



UNIVERSITY OF ESWATINI  
Faculty of Health Sciences  
Department of General Nursing Science

**FINAL EXAMINATION PAPER NOVEMBER.2021**

TITLE OF PAPER : ADVANCED HEALTH ASSESSMENT  
COURSE CODE : GNS 628  
DURATION : 3 HOURS  
MARKS : 100  
INSTRUCTIONS : READ THE QUESTIONS & INSTRUCTIONS CAREFULLY  
: ANSWER ALL QUESTIONS  
: WRITE NEATLY & CLEARLY  
: NO PAPER SHOULD BE BROUGHT INTO OR OUT OF THE EXAMINATION ROOM.  
: BEGIN EACH QUESTION ON A SEPARATE SHEET OF PAPER.

DO NOT OPEN THIS QUESTION PAPER UNTIL PERMISSION IS GRANTED BY THE INVIGILATOR.

## SECTION A MULTIPLE CHOICE QUESTIONS

**Instructions:** For each of the following questions, please select the most appropriate response. Write only the number and corresponding letter only e.g. 30. B

1. You are reviewing assessment data of a 45 year old male patient and note pain of 8 on a scale of 10, laboured breathing and pale skin colour on the electronic health record. This documentation is an example of?
  - A. Hypothetical reasoning
  - B. Diagnostic reasoning
  - C. Subjective data
  - D. Objective data
  
2. A patient is in the emergency room of your clinic with nausea and vomiting which of the following would you include in the data base?
  - A. Complete history and full physical examination
  - B. A diet and gastrointestinal history
  - C. Previously identified health problems
  - D. Start collecting history in conjunction with lifesaving measures
  
3. A patient says she is very nervous and nauseated and she feels like she will vomit. This data would be what type of data?
  - A. Objective
  - B. Reflective
  - C. Subjective
  - D. Introspective
  
4. Which of the following is considered an accurate understanding of the person's feelings within a communication context?
  - A. Liking others
  - B. Sympathy
  - C. Empathy
  - D. A non-verbal listening technique
  
5. Because of the adolescent's developmental level, the following interview techniques can be used with them **EXCEPT?**
  - A. Facilitation and clarification
  - B. Confrontation and explanation
  - C. Empathy and interpretation
  - D. Silence and reflection

6. Which of the following is **NOT** active listening?
- A. Taking detailed notes during the interview
  - B. Watching for clues in body language
  - C. Repeating statements back to the patient to make sure you have understood
  - D. Asking open ended questions to explore the person's perspective
7. Which statement describes the purpose of a health history?
- A. To provide an opportunity for interaction between the patient and the examiner
  - B. To provide a form for obtaining the patient's biographic information
  - C. To document the normal and abnormal findings of a physical examination
  - D. To provide a database of subjective information about the patient's past and present health history
8. The major characteristic of dementia is:
- A. hallucinations
  - B. Sudden onset of symptoms
  - C. Substance-induced
  - D. Impairment of short and long term memory
9. Which of the following are the four (4) main headings for a mental status examination?
- A. Mood, affect, consciousness and orientation
  - B. Memory, attention, thought content and perceptions
  - C. Language, orientation, attention and abstract reasoning
  - D. Appearance, behaviour, cognition and thought process\*
10. The CAGE screening tool is used to assess:
- A. Sexual activity
  - B. Depression
  - C. Problem alcohol use
  - D. Decreased mental status
11. While examining the broken arm of a 4 year old boy, you need to assess the level of the pain. Which of the following assessment tools would be appropriate for this patient?
- A. 0 to 10 numeric rating scale
  - B. Wong-Baker scale
  - C. Simple descriptor scale
  - D. 0 to 5 numeric rating scale

12. A 24 hour recall of dietary intake is used:
- A. As an anthropometric measure of calories consumed
  - B. As a form of food diary
  - C. As the food frequency questionnaire
  - D. As a questionnaire or interview of everything eaten within the last 24hours
13. Which of the following assessment findings indicates that a patient is at nutritional risk?
- A. BMI + 24kg/m<sup>2</sup>
  - B. Waist circumference at 110cm
  - C. Current weight = 91kg
  - D. BMI = 19kg/m<sup>2</sup>
14. When assessing an injury to a child, which should be considered?
- A. The child's developmental level
  - B. The child's medical history
  - C. The history of how the injury occurred
  - D. All of the above
15. During assessment, which part of the hand is best used for detecting vibration?
- A. Fingertips
  - B. Index finger and thumb in opposition
  - C. Dorsum of the hand
  - D. Ulnar surface of the hand
16. When the nurse practitioner enters the examination room for a paediatric exam, she found the infant sleeping. Which assessment should the examiner perform first?
- A. Height and weight
  - B. Blood pressure
  - C. Heart, lung and abdomen
  - D. Temperature
17. The four areas to consider during the general survey of the patient include
- A. Ethnicity, gender, age and socio-economic status
  - B. Physical appearance, gender, ethnicity and affect
  - C. Dress, affect, nonverbal behaviour and mobility
  - D. Physical appearance, body structure, mobility and behaviour

18. During the physical assessment, your patient is diaphoretic, pale and complains of dull pain on the left upper quadrant of the abdomen. What type of pain is this?
- A. Somatic pain
  - B. Visceral pain
  - C. Psychogenic pain
  - D. Nociceptive pain
19. Providing resistance while the patient shrugs his or her shoulders is a test of which cranial nerve?
- A. II
  - B. V
  - C. IX
  - D. XI
20. When using the ophthalmoscope you would:
- A. Remove your own glasses and approach the patient's left eye with your left eye
  - B. Leave the light on in the examining room and remove glasses from the patient
  - C. Remove glasses and set the dioptre setting at 0
  - D. Use the smaller white light and instruct the patient to focus on the ophthalmoscope
21. You are assessing a patient's tympanic membrane and suspect an infection of acute otitis media. Which of the following findings support this?
- A. Absent light reflex, bluish tympanic membrane, oval dark areas
  - B. Displaced light reflex, reddened drum, bulging tympanic membrane
  - C. Oval dark areas on tympanic membrane
  - D. Absent light reflex, air-fluid level or bubbles behind tympanic membrane
22. You are examining the patient's mouth and you note tonsillar enlargement and grade them as 3+. The tonsils would be:
- A. In tonsillar fossa
  - B. Visible beyond anterior pillars
  - C. Touching each other
  - D. Extended  $\frac{3}{4}$  way to midline
23. To use the technique of egophony, ask the patient to:
- A. Take several deep breaths and then hold for 5 seconds
  - B. Say 'eeee' each time the stethoscope is moved

- C. Repeat the phrase "ninety-nine" each time the stethoscope is moved
  - D. Whisper a phrase as auscultation is performed
24. You are conducting a cardiac assessment of your patient. A murmur is heard after S1 and before S2. This murmur would be classified as
- A. Diastolic [possibly benign]
  - B. Diastolic [always pathologic]
  - C. Systolic [possibly benign]
  - D. Systolic [always pathologic]
25. A positive Phalen and Tinel sign are found in a patient with:
- A. A torn meniscus
  - B. Hallux vagus
  - C. Carpal tunnel syndrome
  - D. Tennis elbow

## SECTION B: SHORT ANSWER QUESTION

### Question 1

Mrs. Mavuso is a 68-year-old woman who comes to your clinic with a chief complaint of painful joints and difficulty ambulating. You plan to conduct a functional assessment.

- (a) State 4 signs that suggest acute inflammation in a joint [4]
- (b) Describe the 7 descriptors you will follow when collecting the history of presenting illness from this patient [14]
- (c) Outline the considerations for collecting health history from the elderly patient, Mrs. Mavuso. [3]
- (d) When performing functional assessment for an older adult, state the common adaptations that the aging person makes when attempting the following manoeuvres;
  - i. Walking [1]
  - ii. Climbing up the stairs [1]
  - iii. Picking up object from the floor [1]
  - iv. Rising up from sitting in chair [1]

**Sub-Total Marks: 25**

## Question 2

- A. Sizwe is a 42-year-old man whose family brings him into your consultation room with history of weakness, constipation, lack of appetite, vomiting on attempts of initiating a bowel movement. His past medical history is positive for abdominal TB, on treatment since 2 weeks ago. You perform an abdominal examination
- i. State the rationale for auscultation of Sizwe's abdomen before palpation or percussion [2]
  - ii. Contrast rigidity with involuntary guarding [4]
  - iii. State the likely assessment findings on Sizwe's abdomen [4]
  - iv. Outline the procedure for assessing Sizwe's liver span [8]
- B. Explain the ABCDE of assessment of skin mole changes [5]
- C. Mr Chebe wears corrective lenses and can read the Snellen's chart at 20feet and can read up to line 30
- i. Document Mr Chebe's visual acuity [2]

**Sub-Total marks: 25**

## Question 3

- A. Z. is a 45 year old woman presents with a chief complaint of right hand pain
- i. Identify four (4) pertinent aspects of the past medical history that should be collected from Z? [4]
  - ii. State the information about Z's social history that would be important to document [4]

- B. Review the following SOAP NOTE and answer the questions that follow;

S: This 6 year old boy presents with a sore throat that began 3 days ago. His mother states that he had a fever, seems to have difficulty in swallowing and complains of a headache. His appetite is decreased. He has a runny nose with clear discharge. Denies cough, abdominal pain, vomiting or diarrhea. There are no known exposures to communicable diseases. Panado helps the fever and

sore throat "a little". Past Medical History is negative. Medications: none. The child is generally healthy. He is up to date on immunizations

O: T 37°C, P 98b/m, RR: 20 breaths/min

General: healthy boy in no acute distress

Skin: no rash

HEENT: canals and tympanic membrane are unremarkable. Nasal mucosa is slightly congested with pink turbinates and clear discharge. Pharynx shows 3+ injected tonsils with scant exudates

NECK: supple, tender, moderately enlarged tonsillar lymph nodes

HEART: rate 98 and regular

LUNGS: clear to auscultation, no adventitious breathing. Non-laboured breathing

ABDOMEN: soft, non-distended, mildly tender with no guarding. No organomegaly.

- i. Based on the subjective and objective data, state 2 differential diagnoses for this patient [2]
- ii. Describe the components of a Plan for a SOAP note [5]
- iii. Write a plan for this patient using the components in (ii) above [10]

***Sub-total Marks: 25***