

NATIONAL UNIVERSITY OF LESOTHO
BSc. NURSING AND MIDWIFERY EXAMINATION
NRS 3306: NURSING OF A CHILD IN SURGICAL UNIT
SUPPLEMENTARY EXAMINATION

AUGUST 2023

MARKS: 100

TIME: 3 HRS

INSTRUCTIONS:

1. Read instructions carefully
2. Answer **all** questions in this paper
3. The paper consists of 8 pages

QUESTION 1

For the following multiple choice questions, choose the most correct answer to the following questions. Write e.g. 2. B

- 1.1 Hypertrophic cardiomyopathy is a recognized association with
- A. Infant of diabetic mother
 - B. Marfan syndrome
 - C. William syndrome
 - D. Trisomy 21.
- 1.2 Congenital heart disease causing cyanosis without respiratory distress include the following EXCEPT
- A. Tricuspid atresia
 - B. Aortic stenosis
 - C. Ebstein anomaly
 - D. Tetralogy of Fallot
- 1.3 The most common cyanotic cardiac lesions present in the newborn period is_____.
- A. Dextroposed transposition of the great arteries
 - B. Hypoplastic left heart syndrome
 - C. Tetralogy of Fallot
 - D. Truncus arteriosus
- 1.4 The MOST common cause of death from cardiac defects in the first month of life is_____
- A. d-Transposition without associated lesion
 - B. Hypoplastic left heart syndrome
 - C. Pulmonary atresia
 - D. Truncus arteriosus
- 1.5 The nurse is providing discharge instructions to the parents of an infant who has a cleft lip. The nurse should instruct the parents to
- A. place the infant in a prone position after each feeding
 - B. encourage the parents to provide the infant rest periods during feedings
 - C. regularly offer the infant a pacifier to enhance the sucking reflex
 - D. elevate the child's head forty five degrees during feeding
- 1.6 The nurse is assessing a child with coarctation of the aorta. Which of the following would be an expected finding?
- A. Diminished blood pressure in the upper extremities
 - B. Excessive weight gain
 - C. High pitched murmur
 - D. Absence of femoral pulses

- 1.7 Of the following, the most common clinical sign of coarctation of the aorta in older children is
- A. Cardiac enlargement
 - B. Notching of the inferior border of the ribs
 - C. A systolic ejection click or thrill in the suprasternal notch
 - D. Differential blood pressure: arms > legs
- 1.8 Postoperative (cardiac surgery) pulmonary hypertension can be managed With
- A. Hyperventilation and inhaled nitric oxide
 - B. Catecholamines
 - C. Phosphodiesterase inhibitors
 - D. Nitroprusside
- 1.9 Indications for surgical closure of a VSD include the following EXCEPT
- A. Patients in whom clinical symptoms and failure to thrive cannot be controlled medically
 - B. Severe pulmonary vascular disease nonresponsive to pulmonary vasodilator
 - C. Infants between 6 and 12 months of age with large defects associated with pulmonary hypertension
 - D. Patients with a supracristal VSD of any size
- 1.10 Regarding supra-cristal ventricular septal defect, the following are true EXCEPT
- A. A supracristal VSD is complicated by aortic insufficiency in 50-90% of patients
 - B. The incidence is higher in Asian children
 - C. Closure of supracristal ventricular VSDs at the time of diagnosis is not recommended in an asymptomatic child
 - D. Aortic insufficiency is most often not recognized until late in the first decade of life
- 1.11 A nurse is caring for a two-month-old infant being evaluated for congenital hypothyroidism. The nurse should recognize which of the following findings as being consistent with congenital hypothyroidism?
- A. The infant sleeps for 6 hours at a time
 - B. The infant has a high-pitched cry
 - C. The infant has been having frequent loose stools
 - D. The infant has 3+ reflexes
- 1.12 Surgical repair of VSD at the time of diagnosis should be considered in
- A. Small supracristal VSD
 - B. Nonrestrictive VSD
 - C. Hemodynamically significant VSD
 - D. Restrictive VSD

- 1.13 Atrial septal defect is characterized by which of the following?
- A. Increased pulmonary blood flow
 - B. Impaired myocardial function
 - C. Tachycardia
 - D. Diaphoresis
- 1.14 When an uncorrected cardiac defect allows blood to shunt from the (high pressure) left side of the heart to the (lower pressure) right side, which of the following can occur?
- A. Cyanosis
 - B. Bounding pulses in upper extremities
 - C. Congestive heart failure
 - D. Decreased pulmonary blood flow
- 1.15 Constipation is characterized by decrease in the frequency or passage of stools, the formation of hard, dry stools usually due to some disease EXCEPT:
- A. Anal fissure
 - B. Imperforate anus
 - C. Pyloric stenosis
 - D. Hirschsprung's disease.
- 1.16 While assessing a newborn with cleft lip, the nurse would be alert that which of the following will most likely be compromised?
- A. Sucking ability
 - B. Respiratory status
 - C. Locomotion
 - D. GI function
- 1.17 Ventricular septal defect may result in which of the following blood flow patterns?
- A. Obstructive blood flow to pulmonary artery
 - B. Increased pulmonary blood flow
 - C. Decreased pulmonary blood flow
 - D. Mixed blood flow
- 1.18 Which of the following ailments causes blood flow impairment?
- A. Aortic stenosis
 - B. Patent ductus arteriosus
 - C. Atrial septal defect
 - D. Transposition of the great arteries
- 1.19 Which of the following structural defects constitutes tetralogy of Fallot?
- A. Ventricular septal defect, overriding aorta, right ventricular hypertrophy, pulmonary stenosis
 - B. Foramen ovale patency, ventricular septal defect, overriding aorta, right ventricular hypertroph

- C. Aortic stenosis, ventricular septal defect, overriding aorta, left ventricular hypertrophy
 - D. Pulmonary stenosis, ventricular septal defect, aortic hypertrophy, left ventricular hypertrophy
- 1.20 Before cardiac catheterization, the heart rate should be counted for how many seconds?
- A. 15
 - B. 30
 - C. 60
 - D. 120
- 1.21 A nurse has just started her rounds delivering medication. A new patient on her rounds is a 4 year-old boy who is non-verbal. This child does not have on any identification. What should the nurse do?
- A. Contact the provider
 - B. Ask the child to write their name on paper.
 - C. Ask a co-worker about the identification of the child.
 - D. Ask the father who is in the room the child's name
- 1.22 Which information obtained from the mother of a child with cerebral palsy most likely correlates to the diagnosis?
- A. She was born at 42 weeks gestation.
 - B. She had meningitis when she was 6 months old.
 - C. She had physiologic jaundice after delivery.
 - D. She has frequent sore throats
- 1.23 A 5-year-old is admitted to the unit following a tonsillectomy. Which of the following would indicate a complication of the surgery?
- A. Decreased appetite
 - B. A low-grade fever
 - C. Chest congestion
 - D. Constant swallowing
- 1.24 Hypertrophic pyloric stenosis has been associated with the following EXCEPT
- A. Eosinophilic gastroenteritis
 - B. Apert syndrome
 - C. Zellweger syndrome
 - D. Trisomy 21
- 1.25 Hirschsprung disease has been seen in association with the following EXCEPT
- A. Microcephaly
 - B. Mental retardation
 - C. Autism
 - D. Cleft lip

- 1.26 Findings that suggest advanced appendicitis on ultrasound include the following EXCEPT
- A. Asymmetric wall thickening
 - B. Increased local tenderness to compression
 - C. Abscess formation
 - D. Associated free intraperitoneal fluid
- 1.27 Of the following, the MOST common childhood cause of nasal polyposis is
- A. Cystic fibrosis
 - B. Chronic sinusitis
 - C. Allergic rhinitis
 - D. Samter triad
- 1.28 Congenital heart disease causing cyanosis without respiratory distress include the following EXCEPT
- A. Tricuspid atresia
 - B. Aortic stenosis
 - C. Ebstein anomaly
 - D. Tetralogy of Fallot
- 1.29 Six hours after birth, the infant is found to have an area of swelling over the right parietal area that does not cross the suture line. The nurse should chart this finding as:
- A. Cephalohematoma
 - B. Molding
 - C. Subdural hematoma
 - D. Caput succedaneum
- 1.30 A 6-month-old client is admitted with possible intussusception. Which question during the nursing history is least helpful in obtaining information regarding this diagnosis?
- A. "Tell me about his pain."
 - B. "What does his vomit look like?"
 - C. "Describe his usual diet."
 - D. "Have you noticed changes in his abdominal size?"

(30 Marks)

QUESTION 2

Indicate whether the following statements are **True** or **False**. Write e.g. 1. True, in full.

- 2.1. A bulging of the veins in the neck could indicate congestive heart failure.
- 2.2. When interpreting lab vales it is important to remember that "normal ranges" may vary by age.

- 2.3. Provision of family-centered care will require use of an organized nursing process to gather assessment data and plan weight appropriate interventions for the pediatric client.
- 2.4. Cultural and ethnic differences and preferences should be considered and accommodated when possible during the nursing care process.
- 2.5. Parenting assessment is important to determine support for the child during and after an illness.
- 2.6. Blood pressure, pulse, and respirations vary with age, consider normal based on the average value for gender.
- 2.7. Involve the client and family in the assessment and diagnostic procedures with a clear explanation of expected assistance.
- 2.8. Typically, the child with aortic stenosis is asymptomatic.
- 2.9. Aortic stenosis can be caused by a muscle obstruction below the aortic valve, an obstruction at the valve itself, or an aortic narrowing just above the valve.
- 2.10. The infant with a complete AV canal defect commonly exhibits moderate to severe signs and symptoms of heart failure.
- 2.11. In the case of Ventricular Septal Defect the nurse needs to determine the health history, which commonly reveals signs of heart failure around 4 to 8 weeks of age.
- 2.12. In tricuspid atresia, blood returning from the systemic circulation to the right atrium directly enter the right ventricle due to agenesis of the tricuspid valve.
- 2.13. In tricuspid atresia, a complete blood cell (CBC) count is needed to assess compensatory increases in hematocrit, hemoglobin, lipid profile and erythrocyte count (RBC) indicating the development of polycythemia.
- 2.14. During tricuspid atresia, oxygenated blood that would normally enter the left atrium now enters the right atrium and passes to the right ventricle.
- 2.15. Some children with coarctation of the aorta grow well into the school-age years before the defect is discovered.
- 2.16. In astigmatism the cornea's curvature is uneven, which results in an irregular quality of vision because the light rays are refracted unevenly.
- 2.17. Strabismus refers to misalignment of the eyes and it is common and occurs in up to 7% of all children.
- 2.18. A congenital cataract is an opacity of the lens of the eye that is present at birth.

- 2.19. Tonsillitis it's the inflammation of the tonsils which often occurs with pharyngitis and, thus, may also be viral or bacterial in nature.
- 2.20. The majority of epistaxis cases are benign, but in children with bleeding disorders or other hematologic concerns, epistaxis should be further investigated and treated.

(20 Marks)

QUESTION 3

A child with appendicitis has the following nursing diagnoses:

- 4.1 Acute pain related to inflamed appendix.
- 4.2 Risk for infection related to possible or actual rupture of appendix

For each diagnosis write (Nursing care plan):

- The expected out comes (1 Mark for each),
- Interventions with rationales (2 Marks for each)
- and evaluation of interventions (2 Marks for each)

(25 Marks)

QUESTION 4

Esophageal atresia and tracheoesophageal fistula are gastrointestinal anomalies in which the esophagus and trachea do not separate normally during embryonic development. What preoperative and postoperative care will you provide for a newborn with esophageal atresia and tracheoesophageal fistula?

(15 Marks)

QUESTION 5

You are nursing a child with the following nursing diagnosis: urinary retention related to anatomic obstruction or dysfunctional voiding as evidenced by dribbling.

- a) What will be your nursing outcome? (4 Marks)
- b) What will be your nursing interventions for a child with this nursing diagnosis?
(6 Marks)

(10 Marks)