



Date of Issue :

Centre :

Sup. Sign :

Seat No. :

BU-5111-O Seat No. _____
First Year B. Sc. (Nursing) Examination
June/July – 2014
Nursing Foundation

Time : 15 Minutes]

[Total Marks : 15

- Instructions:** (1) Section A should be taken back within first 15 minutes.
- (2) Put in the appropriate box below the question number once only.
- (3) Use blue ball point pen only.
- (4) Each question carries one mark.
- (5) Students will not be allotted marks if he/she overwrites, strikes or put white ink on the cross once marked.

SECTION - A
(Objective Questions)

1 MCQ.

1×15=15

(1) What setting is considered most stressful for nurse ?

(a) Cancer treatment center

(b) Nursing home

(c) Operating room

(d) Intensive care unit

(2) During a Bath, the nurse observes that a patient has dry skin. Which action would be best ?

(a) Bath the patient more frequently

(b) Use an emollient on the dry skin

(c) Massage the skin with Alcohol

(d) Discourage fluid intake

(3) When assessing a patient at risk for pressure ulcer formation, which site would the nurse identify as being most common ?

(a) Occipital

(b) Sacrum

(c) Sternum

(d) Humerus

(4) When making an occupied bed, which of the following is most important for the nurse to do ?

(a) Keep the bed in the low position.

(b) Use the bath blanket or top sheet for warmth and privacy.

(c) Constantly keep the side rails raised on both sides

(d) Move back and forth from one side to the other when adjusting the linens

(5) When explaining about factors contributing to pressure ulcer, which factor would the nurse describe as key ?

(a) Moisture

(b) Incontinence

(c) Pressure

(d) Malnutrition

(6) An immobile patient experiences multiple urinary tract infections. Urinary bacteria are more likely to grow when urine is :

(a) Alkaline

(b) Dilute

(c) Aromatic

(d) Acidic

(7) How many cycles of sleep does a person typically go through each night ?

(a) 2

(b) 4 to 5

(c) 10

(d) 20 to 25

(8) A patient complains of pain in a site that different from where it originates. The nurse documents this as :

(a) Transient pain

(b) Superficial pain

(c) Phantom pain

(d) Referred pain

(9) Which of the following terms denotes a patient's inability to void even through the kidneys are producing urine that enters the bladder ?

(a) Urgency

(b) Retention

(c) Oliguria

(d) Dysuria

(10) During removal of a fecal impaction, which of the following could occur because of vagal stimulation ?

(a) Bradycardia

(b) Atelectasis

(c) Tachycardia

(d) Cardiac tamponade

(11) Air that develops in the pleural space is referred to as :

(a) Pneumothorax

(b) Pleural effusion

(c) Hemothorax

(d) Atelectasis

(12) Plasma, the liquid constituent of blood, is correctly identified as :

(a) Interstitial fluid

(b) Intravascular fluid

(c) Intracellular fluid

(d) 40% of total body fluid

(13) While administering a blood transfusion, when would the nurse assess the patient for a blood transfusion reaction ?

(a) 15 minutes after the infusion is started

(b) After the blood is all infused

(c) Every hour

(d) Every 15 minutes

(14) The nurse would instruct Mr. Shah to avoid which of the following foods to prevent a laxative effect ?

(a) Cheese

(b) Alcohol

(c) Eggs

(d) Pasta

(15) A patient's history reveals gorging followed by purging with self - induced vomiting. The nurse interprets this as suggesting which disorder ?

(a) Anorexia

(b) Morbid obesity

(c) Bulimia

(d) Cachexia