# ROYAL CIVIL SERVICE COMMISSION BHUTAN CIVIL SERVICE EXAMINATION (BCSE) 2016 EXAMINATION CATEGORY: <u>TECHNICAL</u>

### PAPER III: SUBJECT SPECIALIZATION PAPER FOR NURSING

Date: 2 October 2016

Total Marks: 100

Examination Time: 150 minutes (2.5 hours)

Reading Time: 15 minutes (prior to examination time)

#### **GENERAL INSTRUCTIONS**

1. Write your Registration Number clearly and correctly on the Answer Booklet.

- 2. The first 15 minutes is being provided to check the number of pages, printing error, clarify doubts and to read instructions in Question Paper. You are NOT permitted to write during this time.
- 3. This paper consists of **TWO Sections**, namely Section A and Section B.

Section A has two parts: Part I - 30 Multiple Choice Questions.

Part II - 4 Short Answer Questions.

All questions under **Section A** are **COMPULSORY**.

**Section B** consists of 2 case studies. Choose only **ONE** case study and answer the questions under your choice.

- 4. All answers should be written on the Answer Booklet provided to you. Candidates are not allowed to write anything on the question paper. If required, ask for additional Answer Booklet.
- 5. All answers should be written with correct numbering of Section, Part and Question Number in the Answer Booklet provided to you. Note that any answer written without indicating correct Section, Part and Question Number will NOT be evaluated and no marks would be awarded.
- 6. Begin each Section and Part in a fresh page of the Answer Booklet.
- 7. You are not permitted to tear off any sheet(s) of the Answer Booklet as well as the Question Paper.
- 8. Use of any other paper including paper for rough work is not permitted.
- 9. You are required to hand over the Answer Booklet to the Invigilator before leaving the examination hall.
- 10. The Question paper has 9 printed pages including this Instruction Page.

### **GOOD LUCK!**

#### **SECTION A**

### PART I – Multiple Choice Questions (30 marks)

Choose the correct answer and write down the letter of your chosen answer in the Answer Booklet against the question number e.g. 31 (c). Each question carries ONE mark. Any double writing, smudgy answers or writing more than one choice shall not be evaluated.

- 1. Nurses must function within the nurses' Code of Ethics. The Code of Ethics is a set of formal guidelines for governing professional action and it assist the nurse in
  - a. compromising patient care during time constraint.
  - b. problem solving where judgment is required.
  - c. socialising with patents and their relatives.
  - d. None of the above.
- 2. Health education is a important component during nursing interventions because of all the reasons EXCEPT:
  - a. Reduce the patient's frequency of hospital visits.
  - b. Provide continuity of care.
  - c. Encourage patient participation in goal selection and implementation programme.
  - d. Increase patient's knowledge to promote compliance with health regimen.
- 3. Which of the following factors contributes to susceptibility to infections?
  - a. Literacy status
  - b. Economic status
  - c. Nutritional status
  - d. Social Status
- 4. A second year nursing student has just suffered a needle stick injury while working with a AIDS positive patient. Which of the following is the most important action that nursing student should take?
  - a. Immediately see a social worker
  - b. Start prophylactic ART treatment
  - c. Start prophylactic pentamide treatment
  - d. Seek counseling
- 5. Relate the theory to "coping with pain".
  - a. Gate control Theory
  - b. Contingency Theory
  - c. Freudian Psychoanalytic Theory
  - d. Hawthorne Theory
- 6. After injection of these drugs, the site should not be massaged.
  - a. Dexamethasone and Heparin

- b. Insulin and Ranitidine
- c. Heparin and Insulin
- d. Ranitidine and Dexamethasone
- 7. COPD patient on oxygen therapy should be monitored for
  - a. Oxygen narcosis
  - b. Carbon dioxide narcosis
  - c. Both a & b are correct
  - d. Both a & b are wrong
- 8. A thirty five year old male has been an insulin-dependent diabetic for five years and now is unable to urinate. Which of the following would you most likely suspect?
  - a. Atherosclerosis
  - b. Diabetic nephropathy
  - c. Autonomic neuropathy
  - d. Somatic neuropathy
- 9. A nurse is putting together a presentation on meningitis. Which of the following microorganisms has not been linked to meningitis in humans?
  - a. S. pneumonia
  - b. H. influenza
  - c. N. meningitis
  - d. Cl. Difficile
- 10. A fragile 87 year-old female has recently been admitted to the hospital with increased confusion and falls over last 2 weeks. She is also noted to have a mild left hemiparesis. Which of the following tests is most likely to be performed?
  - a. FBC (full blood count)
  - b. ECG (electrocardiogram)
  - c. Thyroid function tests
  - d. CT scan
- 11. The purpose of tracheal intubation/tracheostomy tube placement is to
  - a. establish a patient's airway.
  - b. provide oxygenation.
  - c. provide mechanical ventilation.
  - d. prevent aspiration.
- 12. During blood transfusion, what must the nurse monitor for possible transfusion reaction?
  - a. Resistance reaction
  - b. Leucocyte reaction
  - c. Inflammatory reaction
  - d. Haemolytic reaction

- 13. A nurse is making rounds taking vital signs. Which of the following vital signs is abnormal?
  - a. 11 year old male 90 b.p.m, 22 resp/min., 100/70 mm Hg
  - b. 13 year old female 105 b.p.m., 22 resp/min., 105/60 mm Hg
  - c. 5 year old male- 102 b.p.m, 24 resp/min., 90/65 mm Hg
  - d. 6 year old female- 100 b.p.m., 26 resp/min., 90/70mm Hg
- 14. A patient's chart indicates a history of hyperkalemia. Which of the following would you not expect to see if this condition were acute?
  - a. Decreased HR
  - b. Paresthesias
  - c. Muscle weakness of the extremities
  - d. Migranes
- 15. You are taking the history of a 14 year old girl who has a (BMI) of 18. The girl reports inability to eat, induced vomiting and severe constipation. Which of the following would you most likely suspect?
  - a. Multiple sclerosis
  - b. Anorexia nervosa
  - c. Bulimia
  - d. Systemic sclerosis
- 16. A nurse is caring for an infant that has recently been diagnosed with a congenital heart defect. Which of the following clinical signs would most likely be present?
  - a. Slow pulse rate
  - b. Weight gain
  - c. Decreased systolic pressure
  - d. Irregular WBC lab values
- 17. The chain of infection contains all these components EXCEPT:
  - a. Reservoir
  - b. Body's natural defences
  - c. Susceptible host
  - d. Mode of transmission
- 18. Even though the nurse may obtain the patient's signature on a form, obtaining informed consent is the responsibility of the
  - a. Patient
  - b. Physician
  - c. Student nurse
  - d. Supervising nurse

- 19. A patient's family member says to the nurse, "The doctor said he will provide palliative care. What does that mean?"
  - a. "Palliative care is given to those who have less than 3 months to live"
  - b. "Palliative care aims to relieve or reduce the symptoms of a disease"
  - c. "The goal of palliative care is to affect a cure of a serious illness or a disease"
  - d. "Palliative care means the patient and family take more active role in caring for the patient"
- 20. The nurse is obligated to follow a physician's order unless
  - a. the order is a verbal order.
  - b. the physician's order is illegible.
  - c. the order has not been transcribed.
  - d. the order is a error, violates hospital policy, or would be detrimental to the patient.
- 21. Which of the following is the FIRST priority in preventing infections when providing care for a patient?
  - a. Hand washing
  - b. Wearing gloves
  - c. Using a barrier between a patient and the nurse
  - d. Wearing gowns and goggles
- 22. A child is 5 years old and has been recently admitted into the hospital. According to Erickson which of the following stages is the child in?
  - a. Trust vs. mistrust
  - b. Initiative vs. guilt
  - c. Autonomy vs. shame
  - d. Intimacy vs. isolation
- 23. When the patient is administrated oxygen through simple face mask, the oxygen flow should be delivered at
  - a. 1 to 2 L
  - b. 3 to 4 L
  - c. 8 to 12 L
  - d. None of the above
- 24. The charge nurse observes a new staff who is changing a dressing on a surgical wound. After carefully washing her hands the nurse dons sterile gloves to remove old dressing. After removing the dirty dressing, the nurse removes the gloves and dons a new pair of sterile gloves in preparation for cleaning and redressing the wound. The most appropriate action for the charge nurse is to
  - a. interrupt the procedure to inform the staff nurse that sterile gloves are not needed to remove the old dressing.
  - b. congratulate the nurse on the use of good technique.

- c. discuss dressing change technique with the nurse at a later date.
- d. interrupt the procedure to inform the nurse of the need to wash her hands after removal of the dirty dressing and gloves.
- 25. The nurse assesses a prolonged late deceleration of the fetal heart rate while the patient is receiving oxytocin IV to stimulate labor. The priority nursing intervention would be to
  - a. turn off the infusion
  - b. turn the patient to the left
  - c. change the fluid to Ringer's Lactate
  - d. increase IV rate
- 26. What do you think is the most important nursing order in a patient with major head trauma who is about to receive bolus enteral feeding?
  - a. Measure intake and out put
  - b. Check albumin level
  - c. Monitor glucose level
  - d. Increase enteral feeding
- 27. Which of the following symptoms is the best indicator of imminent death
  - a. A weak, slow pulse
  - b. Decreased muscle tone
  - c. Fixated, dilated pupils
  - d. Slow, shallow respiration
- 28. The nurse writes an expected outcome statement in measurable terms. An example is
  - a. Patient will have less pain.
  - b. Patient will be pain free.
  - c. Patient will report pain acuity less than 4 on a scale of 0-10.
  - d. Patient will take pain medication every 4 hours around the clock.
- 29. After assessing the patient, the nurse formulates the following diagnoses. Place them in order of priority, with the most important (classified as high) listed first. 1. Constipation
  - 2. Anticipated grieving 3. Ineffective airway clearance 4. Ineffective tissue perfusion.
  - a. 3,4,2,1
  - b. 4,3,2,1
  - c. 1,3,2,4
  - d. 3,4,1,2
- 30. A nurse is administering blood to a patient who has a low hemoglobin count. The patient asks how long RBC last in his body? The correct response is
  - a. The life span of RBC is 45 days.

- b. The life span of RBC is 60 days.
- c. The life span of RBC is 90 days.
- d. The life span of RBC is 120 days.

## PART II - Short Answer Questions (20 marks).

This part has 4 Short Answer Questions. Answer ALL the questions. Each question carries 5 marks.

- 1. Write short answers on:
  - a. Nursing process (2 marks)
  - b. Explain briefly the steps of nursing process. (3 marks)
- 2. During the course of nursing interventions, the nurse on duty observed Mr. Karma Dorji praying quietly on his bed after he was informed of his disease condition (advanced colon cancer). The nurse also observed him instructing his son to visit temples and monasteries on his behalf.
  - a) What is the stage of grief Mr. Karma Dorji is going through? (1.5 marks)
  - b) What is the appropriate nursing intervention for him? (2 marks)
  - c) Name the stages of grief. (1.5 marks)
- 3. Define the following:
  - a) Placenta Praevia. (2.5 marks)
  - b) Abruptio Placentae. (2.5 marks)
- 4. Explain the responsibility of nurses for the following:
  - a) Prevention of fall injury. (1.5 marks)
  - b) Foley's catheterization. (1.5 marks)
  - c) Medication (2 marks)

#### **SECTION B**

## **Case Study**

Choose either Case 1 or 2 from this section. Each case study carries 50 marks.

#### Case 1

## Patient Profile:

22 years old, Ms. Pema Lhaden, was admitted to Orthopaedic Ward after hit and run motor accident. She is the only daughter of Mr. Langa who owns a hardware shop. Ms. Lhaden had just graduated from India and was preparing for RCSC examination before the incident.

#### **Scenarios:**

Ms. Pema Lhaden was admitted to Orthopaedic Ward from Operation Theatre after the surgery for fractured right femur. While hospitalized, the patient developed several pressure ulcers, one severe enough to cause her left leg to be amputated. Mr. Langa approached Bhutan Medical and Health Council (BMHC) with written complaint for breach of duty on the part of Orthopaedic Nurses. Examining the records, the investigation team determined the patient was turned 14 times and should have been turned 120 times. The nurses were charged for medical negligence. Most case will be judged on the basis of "if it was not documented, it was not done".

- a) What is medical negligence? (5 marks)
- b) Explain Patient Safety. (5 marks)
- c) Should the Hospital Administration take action against Orthopedic Nurses for medical negligence? (10 marks)
- d) Why documentation is so important? (5 Marks)
- e) If you were to attend to Ms. Pema Lhaden as a nurse, what actions would you take to change this case scenario? (10 marks)
- f) What are the factors that contribute to the development of pressure ulcers? (5 marks)
- g) State at-risk individuals needing pressure ulcer preventive measures. (5 marks)
- h) Explain the formation of Pressure ulcer? (5 marks)

### Case 2

A 50 year old man is admitted in the Medical Ward for treatment of hypertension. He is obese and weighs around 80kgs. On admission, he appeared anxious and asked to the nurse, "Why am I here"? His vital signs BP: 130/110mm2Hg, PR/90min, and RR: 20/min. The physician has asked blood for CBC, LFT and RFT with serum electrolytes, Sugar Fasting and Postprandial. The medications advised are Tab. Nifedipine 20mg sublingual stat and Tab. Esidrex 25 mg OD.

- a) State the definition of hypertension? (3 marks)
- b) Write down the different classifications of hypertension. (6 marks)
- c) Explain the rationale of these investigations. (6 marks)
  - i. LFT:
  - ii. RFT:
  - iii. CBC:
- d) Discuss the risk factors for hypertension. (12 marks)

# PAPER III: SUBJECT SPECIALIZATION PAPER FOR NURSING (Technical category)

- e) State the clinical manifestations of uncontrolled hypertension. (2 marks)
- f) What will be the 3 priority nursing diagnosis for the patient? (6 marks)
- g) Develop nursing care plan for one of these nursing diagnosis. (8 marks)
- h) State the actions and the nursing considerations for the following. (6 marks)
  - i. Tab. Esidrex
  - ii. Tab. Nifedipine
- i) Why do you think the physician has advised for sugar fasting and post prandial? (1 mark)

\*\*\*TASHI DELEK\*\*\*