**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**END OF YEAR TWO SEMESTER ONE EXAMINATION**

**MARCH 2014 KRCHN CLASS (PRE-SERVICE)**

**STI/RTI EXAMINATION**

DATE: 30 Nov. 2015 TIME:…………………..

**INSTRUCTIONS**

1. Read the questions carefully and answer only what is asked.
2. Enter your examination number and question number on each page used.
3. ALL questions are compulsory.
4. For part 1 (MCQs), write the answer in the spaces provided on the answer booklet and each MCQ is one (1) mark.
5. For Part 2 (SHORT ANSWER QUESTIONS), answer the questions following each other.
6. For Part 3 (LONG ANSWER QUESTIONS), answer to each question MUST start on a separate page.
7. Omission of and or wrong numbering of a question or part of the question will result in 10% deduction of the marks scored from the relevant part.
8. Do NOT use a pencil.
9. Mobile phones are NOT allowed in the examination hall.

For Examiner:

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| --- | --- | --- | --- | --- |
| **MCQS** | **SAQS** | **LAQS 1** | **LAQS 2** | **TOTAL** |
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**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) S T I / R T I– 10 MARKS**

Q.1. The following are true of HIV infection states except:

1. Window period lasts an average of six weeks.
2. The asymptomatic phase lasts from several months to several years.
3. Symptomatic phase lasts from several months to a few years.
4. During the asymptomatic phase HIV test results is negative.

Q.2. Epidemiological synergy between STI / RTI and HIV. Which of the following is correct?

1. STI/RTI treatment has been demonstrated to significantly increase HIV viral shedding.
2. The presence of genital ulcers is known to decrease the risk of HIV transmission.
3. Increased viral shedding has been reported in genital fluids of patients with STI/RTI.
4. STI/RTI plays a significant role in strengthening skin barrier to HIV.

Q.3. Which of the following is not true of rationale for syndromic approach of STI management?

1. Health care providers rely on two approaches to diagnose STI/RTI.
2. Aetiological diagnosis is identifying STI/RTI based on clinical experience.
3. Diagnosis is based on identification of a group of consistent symptoms and easily recognised signs (syndromes).
4. The provision of treatment deals with the majority or most serious organisms responsible for producing the syndrome rather than for specific STI/RTI.

Q.4. The following statements about screening for syphilis in pregnancy are correct except?

1. It should be carried out on all pregnant women.
2. It does not require a pelvic exam.
3. It is costly and should therefore only be carried out on women at high risk.
4. It should result in fewer still births weight babies.
5. It requires a blood test.

Q.5. A 24 year old woman has a white discharge with no lower abdominal pain or tenderness. She is not pregnant what is the treatment on her first visit?

1. Nystatin pessaries bd for 5 days.
2. Metronidazole 2g stat.
3. Nystatin pessaries bd for 5 days and metronidazole 2g stat.
4. Procaine penicillin 2.4mn stat and probenecid 2 tablets stat and nystatin pessaries bd for 5 days.
5. Clotrimazole pessaries od x 6 days.

**PART TWO: SHORT ANSWER QUESTIONS – S T I / R T I – 15 MARKS**

Q.1. What are the five major problems faced in partner notifications. 5 marks

Q.2. List drugs, dosages and duration of cervicitis treatment in pregnancy. 5 marks

Q.3. (a) Define ophthalmic neonatorum. 1 mark

(b) What is the management. 4 marks

**PART THREE: LONG ANSWER QUESTIONS – S T I / R T I – 20 MARKS**

Q.1. A 19 year old university student attends the clinic because of severe right inguinal pain for 3 days. He has had six different sexual partners in the past one year, all university students. He doesn’t use condoms. He saw a sore under his fore skin several days ago. He has an ulcer beneath his fore skin and a 4 cm suppurating node in the right groin.

1. What is the diagnosis? 1 mark
2. What is the management? 4 marks
3. What prevention can be discussed with him. 5 marks

Q.2. A 23 year old female has had a watery greenish discharge down below. It has been there for two weeks and it is getting worse. It smells bad. She does not know if her partner has a discharge or not because she had not seen him for two weeks.

1. What is the most likely diagnosis?. 1 mark
2. What is the appropriate management? 6 marks
3. She returns after one week and still has a discharge. What might be the

reasons. What could you do? 3 marks