



The University of Fiji
(An Entity of Arya Pratinidhi Sabha of Fiji)



UMANAND PRASAD SCHOOL OF MEDICINE & HEALTH SCIENCES

DEPARTMENT OF NURSING

SEMESTER 1 2026

FINAL EXAMINATION PAPER

**BNSC307: ADVANCE MEDICAL AND SURGICAL
NURSING SKILLS**

Important Instructions to Students:

1. Read the questions, instructions carefully and answer the questions.
2. You are allowed an **extra 10 minutes reading time** (during this time, you are not allowed to write with pen) and **180 minutes (3 Hours) to complete this paper**.
3. Silent, non-programmable calculators are allowed, but not supplied.
4. Write all your answers in the answer booklet provided. If you need extra sheets, please ask from the supervisor. **Write your name, course code and student identification number in the answer booklet and in the attendance sheet.**
5. This Final Course Examination Paper is worth **180 marks contributes 40% of the total course assessments**. Students must **at least score 20%** in this final exam to pass the course.
6. This paper contains five (5) sections A, B, C, D and E. All questions are compulsory.
7. Write all your answers legibly. The marker has the right to award zero for answers that are not legible.
8. This is a **Closed Book Examination**. The University views plagiarism, cheating and dishonest practice as serious offences and if found, offenders are penalized.

Examination Paper Content:

Section	Question	Content	Marks	Suggested time
A	1 - 35	Multiple Choice Questions	35	35 minutes
B	36 - 50	Matching Questions	15	15 minutes
C	51 - 65	True and False	15	15 minutes
D	66 - 71	Short Answer Questions	40	40 minutes
E	72 - 86	Discussion Question	80	75 minutes
TOTAL			185	180 minutes

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SECTION A: MULTIPLE CHOICE QUESTIONS

Question: 1 - 10

(35 marks)

Circle the best answer.

1. The World Health Organization (WHO) defines communicable diseases as _____.
 - A. diseases that are caused by pathogenic organisms such as bacteria, viruses, parasites and fungi.
 - B. are long-lasting and often life-long conditions.
 - C. diseases that are spread through genetic.
 - D. a lifestyle disease.
2. Non-Communicable diseases (NCDs) also known as chronic diseases, generally slow progression and the major cause of global morbidity and mortality. Which of the following is a non-communicable disease?
 - A. Sexually transmitted disease.
 - B. Breast cancer.
 - C. Chicken pox.
 - D. Covid 19.
3. Which of the following is the primary survey priority in trauma care?
 - A. Patient history.
 - B. Full body examination.
 - C. Detailed neurological assessment.
 - D. Airway with cervical spine protection.
4. The Glasgow Coma Scale (GCS) assesses which three components?
 - A. Eye opening, verbal response and motor response.
 - B. Reflexes, motor strength and sensation.
 - C. Consciousness, respiration and pulse.
 - D. Orientation, memory and cognition.

5. Which GCS score indicates severe head injury?
- A. 13-15.
 - B. 9-12.
 - C. ≤ 8 .
 - D. ≤ 10 .
6. Which of the following is a sign of fluid volume deficit?
- A. Dry mucous membranes.
 - B. Jugular vein distention.
 - C. Bounding pulse.
 - D. Edema.
7. What is a normal range for serum sodium?
- A. 120 - 130mmol/l.
 - B. 125 - 135mmol/l.
 - C. 135 - 145mmol/l.
 - D. 145 - 155mmol/l.
8. A patient with fluid overload is most likely to present with:
- A. Hypotension.
 - B. Pulmonary edema.
 - C. Decrease urine output only.
 - D. Tachycardia and weak pulse.
9. Which hormone primary regulates water reabsorption in the kidneys?
- A. Antidiuretic hormone (ADH).
 - B. Aldosterone.
 - C. Cortisol.
 - D. Insulin.
10. Mr X had an operation with a chest drainage inserted. What is the primary purpose of a chest drain?
- A. Reduce pain.
 - B. Delivers oxygen.
 - C. Increase blood flow.
 - D. Remove air/fluid in the pleural space.

11. Which of the following is a common complication after abdominal surgery?

- A. Deep vein thrombosis (DVT).
- B. Hypertension.
- C. Headache.
- D. Asthma.

12. Why is early ambulation encouraged after surgery?

- A. To increase appetite.
- B. To prevent constipation only.
- C. To improve wound healing only.
- D. To reduce risk of DVT and pneumonia.

13. What is the primary pathophysiological change in hypovolemic shock due to trauma?

- A. Increased cardiac output.
- B. Increased tissue perfusion.
- C. Elevated oxygen saturation.
- D. Decreased circulating blood volume.

14. A patient with severe chest trauma is showing signs of hypoxemia. What is the nurse's immediate priority intervention?

- A. Administer pain medication and position patient supine.
- B. Provide high-flow oxygen and assess airway.
- C. Encourage coughing exercises.
- D. Encourage ambulation.

15. A patient with severe diarrhea presents with muscle weakness and irregular heartbeat. Which electrolyte imbalance is most likely?

- A. Hypernatremia.
- B. Hypercalcemia
- C. Hypokalemia.
- D. Hyponatremia.

16. During assessment, a patient with dehydration shows low blood pressure, dry mucous membranes, and poor skin turgor. Which nursing diagnosis is most appropriate?
- A. Risk for nosocomial infection.
 - B. Deficient fluid volume.
 - C. Impaired gas exchange.
 - D. Acute pain.
17. A patient with multiple chronic illnesses is being discharged. Which nursing action best reflects case management principles?
- A. Coordinate referrals to health centers and follow-up care.
 - B. Encourage family to manage care independently.
 - C. Focus only on medication administration.
 - D. Provide discharge instructions only.
18. What is the main purpose of evidence-based practice in nursing?
- A. To replace clinical judgment.
 - B. To follow hospital policies only.
 - C. To prioritize cost reduction only.
 - D. To combine research evidence, clinical expertise, and patient preferences.
19. Why are nursing standards essential in performing advanced procedures?
- A. They reduce documentation workload.
 - B. They are optional guidelines for practice.
 - C. They ensure safe, consistent, and ethical patient care.
 - D. They allow nurses to work independently without supervision.
20. A patient with chronic pain prefers non-pharmacological interventions. Which nursing action best reflects evidence-based practice?
- A. Provide only emotional support.
 - B. Delay intervention until physician review.
 - C. Ignore patient preference and administer opioids.
 - D. Apply relaxation techniques and physiotherapy supported by research evidence.

21. A patient arrives with severe facial trauma and is bleeding heavily. What is the nurse's first priority?
- A. Check neurological status.
 - B. Assess airway patency.
 - C. Administer IV fluids.
 - D. Control bleeding.
22. After inserting a urinary catheter, which finding best indicates effective nursing care?
- A. Clear urine drains into the collection bag without signs of infection.
 - B. No urine output after insertion.
 - C. Patient refuses the procedure.
 - D. Patient reports discomfort.
23. A patient with COPD is recovering post-surgery. Which nursing intervention best promotes lung expansion and oxygenation?
- A. Encourage fluid restriction.
 - B. Position patient in semi-fowlers.
 - C. Administer sedatives for relaxation.
 - D. Restrict mobility to conserve energy.
24. During immediate post-operative care, a nurse notices a patient's SpO₂ dropping to 88%. Which evidence-based action is most appropriate?
- A. Increase IV fluid rate.
 - B. Administer prescribed oxygen therapy.
 - C. Encourage deep breathing and coughing exercises.
 - D. Give fluid bolus and place patient in Trendelenburg position.
25. A patients presented to the Emergency Department with acute abdominal pain. What are your immediate management.
- A. Encourage deep breathing exercise.
 - B. Administer pain relief and give 5L oxygen via hudson mask.
 - C. Massage patients abdominal and give 5L oxygen via hudson mask.
 - D. Position patient, give 5L oxygen via hudson mask and administer pain relief as prescribe.

26. What is the best communication mode in any emergency situation?

- A. ISBAR.
- B. Documentation.
- C. Verbal communication.
- D. Non-verbal communication.

27. What is some of the common errors in emergency management?

- A. No mix skills.
- B. Failing process.
- C. Shortage of staff.
- D. Failure to reassess and poor communication.

28. Which of the following is an example of a communicable disease?

- A. Asthma.
- B. Hypertension.
- C. Leptospirosis.
- D. Myocardial infarction.

29. What are some signs and symptoms of hyponatremia?

- A. Severe pain.
- B. Fever and vomiting.
- C. Confusion and seizure.
- D. Headache and photophobia.

30. Which of the following is an example of a communicable disease?

- A. Asthma.
- B. Hypertension.
- C. Leptospirosis.
- D. Myocardial infarction.

31. Which of the following is an example of an invasive procedure?
- A. MRI scan.
 - B. Ultrasound scan.
 - C. Catheter insertion.
 - D. Blood pressure measurement.
32. What is the main risk associated with invasive monitoring?
- A. Infection.
 - B. Insomnia.
 - C. Weight gain.
 - D. Dehydration.
33. Which of the following are signs of internal bleeding?
- A. Pale skin and low blood pressure.
 - B. Clear vision and low blood pressure.
 - C. Weight gain and vomiting.
 - D. High appetite.
34. What kind of shock is associated with loss of blood volume?
- A. Hypovolemic shock.
 - B. Cardiogenic shock.
 - C. Neurogenic shock.
 - D. Septic shock.
35. What should NOT be given to a patient with acute abdominal pain before diagnosis?
- A. Oxygen.
 - B. IV fluids.
 - C. Monitoring.
 - D. Analgesics before assessment.

SECTION B: MATCHING**Question: 36 - 50****(15 marks)**

Match the numbers 36- 50 in **column 1** by placing the correct alphabet from **column 2**.

Write the number of the question and the alphabet on your answer sheet provided.

Column 1		Column 2	
36.	Hypercapnia.	A.	Shock.
37.	Hypoxia.	B.	Infection spreading in the abdomen.
38.	Monitor GCS.	C.	Low oxygen level in the arterial blood.
39.	Hemorrhage.	D.	When there is an elevated CO ₂ level in the blood causing it more acidic ↓ pH (< 7.35).
40.	Peritonitis.	E.	Inadequate oxygen supply to the tissues.
41.	Hypoxemia.	F.	Detect neurological deterioration.
42.	Tuberculosis.	G.	Present of air in the pleural space.
43.	Hypertension.	H.	A non- communicable disease.
44.	Polyuria.	I.	Present of blood in the pleural space.
45.	Oliguria.	J.	Communicable disease.
46.	Hematuria.	K.	Present of blood in the urine.
47.	Pneumothorax.	L.	When there is less urine output.
48.	Hemothorax.	M.	Filters blood and produced urine.
49.	Kidney.	N.	When there is excessive urine production.
50.	Lungs.	O.	Responsible for cardiac rhythms.
		P.	Responsible for gas exchange.

SECTION C: TRUE AND FALSE

Question: 51- 65

(15 marks)

Write down “T” if the statement is True and “F” if the statement is False in the answer sheet.

No.	Statements
51.	Logroll procedure is used for suspected c-spine injury.
52.	Evidence-based practice in nursing integrates best research evidence, clinical expertise and patient preferences.
53.	A chest drain is commonly inserted to treat asthma.
54.	A patient with hypokalemia may present with cardiac arrhythmias.
55.	Hypernatremia causes cellular dehydration.
56.	Unequal pupils are signs of increase intracranial pressure.
57.	Hypoxia can be treated by giving intravenous fluid.
58.	In ABCDE trauma assessment, “B” stands for bleeding.
59.	Ignoring patient preferences while applying research evidence still qualifies as evidence-based care.
60.	Communicable diseases can spread from person to person, while communicable diseases cannot.
61.	Hypertension is classified under the “3C & 1D” framework as a chronic respiratory disease.
62.	Nursing diagnosis should always be prioritized based on nurse preferences rather than patient safety.
63.	Hypokalemia can cause arrhythmia.
64.	Tuberculosis is best classified as communicable disease.
65.	Hypertension is an example of non-communicable disease.

SECTION D: SHORT ANSWERS QUESTIONS

Question: 66 - 71

(40 marks)

66. Differentiate between invasive procedure and non-invasive procedure. Give an example of each. (6 marks)
67. Discuss three (3) importance of Evidence Based Practice (EBP) in nursing. (6 marks)
68. Evaluate the five (5) steps in the Nursing Process. (5 marks)

SCENARIO 1:

A 68-year-old male patient is admitted to the Acute medical ward (AMW) with complaints of persistent vomiting and diarrhoea for the past three days. He reports weakness, dizziness and reduce urine output. On assessment, he had dry mucous membranes, poor skin turgor. BP 90/60 mmHG, PR 112pbm, u/o 20 mls/hr

69. Analyze two (2) appropriate nursing diagnosis based on the patient data and analyze three (3) clinical manifestations indicative of fluid volume deficit. (5 marks)
70. Evaluate a potential complication that may arise if the patient's condition is inadequately managed and create three (3) priority nursing interventions for the management of this patient. (8 marks)

SCENARIO 2:

A 65-year-old patient is admitted with acute appendicitis and scheduled for emergency surgery.

71. Create five key pre-operative nursing assessments and explain why each is important. (10 marks)

SECTION E: DISCUSSION QUESTIONS

Question: 72- 86

(80 marks)

72. Discuss the term medical and surgical emergency.

(5 marks)

SCENARIO 1:

A 22-year-old male is brought to the Emergency Department after a motor vehicle accident. He is drowsy, opens eyes to pain, makes incomprehensible sounds, and withdraws from pain. Pupils are unequal, B/P 100/60 mmHg, HR 120 bpm, RR 28/min, cool clammy skin and reduce urine output. There is a visible bleeding from his Rt leg.

73. Analyze the patient's condition using the ABCDE approach.

(10 marks)

74. Prioritize immediate nursing intervention.

(5 marks)

75. Justify the need for airway protection.

(5 marks)

76. Evaluate indicators for deterioration.

(5 marks)

SCENARIO 2:

A 72-year-old patient in the surgical ward suddenly develops severe abdominal pain, hypotension, and signs of internal bleeding after a major surgical procedure. As the nurse on duty, you must manage this emergency using advanced nursing skills, emergency assessment, and specialised nursing care according to standards.

77. Analyse the patient's condition.

(5 marks)

78. Evaluate the immediate nursing interventions.

(5 marks)

79. Create a specialised care plan to stabilise the patient.

(5 marks)

SCENARIO 3:

A 22-year-old patient with a known history of Asthma is brought to the emergency department with severe shortness of breath. The patient is sitting upright, appears anxious, and is using accessory muscles to breathe. On assessment, you note the following:

- Respiratory rate: 32 breaths/min
- Pulse: 120 beats/min
- Oxygen saturation: 88% on room air
- Audible wheezing with reduced air entry

80. Analyze the patient's clinical presentation and identify the severity of the asthma attack. (5 marks)
81. Prioritize the immediate nursing interventions for this patient. (5 marks)
82. Evaluate the effectiveness of the initial treatment provided. (5 marks)
83. Give two (2) examples of bronchodilators and justify its use in this scenario. (5 marks)
84. Formulate a brief patient education plan to prevent future exacerbations. (5 marks)

SCENARIO 4:

You are doing morning shift in Acute Medical ward (AMW) and you have a trans in case from CCU ward with post Myocardium Infarction.

85. Analyze your management for this case. (5 marks)

SCENARIO 5:

A 50-year-old patient with a history of Diabetes mellitus presents to the clinic with fatigue, frequent urination, and increased thirst. His blood glucose level is 15 mmol/L. He admits to poor adherence to medication and diet.

86. Analyze the management of this patient. (5 marks)

The End.