

VICTORIAN NURSING COUNCIL
REGISTRATION EXAMINATION - (GENERAL NURSES)

6TH, 7TH & 8TH JUNE, 1979

COMMENTS OF EXAMINERS

SURGICAL NURSING

Question 1.

- (a) Answers were not specific to the question.
Lack of understanding of the operation.
- (b) Reasonably well answered.
- (c) Candidates did not read the question and showed a lack of understanding.
Generally poorly answered.
Basic nursing observations were lacking.
- (d) Where understanding was shown the question was well answered.
Otherwise poorly answered.

Question 2.

- (a) Well answered.
- (b) (i) Fair.
(ii) Poor care of wound and drain tubes.
(iii) Poor understanding of exercise regime.
- (c) Many candidates did not read the question in a number of instances.

Question 3.

- (a) Reasonably well answered.
- (b) Reasonable answers.
- (c) Candidates did not read the question.
General signs and symptoms where given.
- (d) Fair answers. Some candidates showed poor understanding.
- (e) Poorly answered.

Question 4. General comment - Confusion with D.V.T. and Embolism.

- (a) & (b) Poorly answered.
- (c) (i) Candidates did not read the question.
(ii) Poorly answered.

Question 5. Very poorly answered.
Colostomy care given not education of the patient.
Diet omitted. etc.

Question 6.

- (a) Reasonable answers.
- (b) Great variation. Candidates did not answer prevention of infection of the burn.
Barrier nursing was stated but not reverse barrier nursing. Little understanding of the term.

Question 7.

- (a) Poorly answered.
- (b) Fair answers.
- (c) Poorly answered.
- (d) Poor - no understanding shown in many answers.

Question 8.

- (a) Poorly answered.
- (b) No understanding of the mechanism shown by many candidates answers.
- (c) Fairly poor answers.
- (d) Fair answers.

Question 9.

- (a) Fair answers.
- (b) Poor answers.
- (c) Poor answers.
- (d) Fair answers.

3. (a) (i) Name the type of hernia most frequently occurring in men. —[2 marks]
 (ii) Name three (3) other types of herniae. —[2 marks]
- (b) List four (4) of the predisposing factors in hernia development. —[2 marks]
- (c) State four (4) local symptoms or signs occurring with strangulated hernia. —[2 marks]
- (d) Outline the specific measures needed to decompress and rest the bowel until it recovers following surgery for strangulated inguinal hernia. —[2 marks]
- (e) State the terms used to denote the following operations:—
 (i) Simple excision of a hernial sac as in children. —[2 marks]
 (ii) Surgical repair of the hernia with excision of the sac, and reconstruction and reinforcing of the abdominal wall by various techniques and materials. —[10 marks]
4. A patient is admitted to hospital with an acute femoral embolism.
 (a) What is the likely source of this embolus? —[1 mark]
 (b) List the clinical features which may be exhibited in this patient. —[3 marks]
 (c) An embolectomy is performed within a few hours of admission. Following surgery:—
 (i) Outline the important points in caring for the limb. —[4 marks]
 (ii) State two (2) likely complications that may occur and how they would be recognised. —[4 marks] —[12 marks]
5. Describe in detail how you would educate a patient to regulate the action of a permanent colostomy. —[8 marks]
6. (a) What is the main purpose of each of the following in the treatment of burns which cover a large area of the body surface?
 (i) Plasma or serum transfusion or plasma substitutes. —[1 mark]
 (ii) Catheterization of the bladder. —[1 mark]
 (iii) Haematocrit estimation. —[1 mark]
 (iv) Serum electrolytes or plasma chemistry. —[1 mark]
 (v) High protein diet. —[1 mark]
- (b) Describe the measures which would be taken to prevent infection of a patient with 35% burns to the face, chest and arms. —[6 marks] —[11 marks]
7. Outline the care of a temporary tracheostomy where there is a cuffed tube in situ. Use the following headings:—
 (a) reason for using a cuffed tube; —[2 marks]
 (b) prevention of tracheal necrosis; —[2 marks]
 (c) prevention of respiratory obstruction; —[2 marks]
 (d) prevention of infection. —[4 marks] —[10 marks]