbled. After examination you decide that he has likely had a stroke. His inability to speak is known as
 - A. Poor orientation.
 - B. Expressive aphasia.
 - C. Receptive aphasia.
 - D. Dementia.
- 12. A 15-year-old high school student presents with a 1-day history of nausea and anorexia. He describes the pain as generalized yesterday, but today it has localized to the right lower quadrant. As you palpate the left lower quadrant the patient experiences pain at the right lower quadrant. This is known as
 - A. Psoas sign.
 - B. Obturator sign.
 - C. Rovsing's sign.
 - D. Cutaneous hyperesthesia.
- 13. You perform a physical examination manoeuvre to assess the patency of the ulnar artery in the hand. The name of this test is
 - A. Allen's test.
 - B. Murphy's test.
 - C. Phalen's test.
 - D. Obturator test.

- 14. In the inspection portion of chest examination, an increased A-P diameter is indicative of
 - A. Asthma.
 - B. Pneumonia with consolidation.
 - C. Chronic Obstructive Pulmonary Disease (COPD).
 - D. Cardiac failure (CHF).
- 15. A 50-year-old office worker complains of numbness and tingling of both hands. It often wakes him at night and he has to shake his hands to get the feeling to leave. He notices lately that sometimes during the day he has pain when gripping his pen while writing. You suspect carpal tunnel syndrome. Which test(s) will you do to confirm the diagnosis?
 - A. Drop arm and wrap arm.
 - B. Drawer.
 - C. Flexion and palmer extension.
 - D. Phalen and Tinel.
- 16. The McMurry test is used to assess for
 - A. Meniscal injury.
 - B. Heel spurs.
 - C. Achilles weakness.
 - D. Knee instability.
- 17. Which is the preferred order for examination of the abdomen?
 - A. Inspection, auscultation, percussion, palpation.
 - B. Percussion, auscultation, palpation, inspection.
 - C. Auscultation, inspection, palpation, percussion.
 - D. Inspection, palpation, auscultation, percussion.
- 18. A 40-year-old school teacher complains of pain on the bottom of her foot while walking. You diagnose plantar fasciitis. Which history and physical examination findings point to this diagnosis?
 - A. Painful plantar surface of foot especially when first arising that eases with movement.
 - B. Plantar surface of foot is pain free upon arising but pain worsens after 30 minutes.
 - C. Pain on dorsum of foot if shoes are too tight.
 - D. Lateral deviation of the great toe causing pain when wearing high heels.

- 19. Which are the most appropriate instructions for using an ophthalmoscope?
 - A. Keep a distance of one arms-length from the patient at all times.
 - B. The examination must be done in a fully lit room.
 - C. Darken the room, begin at an arm's length from the patient to observe the red reflex.
 - D. Use your left eye to visualize the patient's right eye.
- 20. Transillumination is a technique used to examine masses in various parts of the body.

The technique involves

- A. Placing the patient in a bright room with the light at an angle to visualise Irregularities in the body contours.
- B. Shining a light onto the mass in a darkened room to determine if the mass is solid.
- C. Using a head lamp to visualise hard to search areas of the body.
- D. Placing a light behind the patient in a darkened room to look for unusual bulges.

21. Balanitis is

- A. Inflammation of the glans penis.
- B. An undescended testicle.
- C. Tight prepuce that cannot be retracted over the glans.
- D. A finger infection surrounding the nail.
- 22. You are examining a 30-year-old man for a complaint of rectal bleeding. You determine that there has been no trauma to the area. The patient has a one month history of constipation and has noted blood when wiping the rectal area. There is no history of colon cancer in the family nor is there a personal history of colon or rectal problems. On exam you noted a one cm round mass at the 10 o'clock position. The most likely diagnosis is
 - A. Rectal cancer.
 - B. Rectal prolapse.
 - C. Crohn's disease.
 - D. External haemorrhoid.

- 23. Testing the knee reflex indicates the condition of the nerves arising from which spinal level?
 - A. L2, L3, L4
 - B. C1, C2, C3
 - C. L5 and S1
 - D. S1, S2, S3
- 24. To visualise the tympanic membrane on a child you would pull the pinna
 - A. Up and back.
 - B. Down and back.
 - C. Forward and down.
 - D. Forward and up.
- 25. The anterior fontanelle on an infant should close
 - A. Between 2 and 3 months.
 - B. Between 6 and 9 months.
 - C. Between 9 and 18 months.
 - D. After age 5.

Part 2 MATCHING AND SHORT ANSWER

TOTAL MARKS PART 2: 25

MARKS

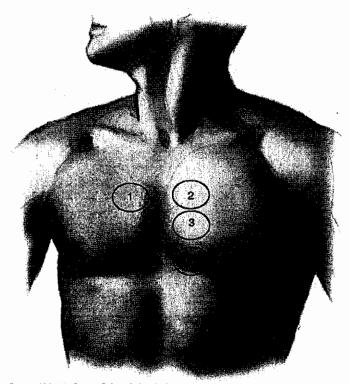
 Match the assessment with the indication. Place the letter corresponding to each tool after the appropriate problem/complaint. (6 MARKS)

If the patient has this problem/complaint # ##	
Excessive alcohol use	A. PHQ-9
2. Confusion	B. Lawton IADL
3. Symptoms of depression	C. Risk stratification.
4. Needs assistance with self-care. ——	D. CAGE
5. Needs assistance with community skills	E. MOCA
6. High blood pressure	F. Katz ADL

2. Match the Cranial Nerve with the physical exam. (12 MARKS)

Cranial Nerve	Physical Exam - and -	
Olfactory	A. "Stick out your tongue."	
II Optic	B. Rub fingers together.	
III Oculomotor	C. "Open and close your mouth."	
IV Trochlear	D. Downward movement of the eye.	
V Trigeminal	E. Patient reports smell of objects.	
VI Abducens	F. "Say 'ahhh'" Assess voice quality. "Swallow."	
VII Facial	G. Smile and frown.	
VIII Vestibulocochlear	H. Vision chart.	
IX Glossopharyngeal	1. Shoulder shrug	
XVagus	J. Pupillary reaction to light.	
XI Accessory	K. Lateral deviation of the eye.	
XII Hypoglossal		

3. At which the location does one hear each sound best? (5 MARKS)



Source: Valentin Fuster, Robert A. Harrington, Jagat Narula, Zubin J. Eapen: Hurst's The Heart, Fourteenth Edition: www.accessmedicine.com Copyright © McGraw-Hill Education. All rights reserved.

- A. Mitral valve closure _____
- B. Aortic valve closure _____
- C. Tricuspid valve closure _____
- D. Pulmonic valve closure _____
- E. S2 loudest _____

4. ECG Reading. (2 MARKS)

What is the ventricular rate on this	
tracing? The arrow points	
to the P wave, which represents	
in the heart.	

PART 3 TOTAL 25 MARKS

Given the patient information below, write the objective, subjective, and assessment portions of a SOAP note. The information must be placed in the correct section to receive the marks.

This is the order of your note:

700.		
SUBJECTIVE: 10 To	OBJECTIVE:	
Biographical information (1 MARK)	Physical exam (5 MARKS)	
Chief complaint (2 MARKS)	ASSESSMENT:	
History of present illness (2 MARKS)	Clinical Analysis (2 MARKS)	
Past medical and surgical history (2 MARKS)	Most likely diagnoses (2 MARKS)	
Psychiatric History (1 MARK)	Other possible diagnoses (2 MARKS)	
Family History (1 MARK)	Other problems that are not stable (1	
	MARK)	
Social History (1 MARK)	Stable problems (1 MARK)	
ROS (1 MARK)	Health Care Maintenance needs (1	
	MARK)	

Patient Information

ient	Information		
•	His father is 49-years-old and lives in another village with his first family.	•	His abdominal exam reveals mild, generalized tenderness.
•	Musa is a 3-year-old child.	•	Vomited twice yesterday.
•	He has an earache times 2 days.	•	He lives with his maternal grandmother.
•	He is HIV positive.	•	He has had URI symptoms times 5 days
•	His Z-score is -2.	•	His heart sounds are normal.
•	He was exposed in-utero and first tested positive at age 6 weeks.	. •	He has a history of environmental allergies. No known medication allergies.
•	His maternal grandmother has diabetes.	•	Family does not have thermometer.
• .	He is up to date on all of his immunisations.	. •	He had a febrile seizure during a simila illness last year.
•	He walked at one year.	•	His last viral load was zero.
•	His brother and sister have been home from school with an upper respiratory illness.	•	They have been giving him paracetamo 250 mg every 4 hours.
•	Pharynx clear; EAC clear. TM erythematous, bulging; no lymphadenopathy.	•	His heart rate is 150, regular rate and rhythm.
•	He is on ART.	•	His mother brought him to clinic.
•	His mother is 25-years-old and has asthma.	•	No sternal retractions.
•	You note wheezing on auscultation of his lungs.	•	He has been rubbing his left ear times 24 hours.
•	He has had a fever for three days.	•	He is not on cotrimoxazole.
•	His abdomen is soft and non-tender to palpation.	•	Siblings are a brother age 5 and a siste age 6. They are alive and well.
•	He has never had surgery.	•	Father is alive and well.
•	He is not on TB prophylaxis.		Child in mild-moderate distress.
•	His temperature is 39 degrees C.	•	Difficulty sleeping at night since ill.