**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**YEAR ONE (1) SEMESTER ONE (1)**

**MARCH 2015 KRCHN CLASS (PRE-SERVICE)**

**MIDWIFERY EXAMINATION**

DATE: 24/9/2015 TIME 8.30 – 11.30 PM

**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** |
|  |  |  |  |  |

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) MIDWIFERY– 20 MARKS**

Q.1. During antenatal care the midwife teaches the woman on the following major risk factors:

1. Heart burn, constipation, vaginal bleeding.
2. Vaginal bleeding, severe headache, baby moving less.
3. Laboured breathing, abdominal pains, frequency in micturition.
4. Painting, muscle cramps, feeling very tired.

Q.2. In physiological changes in pregnancy, which term is used to refer to pulsation of the fornices:

1. Chadwick’s sign.
2. Hegar’s sign.
3. Osiander’s sign.
4. Braxton hicks.

Q.3. The relationship between the fetal head and limbs with its trunk is known as:

1. Attitude.
2. Flexion.
3. Lie.
4. Position.

Q.4. Which of the following includes obstetric risk factors of Mother to Child Transmission of HIV:

1. Unprotected sex, low maternal CD4 count, high viral load.
2. Preterm delivery, birth injuries, duration of breastfeeding.
3. Oral trush, routine episiotomy, high viral load.
4. Routine episiotomy, placental disruption, vaginal delivery.

Q.5. The recommendation schedule for four comprehensive personalised antenatal visits is:

1. 1st visit after 16 weeks, 2nd visit 16 – 28 weeks, 3rd visit 28 – 32 weeks, 4th visit 32-36 weeks.
2. 1st visit less than 16 weeks, 2nd visit 16 – 28 weeks, 3rd visit 28 – 32 weeks, 4th visit 32-40 weeks.
3. 1st visit less 16 weeks, 2nd visit 16 – 24 weeks, 3rd visit 24 – 32 weeks, 4th visit 32-40 weeks.
4. 1st visit less than 12 weeks, 2nd visit 16 – 24 weeks, 3rd visit 24 – 32 weeks, 4th visit 32-40 weeks.

Q.6. Which reflex is elicited by stroking the sides of the baby’s mouth and cheek causing the baby to turn towards the source of stimuli and open its mouth?

1. Moro reflex.
2. Suckling reflex.
3. Rooting reflex.
4. Traction reflex.

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) MIDWIFERY– 20 MARKS**

Q.7. In mechanism of normal labour, restitution refers to:

1. The widest transverse fetal skull diameter is born.
2. The occiput rotates anteriorly an 1/8 of a circle.
3. A twist in the neck caused by internal rotation of the head is corrected.
4. The anterior shoulder reaches the pelvic floor and rotates anteriorly to lie under the symphysis pubis.

Q.8. Component of the partograph that monitor the progress of labour include:

1. Moulding, descent, liquor.
2. Fetal heart rate, moulding, descent.
3. Maternal pulse, blood pressure, respirations.
4. Descent. Moulding, cervical dilatation.

Q.9. A new born baby at delivery has a heart rate of less than 100bpm, some movement on stimulation, strong cry and body is completely pink. What is the APGAR score?

1. 9.
2. 10.
3. 8.
4. 7.

Q.10. The term chloasma is best described as:

1. Stretching of the collagen layer of the skin.
2. Reddening of the palms.
3. Minute red elevations in the skin.
4. Pigmentation of the face causing a facial mask.

Q.11. Components of the partograph that are monitored ½ hourly include:

1. Fetal heart rate, uterine contractions, maternal pulse.
2. Blood pressure, maternal pulse, cervical dilatation.
3. Descent, cervical dilatation, moulding.
4. Liquor, fetal heart rate, moulding.

Q.12. Which statement best describes the vertex region of the fetal skull:

1. Lies between the foramen magnum and the posterior fontanelle.
2. Bounded by the posterior fontanelle, anterior fontanelle and two parietal eminencies.
3. From the anterior fontanelle and the coronal suture to the orbital ridges.
4. From the orbital ridges and the root of the neck to the junction of the chin and the neck.

Q.13. When performing examination of the placenta; a midwife finds an extra lobe, which term is used to refer to this anatomical variation?

1. Circumvallate.
2. Succenturiate.
3. Battledore.
4. Velamentous.

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) MIDWIFERY– 20 MARKS**

Q.14. In physiology of peurperium, autodigestion of dead tissues is referred to as:

1. Ischaemia.
2. Involution.
3. Sub involution.
4. Autolysis.

Q.15. A midwife should perform Barlow’s test on a new born to rule out congenital abnormality of the:

1. Hip joint.
2. Shoulder joint.
3. Ankle joint.
4. Knee joint.

Q.16. Which of the following structures bound the uterus anteriorly?

1. Uterovesical pouch and rectum.
2. Uterovesical pouch and the bladder.
3. Recto uterine pouch and the rectum.
4. Recto uterine pouch and the bladder.

Q.17. One of the following includes hormones that are produced by the placenta:

1. Human chorionic gonadotrophic hormone, oestrogen, progesterone, follicle stimulating hormone.
2. Luteinizing hormone, prolactin, oxytocin, oestrogen.
3. Human placental lactogen. Progesterone, oestrogen, human chorionic gonadotrophic hormone.
4. Follicle stimulating hormone, luteinizing hormone, prolactin, oestrogen.

Q18. One of the following statements include pillars of safe motherhood:

1. Post abortion care, infertility, reproductive health for the elderly.
2. Essential obstetric care, neonatal care, adolescents and youth sexual and reproductive health.
3. Family planning, preconception care, infertility.
4. Focused antenatal care, essential obstetric care, post abortion care.

Q.19. Which uterine support maintains the anterverted position of the uterus?

1. Transverse cervical.
2. Broad ligament.
3. Round ligament.
4. Ovarian ligament.

Q.20. Antenatally the fundus is palpable at the upper margin of the umbilicus, what is the gestation?

1. 24 weeks.
2. 12 weeks.
3. 36 weeks.
4. 18 weeks.

**PART TWO: SHORT ANSWER QUESTIONS – MIDWIFERY – 40 MARKS**

Q.1. State five (5) uterine activities that occur in physiology of first stage. 5 marks

Q.2. State five (5) methods of pain relief used in management of normal labour. 5 marks

Q.3. State three (3) objectives of performing first examination of the new-born. 3 marks

Q.4. Draw a well labelled diagram of the coronal section through the pelvis. 6 marks

Q.5. Draw a well labelled diagram of the aerial view of the fetal head. 5 marks

Q.6. State three (3) ways of achieving haemostasis in physiology of third stage. 3 marks

Q.7. State two (2) methods of placental separation. 2 marks

Q.8. List six (6) danger signs in puerperium. 3 marks

Q.9. State six (6) characteristics of a normal new-born baby. 6 marks

Q.10. State two (2) diameters that are found on the fetal trunk. 2 marks

**PART THREE: LONG ANSWER (ESSAYS) QUESTIONS – MIDWIFERY – 40 MARKS**

Q.1. Mrs K O a para 1 now has just delivered a live female infant who scored 9/1, 10/5, 10/10 and weighed 3kg.

(a) Define a normal newborn baby. 2 marks

(b) Describe ways of prevent heat loss in a normal newborn. 4 marks

(c) Describe ways of preventing infections in a normal newborn. 4 marks

(d) Describe the APGAR Score. 10 marks

Q.2. Mrs P W para 1+0 gravida 2 at 20 weeks of gestation has come to the clinic for the first time.

` (a) Describe how weight gained during pregnancy is distributed. 5 marks

(b) Describe the care given to Mrs P W during this first visit. 15 marks