

MIZORAM PUBLIC SERVICE COMMISSION
TECHNICAL COMPETITIVE EXAMINATIONS FOR RECRUITMENT TO
LECTURER (MEDICAL SURGICAL NURSING)
UNDER HEALTH & FAMILY WELFARE DEPARTMENT, JANUARY, 2017.

MEDICAL SURGICAL NURSING
PAPER - II

Time Allowed : 2 hours

Full Marks : 200

All questions carry equal marks of 2 each.

Attempt all questions.

1. In which type of lung Cancer is Gynecomastia common:
(a) Small cell (b) Large cell.
(c) Epidermoid (d) Adeno Ca
2. Which of the following IOP lowering drug causes dry mouth:
(a) Brimonidine (b) Brinzolamide
(c) Tafluprost (d) Timolol
3. Most common premalignant oral lesion is :
(a) Leukoplekia (b) Submucos fibrosis
(c) Oral lichen planus (d) Oral hairy leukoplakia
4. Burnt Rope Odour is associated with which poisoning:
(a) Hydrogen sulphide (b) Cyanide
(c) Nitrobenzene (d) Cannabis
5. Beck's triad consist of all except:
(a) Hypotension (b) Distended neck veins
(c) Muffled heart sounds (d) Decrease JVP
6. Ideal body weight is used in dosage calculation for:
(a) Suxamethonium (b) Vecuronium
(c) Bupivacaine (d) Adrenaline
7. PGMI classification is used for
(a) Brain (b) Breast
(c) Liver (d) Retinoblastoma
8. A client is to receive antivenin following a snake bite. Before administering the antivenin, the nurse should give priority to:
(a) Administering a local anesthetic (b) Checking for an allergic response
(c) Administering an anxiolytic (d) Withholding fluids for 6–8 hours

9. The emergency room staff is practicing for its annual disaster drill. According to disaster triage, which of the following four clients would be cared for last?
- (a) A client with a Pneumothorax
 - (b) A client with 70% TBSA full thickness burns
 - (c) A client with fractures of the tibia and fibula
 - (d) A client with smoke inhalation injuries
10. Direct pressure to a deep laceration on the client's lower leg has failed to stop the bleeding. The nurse's next action should be able to:
- (a) Place a tourniquet proximal to the laceration
 - (b) Elevate the leg above the level of the heart
 - (c) Cover the laceration and apply an ice compress
 - (d) Apply pressure to the femoral artery
11. What is your first action after a shock is delivered?
- (a) Wait for the AED to analyze the patient
 - (b) Check pulse
 - (c) Clear the patient.
 - (d) Begin CPR
12. The nurse is preparing to administer Ringer's lactate to a client with hypovolaemic shock. Which intervention is important in helping to stabilize the client's condition?
- (a) Warming the intravenous fluids
 - (b) Determining whether the client can take oral fluids
 - (c) Checking for the strength of pedal pulses
 - (d) Obtaining the specific gravity of the urine
13. An unresponsive client is admitted to the emergency room with a history of diabetes mellitus. The client's skin is cold and clammy, and her blood pressure reading is 82/56. The first step in emergency treatment of the client's symptoms would be:
- (a) Checking the client's blood sugar
 - (b) Administering intravenous dextrose
 - (c) Intubation and ventilator support
 - (d) Administering regular insulin
14. The nurse is called to the room of a client experiencing a tonic-clonic seizure. Which action would the nurse perform first?
- (a) Loosen restrictive clothing
 - (b) Turn the client to the side-lying position
 - (c) Ensure patency of the client's airway
 - (d) Document the sequence of the client's movements
15. Using the coding system for triaging mass casualties, which of the following clients would receive treatment first?
- (a) The client with a black tag
 - (b) The client with a green tag
 - (c) The client with a yellow tag
 - (d) The client with a red tag

16. The client sustains a contusion of the eyeball following a traumatic injury with a blunt object which intervention is initiated immediately?
- (a) Notify the physician
 - (b) Irrigate the eye with cool water
 - (c) Apply ice to the affected eye
 - (d) Accompany the client to the emergency room
17. The nurse is caring for a client who is 1 day postoperative from a total thyroidectomy. The nurse determines it is necessary to call the rapid response team (RRT) when the client displays which of the following?
- (a) Blood pressure of 150/92 mm Hg
 - (b) Harsh, high-pitched respiratory sounds
 - (c) Weak voice and / or hoarseness
 - (d) Decreased deep tendon reflexes
18. A client is scheduled for several tests. Which test should be performed after the thyroid function tests?
- (a) Ultrasound of the carotid arteries
 - (b) EEG
 - (c) Chest X-ray
 - (d) Contrast CT
19. The nurse is caring for a client who has experienced a cerebral vascular accident. The client is displaying oliguria and hyponatremia. The nurse suspects which of the following disorders?
- (a) Thyrotoxic crisis
 - (b) Diabetes insipidus
 - (c) Primary adrenocortical insufficiency
 - (d) Syndrome of inappropriate antidiuretic hormone (SIADH)
20. A nurse is caring for a client with diabetes insipidus. Which laboratory value is most important for the nurse to monitor?
- (a) Glucose
 - (b) Hemoglobin
 - (c) Creatinine
 - (d) Sodium
21. When caring for a client with a diagnosis of diabetes insipidus, which nursing intervention should be the priority?
- (a) Watching for signs and symptoms of septic shock
 - (b) Maintaining adequate fluid intake
 - (c) Checking weight every 3 days
 - (d) Monitoring urine for specific gravity greater than 1.030
22. A client is brought to the emergency room in an unresponsive state, and a diagnosis of hyperglycemic hyperosmolar nonketotic syndrome is made. The nurse would immediately prepare to initiate which of the following anticipated physician's orders?
- (a) Endotracheal intubation
 - (b) 100 units of NPH insulin
 - (c) Intravenous infusion of normal saline
 - (d) Intravenous infusion of sodium bicarbonate

23. A client is admitted to a hospital with a diagnosis of diabetic ketoacidosis (DKA). The initial blood glucose level was 950 mg/dL. A continuous intravenous infusion of regular insulin is initiated, along with intravenous rehydration with normal saline. The serum glucose level is now 240 mg / dL. The nurse would next prepare to administer which of the following?
- (a) Ampule of 50% dextrose
 - (b) NPH insulin subcutaneously
 - (c) Intravenous fluids containing 5% dextrose
 - (d) Phenytoin (dilantin) for the prevention of seizures
24. A physician has prescribed propylthiouracil (PTU) for a client with hyperthyroidism and the nurse develops a plan of care for the client. A priority nursing assessment to be included in the plan regarding this medication is to assess for:
- (a) Relief of pain
 - (b) Signs of renal toxicity
 - (c) Signs and symptoms of hyperglycemia
 - (d) Signs and symptoms of hypothyroidism
25. After hypophysectomy, a client complains of being thirsty and having to urinate frequently. The initial nursing action is to:
- (a) Increase fluid intake
 - (b) Document the complaints
 - (c) Assess for urinary glucose
 - (d) Assess urine specific gravity
26. A nurse is caring for a client after hypophysectomy. The nurse notices clear nasal drainage from the client's nostril. The initial nursing action would be to:
- (a) Lower the head of the bed
 - (b) Test the drainage for glucose
 - (c) Obtain a culture of the drainage
 - (d) Continue to observe the drainage
27. A client is admitted to an emergency room, and a diagnosis of myxedema coma is made. Which action would the nurse prepare to carry out initially?
- (a) Warm the client
 - (b) Maintain a patient airway
 - (c) Administer thyroid hormone
 - (d) Administer fluid replacement
28. A nurse notes that a client with type 1 diabetes mellitus has lipodystrophy on both upper thighs. The nurse would appropriately inquire whether the client
- (a) Rotates sites for injection
 - (b) Administers the insulin at a 45 degree angle
 - (c) Cleanses the skin with alcohol before each injection
 - (d) Aspirates for blood before injection into the subcutaneous tissue
29. A client is diagnosed with pheochromocytoma. A nurse prepares a plan of care for the client; while planning, the nurse understands that pheochromocytoma is a condition that:
- (a) Causes profound hypotension
 - (b) Is maintained by severe hypoglycemia
 - (c) Is not curable and is treated symptomatically
 - (d) Causes the release of excessive amounts of catecholamines
30. A nurse is preparing to provide instructions to a client with Addison's disease regarding diet therapy. The nurse knows that which of the following diets most likely would be prescribed for this client?
- (a) High-fat intake
 - (b) Low-protein intake
 - (c) Normal sodium intake
 - (d) Low-carbohydrate intake

31. A nursing instructor asks a student to describe the pathophysiology that occurs in Cushing's disease. Which statement by the student indicates an accurate understanding of this disorder?
- (a) "Cushing's disease results from an oversecretion of insulin."
 - (b) "Cushing's disease results from an undersecretion of corticotropic hormones."
 - (c) "Cushing's disease results from an undersecretion of mineralocorticoid hormones."
 - (d) "Cushing's disease results from an increased pituitary secretion of adrenocorticotrophic hormone."
32. A client is examined and found to have pinpoint, pink-to-purple, nonbalancing macular lesions 1 to 3 mm in diameter. The nurse documents this assessment as:
- (a) Ecchymosis.
 - (b) Hematoma.
 - (c) Petechiae.
 - (d) Purpura
33. A client is diagnosed with atopic dermatitis. He is upset and asks how to avoid another out-break. The nurse determines that the client needs information regarding:
- (a) Avoiding bacterial infections
 - (b) Avoiding fungal infections.
 - (c) Hereditary factors.
 - (d) Avoiding viral infections.
34. A client is diagnosed with a fungal infection of the scalp. The nurse would document this as:
- (a) Tinea capitis
 - (b) Tinea corporis
 - (c) Tinea cruris
 - (d) Tinea pedis
35. An intubated client with full-thickness, circumferential burns to the chest is experiencing pressure from edema that is inhibiting chest wall expansion. The nurse anticipates that which of the following is the priority intervention for the client?
- (a) Cricothyrotomy
 - (b) Escharotomy
 - (c) Needle thoracentesis
 - (d) Insertion of a chest tube
36. A client has just arrived at the emergency department after sustaining a major burn injury. During the first 8 hours after the injury, the nurse will assess the client for which of the following?
- (a) Hyponatremia and hypokalemia
 - (b) Hyponatremia and hyperkalemia
 - (c) Hypernatremia and hypokalemia
 - (d) Hypernatremia and hyperkalemia
37. A client has just been admitted to the hospital after sustaining partial-thickness burns to both lower extremities and portions of the trunk. The nurse is aware that the most important I.V. fluid to administer is:
- (a) Albumin
 - (b) Dextrose 5% in water
 - (c) Lactated Ringer's solution
 - (d) Normal saline solution with 2 mEq of potassium per 100 ml
38. A client has recently had a skin graft. What is the most important instruction for the nurse to give the client?
- (a) Continue physical therapy
 - (b) Protect the graft from direct sunlight
 - (c) Use cosmetic camouflage techniques
 - (d) Apply lubricating lotion to the graft site
39. A client has a stage II sacral pressure ulcer that is being treated with a transparent film dressing. The nurse is aware that:
- (a) the dressing maintains a moist environment for the wound
 - (b) the dressing is allowed to dry out before removal
 - (c) a gauze dressing covers the transparent film dressing.
 - (d) the transparent film dressing should be tightly packed into the wound

40. A client received burns to his entire back and left arm. The nurse uses the Rules of Nines to calculate that he has sustained burns to what percentage of his body?
- (a) 9% (b) 18%
(c) 27% (d) 36%
41. The client has sustained a burn wound. What is the most important intervention by the nurse to decrease hypertrophic scarring during later stages of healing?
- (a) Remove all tissue in the wound area
(b) Apply continuous pressure using elastic wraps
(c) Wear clothing to protect the burn from the sun
(d) Maintain wound dressing changes
42. A client has been diagnosed with late-stage Lyme disease. The nurse anticipates that the client may exhibit which of the following?
- (a) Arthritis (b) Lung abscess
(c) Renal failure (d) Sterility
43. A client is diagnosed with urticaria. How would the nurse describe this manifestation?
- (a) Elevated, firm circumscribed lesion in the dermis, 1 to 2 cm in diameter
(b) Flat, nonpalpable, irregularly shaped lesion, more than 1 cm in diameter
(c) Transient, elevated, solid, firm, irregularly shaped area of cutaneous edema, with a variable diameter
(d) Elevated, circumscribed lesion in the dermis or subcutaneous layer, filled with liquid or semisolid material
44. A day care nurse is observing a 2-year-old child and suspects that the child may have strabismus. Which observation made by the nurse might indicate this condition?
- (a) The child has difficulty hearing.
(b) The child consistently tilts the head to see.
(c) The child consistently turns the head to see.
(d) The child does not respond when spoken to
45. A nurse is reviewing the laboratory results for a child scheduled for tonsillectomy. The nurse determines that which laboratory value is most significant to review?
- (a) Creatinine level (b) Prothrombin time
(c) Sedimentation rate (d) Blood urea nitrogen level
46. A nurse is caring for a child after a tonsillectomy. The nurse monitors the child, knowing that which of the following indicates that the child is bleeding?
- (a) Frequent swallowing (b) A decreased pulse rate
(c) Complaints of discomfort (d) An elevation in blood pressure
47. The nurse is performing an otoscopic examination on a client with mastoiditis. On examination of the tympanic membrane, which of the following would the nurse expect to observe?
- (a) A pink-coloured tympanic membrane
(b) A pearly coloured tympanic membrane
(c) A transparent and clear tympanic membrane
(d) A red, dull, thick and immobile tympanic membrane

48. The nurse is performing an assessment on a client with a suspected diagnosis of cataract. The chief clinical manifestation that the nurse would expect to note in the early stages of cataract formation is:
- (a) Diplopia
 - (b) Eye pain
 - (c) Floating spots
 - (d) Blurred vision
49. In preparation for cataract surgery, the nurse is to administer prescribed eye drops. The nurse reviews the physician's orders, expecting which type of eye drops to be prescribed?
- (a) A miotic agent
 - (b) A thiazide diuretic
 - (c) An osmotic diuretic
 - (d) A mydriatic medication
50. The client with glaucoma asks the nurse if complete vision will return. The most appropriate response is:
- (a) "Your vision will return to normal."
 - (b) "Your vision will return as soon as the medication begins to work."
 - (c) "Your vision loss is temporary and will return in about 3 to 4 weeks."
 - (d) "Although some vision has been lost and cannot be restored, further loss may be prevented by adhering to the treatment plan."
51. The nurse is performing an admission assessment on a client with a diagnosis of detached retina. Which of the following is associated with this eye disorder?
- (a) Total loss of vision
 - (b) A sense of a curtain falling across the field of vision.
 - (c) Pain in the affected eye
 - (d) A yellow discoloration of the sclera
52. The nurse is caring for a client with a diagnosis of detached retina. Which assessment sign would indicate that bleeding has occurred as a result of the retinal detachment?
- (a) Total loss of vision
 - (b) A reddened conjunctiva
 - (c) Complaints of a burst of black spots or floaters
 - (d) A sudden sharp pain in the eye
53. The nurse is caring for a client following enucleation. The nurse notes the presence of bright red drainage on the dressing. Which nursing action is appropriate?
- (a) Notify the physician
 - (b) Document the finding
 - (c) Continue to monitor the drainage
 - (d) Mark the drainage on the dressing and monitor for any increase in bleeding
54. The nurse is performing a voice test to assess hearing. Which of the following describes the accurate procedure for performing this test?
- (a) Whisper a statement while the client blocks both ears
 - (b) Whisper a statement with the examiner's back facing the client.
 - (c) Whisper a statement and ask the client to repeat it while blocking one ear.
 - (d) Stand 4 feet away from the client to ensure that the client can hear at this distance.
55. The nurse is caring for a hearing-impaired client. Which of the following approaches will facilitate communication?
- (a) Speak loudly
 - (b) Speak frequently
 - (c) Speak at a normal volume
 - (d) Speak directly into the impaired ear.

56. A client with atrial fibrillation is receiving a continuous heparin infusion at 1000 units/hr. the nurse would determine that the client is receiving the therapeutic effect based on which of the following results?
- (a) Prothrombin time of 12.5 seconds
 - (b) Activated partial thromboplastin time of 60 seconds
 - (c) Activated partial thromboplastin time of 28 seconds
 - (d) Activated partial thromboplastin time longer than 120 seconds
57. A client develops atrial fibrillation with a ventricular rate of 140 beats / min and signs of decreased cardiac output. Which of the following medications should the nurse first anticipate administering?
- (a) Atropine sulfate
 - (b) Warfarin (Coumadin)
 - (c) Lidocaine (Xylocaine)
 - (d) Metoprolol (Lopressor)
58. In reviewing the medication records of the following group of clients, the nurse determines that which client would be at greatest risk for developing hyperkalemia?
- (a) Client receiving furosemide (Lasix)
 - (b) Client receiving bumetanide (Bumex)
 - (c) Client receiving spironolactone (Aldactone)
 - (d) Client receiving hydrochlorothiazide (HCTZ)
59. A client who is receiving digoxin (Lanoxin) daily has a serum potassium level of 3.0 mEq/L and is complaining of anorexia. A physician orders a digoxin level to rule out digoxin toxicity. A nurse checks the results, knowing that which of the following is the therapeutic serum level (range) for digoxin?
- (a) 0.5 to 2 ng/mL
 - (b) 1.2 to 2.8 ng/mL
 - (c) 3 to 5 ng/mL
 - (d) 3.5 to 5.5 ng/mL
60. A client is being treated with procainamide (Procanbid) for a cardiac dysrhythmia. Following intravenous administration of the medication, the client complains of dizziness. What intervention should the nurse take first?
- (a) Administer ordered nitroglycerin tablets
 - (b) Measure the heart rate on the rhythm strip
 - (c) Obtain a 12-lead electrocardiogram immediately
 - (d) Auscultate the client's apical pulse and obtain a blood pressure
61. A nurse is monitoring a client who is taking propranolol (Inderal). Which assessment data would indicate a potential serious complication associated with propranolol?
- (a) The development of complaints of insomnia
 - (b) The development of audible expiratory wheezes
 - (c) A baseline blood pressure of 150 / 80 mm Hg followed by a blood pressure of 138 / 72 mm Hg after two doses of the medication
 - (d) A baseline resting heart rate of 88 beats / min followed by a resting heart rate of 72 beats / min after two doses of the medication
62. Intravenous heparin therapy is ordered for a client. While implementing this order, a nurse ensures that which of the following medications is available on the nursing unit?
- (a) Protamine sulfate
 - (b) Potassium chloride
 - (c) Aminocaproic acid (Amicar)
 - (d) Vitamin K (AquaMEPHYTON)

63. A client is at risk for pulmonary embolism and is on anticoagulant therapy with warfarin sodium (Coumadin). The client's prothrombin time is 20 seconds, with a control of 11 seconds. How would the nurse interpret these results?
- (a) Client needs to have test repeated
 - (b) Client results are within the therapeutic range
 - (c) Client results are higher than the therapeutic range
 - (d) Client results are lower than the needed therapeutic level
64. A client is to receive antivenin following a snake bite. Before administering the antivenin, the nurse should give priority to:
- (a) Administering a local anesthetic
 - (b) Checking for an allergic response
 - (c) Administering an anxiolytic
 - (d) Withholding fluids for 6–8 hours
65. An unresponsive client is admitted to the emergency room with a history of diabetes mellitus. The client's skin is cold and clammy, and her blood pressure reading is 82/56. The first step in emergency treatment of the client's symptoms would be:
- (a) Checking the client's blood sugar
 - (b) Administering intravenous dextrose
 - (c) Intubation and ventilator support
 - (d) Administering regular insulin
66. A client has been diagnosed with lung cancer and requires a wedge resection. How much of the lung is removed?
- (a) One entire lung
 - (b) A lobe of the lung
 - (c) A small localized area near the surface of the lung
 - (d) A segment of the lung including bronchioles and alveoli
67. A client is diagnosed with multiple myeloma. The client asks the nurse about the diagnosis. The nurse bases the response on which of the following descriptions of this disorder?
- (a) Malignant exacerbation in the number of leukocytes
 - (b) Altered red blood cell production
 - (c) Altered production of lymph nodes
 - (d) Malignant proliferation of plasma cells and tumors within the bone
68. Parents of pediatric clients who undergo irradiation involving the central nervous system should be warned about postirradiation somnolence. When does this neurologic syndrome usually occur?
- (a) Immediately
 - (b) Between 1 to 2 weeks
 - (c) Between 3 to 4 weeks
 - (d) Between 5 to 8 weeks
69. Which of the following immunizations should not be given to a 4-month-old sibling of a client with leukemia?
- (a) DPT
 - (b) Haemophilus influenzae type b
 - (c) Hepatitis B
 - (d) OPV
70. The nurse is caring for a client following a modified radical mastectomy. Which assessment finding would indicate that the client is experiencing a complication related to this surgery?
- (a) Sanguineous drainage in the Jackson-Pratt drain
 - (b) Arm edema on the operative side
 - (c) Pain at the incisional site
 - (d) Complaints of decreased sensation near the operative site

71. Which of the following statements is correct about the rate of cell growth in relation to chemotherapy?
- (a) Faster growing cells are less susceptible to chemotherapy
 - (b) Non-dividing cells are more susceptible to chemotherapy
 - (c) Faster growing cells are more susceptible to chemotherapy
 - (d) Slower growing cells are more susceptible to chemotherapy
72. The nurse is reviewing the laboratory results of a client receiving chemotherapy. The platelet count is 10,000 cells/mm. Based on this laboratory value, the priority nursing assessment is which of the following?
- (a) Assessment of consciousness
 - (b) Assessment of temperature
 - (c) Assessment of bowel sounds
 - (d) Assessment of skin turgor
73. Nausea and vomiting are common adverse effects of radiation and chemotherapy. When should a nurse administer antiemetics?
- (a) Immediately after nausea begins
 - (b) 30 mins before initiation of therapy
 - (c) During administration of chemotherapy
 - (d) 30 mins After administration of chemotherapy
74. Giving instructions for breast self-examination is particularly important for clients with which of the following medical problems?
- (a) Ovarian cancer
 - (b) Cervical dysplasia
 - (c) Dermoid cyst
 - (d) Endometrial polyps
75. Interleukin-2 (IL-2) is used as adjuvant therapy for a patient with metastatic renal cell carcinoma. The nurse teaches the patient that the purpose of therapy with this agent is to ___
- (a) Protect normal kidney cells from the damaging effects of chemotherapy
 - (b) Enhance the patient's immunologic response to tumor cells
 - (c) Stimulate malignant cells in the resting phase to enter mitosis.
 - (d) Prevent the bone marrow depression caused by chemotherapy.
76. Intermittent positive pressure ventilation can be best delivered by ____
- (a) Venturi Mask
 - (b) Partial rebreather Mask
 - (c) Ambu's Bag
 - (d) Simple Mask
77. The commonest initial set up of Tidal volume in mechanical ventilator of patient weighing 50 kg is
- (a) 250-400 ml
 - (b) 600-750 ml
 - (c) 750-1000 ml
 - (d) 50 -150 ml
78. The FiO_2 Value of the client who breath in room air after extubation is ____
- (a) 0.2
 - (b) 0.3
 - (c) 0,4
 - (d) 0.5
79. The I:E ratio set for a client who suffer from COPD on mechanical ventilation is _____
- (a) 1:2
 - (b) 2:2
 - (c) 1:4
 - (d) 1:1
80. The High PEEP and High Tidal volume setting while client on mechanical ventilation will lead to
- (a) Atelectasis
 - (b) Hypercapnia
 - (c) Paradoxal breathing
 - (d) Barotaruma

81. The SIMV mode has all the following characteristics Except
- (a) Patient receives preset tidal volume and preset number of breaths
 - (b) Asynchrony with patient inspiratory effort
 - (c) Synchronize with patient inspiratory effort
 - (d) Between mandatory breaths patient can have spontaneous breaths
82. The best way to place an oropharyngeal Airway in an unconscious patient is _____
- (a) Inserted “upside down” with the tip against tongue and rotated at mandibular level
 - (b) Inserted “upside down” with the tip against hard palate and the airway is slid into the mouth until the soft palate is reached, at which point it is rotated
 - (c) Inserted “downside to upside” with concave tip facing soft palate and rotated at incisor teeth level, at which point it is placed
 - (d) It’s just placed like ET tube
83. Ventilator Associated Pneumonia (VAP) bundle has all Except
- (a) Frequent suction of ET tube
 - (b) Frequent oral care
 - (c) Head elevated to 30 degree
 - (d) Peptic ulcer prophylaxis
84. Among the following, which one is NOT *an appropriate* method to confirm the position ET tube after intubation?
- (a) Bilateral air entry
 - (b) EtCO₂
 - (c) Chest X ray
 - (d) Increase in SaO₂
85. The commonest complication of mechanical ventilation all, Except __
- (a) VAP
 - (b) Hypercapnia
 - (c) Subcutaneous emphysema
 - (d) Barotrauma
86. The Nurse identifies Decreased Airway pressure alarm associated with decreased SaO₂ while caring a patient on SIMV mode of mechanical ventilation. What is the priority action of Nurse?
- (a) Check Oxygen supply
 - (b) Check for leakage in tubing
 - (c) Check whether tube is kinked due to biting of tube by client
 - (d) Increase FiO₂ to 0.7 and above
87. The ideal cuff pressure to be maintained for a client who had Oro-tracheal Intubation is _____
- (a) 25 to 30 cm H₂O
 - (b) 10 to 20 cm H₂O
 - (c) 30 to 45 cm H₂O
 - (d) 0 to 10 cm H₂O
88. Jones Major Criteria is associated with _____
- (a) Heart failure
 - (b) RHD
 - (c) Heart Block
 - (d) Cardiomegaly
89. Presence of prominent Q wave in V5 to V6 and avL leads suggestive of _____
- (a) Lateral wall Myocardial Injury
 - (b) Left Bundle Branch Block
 - (c) Lateral wall Myocardial Infarction
 - (d) Right Bundle Branch Block
90. Among the following, which one is NOT the feature of Tetralogy of fallot?
- (a) Left ventricular Hypertrophy
 - (b) Right ventricular Hypertrophy
 - (c) Overriding of aorta
 - (d) Ventricular Septal Defect(VSD)

91. The subsequent prolongation of PR interval in ECG suggestive of _____
(a) Asystole (b) Mobitz I
(c) Mobitz II (d) Complete Heart Block
92. Cardiac diseased pregnant women complaints that she is symptomatic with normal activity. What is her functional status of classification as per NYHA?
(a) Class I (b) Class II
(c) Class III (d) Class IV
93. The important teaching that should be given to the patient who is having permanent pace maker is
(a) Avoid cell phones (b) Checking his own pulse
(c) Exercise (d) Checking his own Blood Pressure
94. Physician ordered Dopamine 5mcg/kg/min . The patient body weight is 50 kg. The dopamine is available in 250mg in 50 ml of Normal Saline. How much ml/hour to be given using infusion pump in order to deliver 5mcg/kg/min to the patient?
(a) 3 ml/hour (b) 5 ml/hour
(c) 10 ml/hour (d) 15 ml/hour
95. Intra Aortic Balloon Pump (IABP) used in _____
(a) Aortic aneurysm (b) Corpulmonale
(c) Cardiogenic shock (d) Cardiac arrest
96. Among the following, which drug should not be administered as Bolus Dose?
(a) Calcium (b) Potassium
(c) Atropine (d) Heparin
97. Dressler syndrome is a complication of _____
(a) Myocardial Infarction (b) RHD
(c) VSD (d) Ventricular fibrillation
98. Hepatomegaly, spleenomegaly, Orthopnea, Jugular vein distension (JVP) and pedal edema are the clinical features of _____
(a) RHD (b) IHD
(c) Pulmonary edema (d) Heart failure
99. The position contraindicated for client suffering from cardiogenic shock is _____
(a) Trendelenberg position (b) High Fowler position
(c) Supine Upright (d) Head and Neck elevated
100. Among the following drug, which one is administered through sublingual route for cardiac patients?
(a) Lasix (b) Metabolites
(c) Aspirin (d) Dopamine