

VICTORIAN NURSING COUNCIL

Nurses Act 1958

REGISTRATION EXAMINATION - (GENERAL NURSES)

3RD JUNE, 1981

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EXAMINERS' GUIDE TO SURGICAL NURSING - SECTION B

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) Hb; )  
Grouping and cross matching. ) Accept any two.  
Chest X-ray. ) )  
-(1 mark)
- (b) Cleansing of operation site.  
Shave of axilla.  
Accept any suitable description. -(2 marks)
- (c) (i) Gradually raised to upright leaning slightly  
to operated side.  
Left arm supported. -(2 marks)
- (ii) Pressure dressing 3-5 days.  
No tension on wound from shoulder movement  
or shoulder lifting.  
Dressing reinforced p.r.n.  
Initial dressing taken down by doctor.  
Daily dressing - aseptic technique.  
Observations of wound - necrosis; fluid  
accumulation; tension.  
Drains - observe - amount and type of drainage.  
- remove when drainage minimal.  
Removal of sutures 10-14 days. -(10 marks)  
-(15 marks)

Question 2.

- (a) To allow re-expansion of the lung and drainage of  
blood/ooze from the pleural cavity without air and  
infection entering the chest. -(2 marks)
- (b) Upright position inclined to unoperated side. -(1 mark)
- (c) Self-explanatory. -(2 marks)
- (d) Keep tubes patent and prevent tension on them. Milking.  
Regime for changing bottles. Aseptic technique. Keep  
below chest level. Secure connections - airtight  
system. Enough tube to move but no dependant loops -  
respiratory distress.  
Observations - drainage - fluid swing etc.  
Acceptable emergency routine if disconnected for  
whatever reason.  
Accept use of thora-seal equipment. -(6 marks)
- (e) Support the patient and wound while coughing. Instruct  
patient to breathe deeply and then cough, 2 hourly.  
Abdominal breathing exercises. Analgesic prior as  
indicated. Physiotherapist. -(3 marks)  
-(14 marks)

Question 3.

- (a) Comfort and reassure Greg. Support limb in a comfortable  
flexed position. No attempt at reduction of fracture.  
Examine Greg for any further injury. Notify parents.  
Immediate transport to medical care. Give nothing by  
mouth. -(4 marks)
- (b) Reduce degree of flexion until a good pulse volume is  
present. Notify medical officer. Observe for any  
numbness and tingling of fingers, pallor, cold and  
lessened movement. Explain and reassure Greg and  
parents if present. -(4 marks)
- (c) A suitable description of Volkmann's ischaemic  
contracture. -(2 marks)  
-(10 marks)