

2795/11

VICTORIAN NURSING COUNCIL

Nurses Act 1958

REGISTRATION EXAMINATION - (GENERAL NURSES)

29th November, 1978

EXAMINERS' GUIDE TO SURGICAL NURSING PAPER

The following is forwarded as a general indication to examiners of the essential information expected in answers to the various questions. The suggestions are not intended to be either complete or inflexible, but it is hoped they may be of some guidance to examiners and to that extent lead to uniformity of marking.

- Question 1.
- (a) Any two (2) suitable conditions. - (2 marks)
 - (b) Straight abdominal X-ray - loops of bowel with fluid levels. - (2 marks)
 - (c) Gastric aspiration and I.V. therapy. Analgesic. Reasons for each. - (3 marks)
 - (d) Overcome obstruction. Restore continuity of bowel. - (2 marks)
 - (e) (i) Criteria - minimal aspirate, presence of bowel sounds, diuresis, pulse normal.
(ii) Peristalsis - presence of bowel sounds, & flatus. - (2 marks)
- (11 marks)
- Question 2.
- (a) Biopsy and frozen section. - (1 mark)
 - (b) Modified radical mastectomy is designed to remove all breast tissue and axillary glands. - (2 marks)
 - (c) Explain that although the scar is at present unsightly, it will become less noticeable in time. Explain that with good skin care and application of lanoline, the scar will become more supple. Advise the patient that with a suitable prosthesis, the defect will not be noticeable when she is dressed, even in a bathing suit. Be sure the patient knows where the prosthesis can be purchased and make an appointment for her. Until the prosthesis is obtained, show the patient how to pad the brassiere, to fill the defect. Ensure that the patient has a post-mastectomy exercise chart, and explain that these exercises will tone up her muscles and restore function to near normal. Contact with a patient who has a good cosmetic recovery may be arranged. - (6 marks)
 - (d) (i) Radical mastectomy more extensive removal of tissues and more likelihood of complications.
(ii) Necrosis of wound edges.
Oedema under skin flaps.
Lymphoedema of arm.
Contractures of shoulder joint.
Winging of the scapula - due to damage to long thoracic nerve.
Recurrence of the carcinoma.
(Any 2). - (3 marks)
- (12 marks)

Question 3.

- (a) Haematocrit ratio.
Serum electrolytes and serum protein.
Blood pressure.
Urinary output.
Subsequent serum loss.
Oedema.
Other signs of dehydration. -(5 marks)
- (b) Single room or cubicle.
Temperature regulated 19° (65-70°F)
Air filtration - ultra violet light.
Sterile sheets on bed, changed b.d.
Bed cradle disinfected daily.
Visitors restricted.
Gown and mask worn when attending.
Sterilization of equipment for burns.
Gloves and non-touch technique for burns.
Excreta and soiled articles removed immediately.
Nose and throat swabbed - staff attending negative. -(5 marks)

-(10 marks)

Question 4.

- (a) Infection:- Aseptic technique when caring for tracheostomy.
Sterile dressing around tube.
Humidification of inspired air.
Good suction technique to prevent trauma to the trachea.
(Also prevent trauma by not over-inflating the cuff and letting the cuff down for 5 mins/hr.) -(4 marks)
- (b) Respiratory obstruction:-
Close observation of airway. Suction of secretions p.r.n. Assistance to cough - percussion - posturing.
Humidification of inspired air so that secretions do not harden. Correct position of tube maintained. -(3 marks)
- (c) Patient's anxiety;-
Explanation of all procedures. Provide adequate facilities for communication.
Anticipate needs. Any reasonable answers. Bell at hand. -(2 marks)

-(9 marks)

Question 5.

- (a) Level of consciousness,
Pupils - size, reaction, equality,
Restlessness, confusion,
Vomiting,
Pulse - rate/volume,
Respirations - rate/depth,
Blood pressure, Temperature,
Long tract signs,
Retention of urine,
Plus significance. -(8 marks)
- (b) Extradural (epidural) haematoma. -(1 mark)
- (c) Surgical aspiration to reduce intracranial pressure. -(1 mark)

-(10 marks)

Question 6.

- (a) Vein - which is irregularly dilated, tortuous and lengthened. Usually clearly visible, etc. -(1 mark)
- (b) Hereditary. Hormonal influences. Deficiency of the venous valves. Weakness in the wall of superficial veins. Prolonged standing. -(2 marks)
- (c) (i) A thrombus developing in one of the deep veins - usually of lower limb. -(1 mark)
- (ii) Elevate end of bed - increase venous return.
Deep breathing, leg movements, coughing exercises.
Prevent infection.
Adequate hydration.
Anticoagulant drugs for patients at risk.
Other acceptable answer. -(3 marks)
- (iii) Slight, unexplained fever. Local swelling, tenderness, etc.
Positive Homan's sign. Frequently no symptoms. -(2 marks)
- (iv) Pulmonary embolus. -(1 mark)
- (10 marks)

Question 7.

- (a) (i) Prolapse of the bladder into the anterior vaginal wall. -(1 mark)
- (ii) Stress incontinence. Discomfort due to bulge of displaced viscus into the anterior vaginal wall. Low backache. -(1 mark)
- (iii) Vaginal repair anterior colporrhaphy. -(1 mark)
- (b) (i) Marsupialization. -(1/2 mark)
- (ii) Total hysterectomy and bilateral oophorectomy. -(1 mark)
- (iii) Endometriosis. -(1/2 mark)
- (c) (i) The X-ray study of the uterus and the Fallopian tubes by introducing a radio-opaque dye to assess patency of tube. -(2 marks)
- (ii) Cone biopsy of the cervix - the removal by incision of a cone shaped portion of the endocervix when malignancy is suspected. -(2 marks)
- (9 marks)

Question 8.

- (a) Valvular lesion in pleura and lung surface allows air entry on inspiration, but prevents expulsion of air in expiration. Lung on affected side collapses - mediastinal shaft interferes with function of opposite lung, which may be rapidly fatal, unless treated as emergency. -(2 marks)
- (b) Immediate insertion of wide-bore needle or preferably intercostal catheter. -(1 mark)
- (c) Include - respirations - dyspnoea;
- depth;
- chest movement;
- noise.
Colour - particularly lips/extremities.
Other vital signs.
Anxiety.
General condition - any restlessness.
Observation of drainage apparatus. -(6 marks)
- (9 marks)

- Question 9. (a) Dinner fork deformity of the wrist. --(1 mark)
- (b) (i) Usual plaster check, & limb. --(4 marks)
- (ii) Support, elevate arm.
Handle carefully so as not to indent.
Ensure adequate circulation of air. --(2 marks)
- (iii) Sling.
Elevate further if hand swells.
Observe for swelling etc., as in plaster
check.
Report to doctor if continuous pain &
swelling not relieved by elevation.
Keep plaster dry.
Exercise fingers. --(3 marks)
- (10 marks)
- Question 10. Self-explanatory. --(5 marks)
- Question 11. Any acceptable physical or emotional assistance. --(5 marks)
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