



Model answer



First Year
Date: 21/ 1 /2019
Time: 2hours

Benha University

Health Assessment Final Exam

(Total marks 80)

I- Choose the best answers: -

(20 Marks)

1- Assessment of the Mouth & Throat should look for the following except:

- a. Any sores or lesions in your mouth or throat?
- b. Any difficulty swallowing?
- c. have a sore throat and hoarseness?
- d. Vaginal bleeding

2-Lab Values Associated with malnutrition are :

- a. Total lymphocyte
- b. Serum Albumin
- c. Hematocrit
- d. All the following

3- All the following are times for applied abbreviated assessments except:

- a. In an outpatient setting,
- b. Change of shift,
- c. Returning from tests,
- d. Acute care settings upon admission

4- Sense uses for palpation are:

- a. Vision
- b. Hearing
- c. Smell

d. Touch

5- Tympany sound is:

a. a hollow sound heard over a solid structure

b. Like a drum and is heard over air pockets

c. a booming sound heard

d. heard over dense tissues

6- Resonance sound is:

a. A hollow sound heard over a solid structure

b. Like a drum and is heard over air pockets

c. A booming sound heard

d. Heard over dense tissues

7- Flatness sound is:

a. A hollow sound heard over a solid structure

b. Like a drum and is heard over air pockets

c. A booming sound heard

d. Heard over dense tissues

8- The suitable position used for assessing musculoskeletal system is:

a. Prone position

b. Sitting position

c. Sims' position

d. Dorsal recumbent

9- During taking patient past history you must asking about:

a- Allergies

b- Region and radiation

c- Severity of symptoms

d- Timing

10- The complete female reproductive system examination is usually only performed by:

- a. Specially trained nurses
- b. Specially trained nurses or a physician.
- c. Physician only
- d. None all the above

11-Presence of any breast tenderness, lumps, discharge or concerns may indicate for:

- a- Abdominal disorders
- b- Reproductive system problems
- c- Limitation of arms movement
- d- Chest secretion

12- When the nurse assessing the musculoskeletal system, she should do all the following except :

- a. Inspect the color, swelling and deformities of joints.
- b. Palpate heat, tenderness, masses of muscles.
- c. Inspect and palpate inguinal lymph nodes.
- d. Test muscle strength and strength against resistance

13- If the nurse takes history for menstrual condition, she should ask about:

- a. Urgency
- b. Onset, length
- c. Nocturia
- d. Difficult in urination

14-While the nurse does assessment on the patients' ears, she should look for:

- a- dizziness (vertigo)
- b- Size, shape, skin condition, and tenderness
- c- Nasal discharge
- d- Sore throat

15- When you assessing the patients' abdomen, you should examine the following:

- a- Auscultate for bowel sounds
- b- Percuss for general tympany, liver span, splenic dullness
- c- Inspect for bulges, masses
- d- All the above

16- When examining the reproductive systems, ask about the:

- a. Difficulty controlling your urine
- b. Blood in your urine
- c. Pain or burning upon urination
- d. All the above

17- It is not enough to simply ask questions and perform a physical exam, you must critically:

- a. Identify a plan of care for your patient
- b. Write medications
- c. Describe diagnosis
- d. Non all the above

18- Auscultation should be performed:

- a- In quiet room
- b- - Before percussion
- c- - Skin attached firmly by stethoscope
- d- All above

19- The external genitalia examined for:

- a. Skin color
- b. b-Hair distribution
- c. c-Labia and clitoris (swelling, lesions)
- d. All the above

20- When auscultate pulmonary sound place stethoscope between:

- a. From C-7 to T-8, in a right to right comparative sequence.
- b. From C-7 to T-8, in a left to left comparative sequence.
- c. From C-7 to T-8, in a left to right comparative sequence.
- d. From C-8 to T-7, in a left to right comparative sequence.

I- Put (T) if the statement is correct and (F) (20 Marks)

	Statement
1	Deep palpation is a gentles a press of the skin about ½ inch to ¾ inch (1cm to 1.5cm) with the pads of fingers.
2	Hyperressonance is a booming sound heard over air such as in emphysema.
3	Supine position used for Female pelvic and rectal areas examination
4	Dullness is heard over dense tissues including muscle and bone
5	Left Lateral Recumbent for cardiac auscultation, particularly of S3, S4, and some murmurs.
6	Systemic color changes is an indicator during assessing skin system
7	Glasco coma scale used for assessing different brain functions
8	perform straight leg raises with and without resistance is used for motor function assessment
9	symmetry of both pupils are a healthy signs of normal pupillary response
10	discharge, rhinorrhea, swollen, mucosa are signs when looked for eye assessment

١١	Nocturia is getting up at night to urinate
١٢	When assess gastro-intestinal system we must auscultate heart sounds
١٣	Cracks at the side of mouth is a sign of health nutritional status
14	Bleeding gum is a sign of malnutrition
15	normal level of serum Albumin should be >3.5 g/dl
16	The comprehensive assessment is indicated when an abbreviated assessment shows a change in status from the previous assessment
17	The healthcare professional needs to be aware of posture, body language, and tone of voice while interviewing the patient
18	Obtaining information about a patient's present health status allows the nurse to investigate current complaints
19	It isn't necessary to ask the patient about over the counter medications, vitamins, and herbal supplements.
20	A complete nutritional exam is warranted if you suspect your patient is well nourished.

1	2	3	4	5	6	7	8	9	10
f	T	F	f	T	t	t	t	T	f

11	12	13	14	15	16	17	18	19	20
t	f	f	t	t	t	t	t	f	f

I- Match the correct answer in column (A) with corresponding answer in column (B)
(15 marks)

	column (A)		column (B)
1	Cranial Nerve I:	a	Trigeminal
2	Cranial Nerve II	b	Olfactory
3	Cranial Nerve V	c	Oculomotor
4	Cranial Nerves III	d	Optic
5	Cranial Nerve VII	e	Facial Nerve
6	Cranial Nerve XI	f	Spinal Accessory

1	2	3	4	5	6
b	D	a	c	e	f

I- Match the correct answer in column (A) with corresponding answer in column (B)

	column (A)		column (B)
1	Sitting position	a	Used for pelvic and rectal areas examination
2	Prone position	b	Used for spine and joints examination
3	Sims' position	c	Used for Abdomen examination
4	Dorsal recumbent position	d	Used for chest examination
5	Standing position	e	Used for musculoskeletal system examination

1	2	3	4	5
d	e	a	c	b

I- Match the correct answer in column (A) with corresponding answer in column (B)

	column (A)		column (B)
1	Inspection	A	For abdominal gases
2	Auscultation	B	Accumulation of chest secretion
3	Palpation	C	Used for Assessing skin edema
4	Percussion	D	For assessing pupil color

1	2	3	4
d	b	c	a

III- Complete the following: -

(20 Marks)

1- A quick pain assessment “PQRST” means

P=provoking factors (what brought on the pain?)

- Q=quality (describe the pain- i.e. stabbing, throbbing, burning)
- R=radiation (does the pain radiate anywhere?)
- S=severity/symptoms (how bad is the pain-rate it; are there other symptoms with the pain?)
- T=timing (is it constant? What makes it better/worse?)

2-The purpose of the assessment:

- 1- To establish where on the health continuum the individual is.
- 2- To guide how to approach and treat the individual.
- 3- To treatment, to palliative care in relation to the individual's status on the health continuum.
- 4- To formulate a plan related to findings such as medical, physical therapy, nursing,.... etc

Types of General Health Assessments

In general, there are four fundamental types of assessments that nurses perform:

- 1- A comprehensive or complete health assessment
- 2- An interval or abbreviated assessment
- 3- A problem-focused assessment
- 4- An assessment for special populations

Indication of problem-focused assessment

- 1- An interval or abbreviated assessment shows a change in status from the most current previous assessment or report received,
- 2- A new symptom emerges,
- 3- The patient develops any distress. An advantage of the focused assessment is that it directs you to ask about symptoms and move quickly to conducting a focused physical exam

Target population for special assessment are:

- 1- Pregnant patients -Children
- 2- Infants The elderly

The basic components of the complete health history include:

- | | |
|-------------------------|-----------------------|
| 1-Chief complaint | 4-Current lifestyle |
| 2-Present health status | 5-Psychosocial status |
| 3-Past health history | 6-Family history |

الاسماء

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"Good Luck"