**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**END OF YEAR THREE SEMESTER ONE EXAMINATION**

**MARCH 2013 KRCHN CLASS (PRE-SERVICE)**

**GYNAECOLOGY EXAMINATION**

DATE: 10/9/2015 TIME 1.30 – 4.30 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** |
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**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) GYNAECOLOGY– 10 MARKS**

Q.1. Which of the following is the possible outcome of tubal pregnancy?

1. Formation of a tubal mole.
2. Unformed haematocele.
3. Distended peritoneal cavity.
4. Worse outcomes.

Q.2. The typical characteristics of all types of cancers is:

1. Are abnormal and are made up of one tiny cell.
2. Always abnormal and multiplies out of control.
3. Is a disease of tumours.
4. Are malignant cells and they cause little damage if they are benign.

Q.3. Primary amenorrhoea refers to:

1. A variety of menstrual disorders and dysfunctions of female reproductive cycle.
2. An absence of menses for 3 cycles or six months, after a normal menarche.
3. Is a situation in young women older than 16 years of age, have not begun to menstruate but otherwise show have not begun to menstruate but otherwise show evidence of sexual maturation.
4. A period in a woman’s life when amenorrhoea is considered normal.

Q.4. Colposcopy examination is indicated in:

1. Those having normal cytology smears.
2. Those with grossly abnormal cervical lesions even if cytology is positive.
3. Those with post-coital bleeding even if the smears is negative.
4. Evaluating mainly the changes in the terminal vascular network of the breast cancer.

Q.5. Which one of the following is a true complication recto-vaginal fistula?

1. Bleeding.
2. Ulcerative colitis.
3. Prolonged labour.
4. Necrosis of recto-vaginal fistula.

Q.6. The commonest infective organisms for septic abortion is:

1. Staphylococcus aureus, clostridium welchi.
2. Staphylococcus aureus, trichomonus vaginalis.
3. Clostridium weichi, bacteria.
4. Endotoxins, clostridium welchi.

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) GYNAECOLOGY– 10 MARKS**

Q.7. Tubular necrosis is a complication of:

1. Missed abortion.
2. Therapeutic abortion.
3. Incomplete abortion.
4. Septic abortion.

Write true or false for Q.8 and Q.9.

Q.8. Duct papilloma is a benign tumour which arises in one of the terminal lactiferous ducts.

Q.9. A vaginal fistula that opens into the small bowel is called entero-vaginal fistula.

Q.10. The basic structure of a gynaecological history includes:

1. Introduction, patient name. bleeding after intercourse.
2. Introduction, menstrual history, introduction, frequency.
3. Introduction, menstrual history, social and family history.
4. Menstrual history, frequency and regularity.

**PART TWO: SHORT ANSWER QUESTIONS – GYNAECOLOGY – 20 MARKS**

Q.1. (a) List four (4) functions of female reproductive system. 2 marks

(b) Name three (3) phases that are involved in the reproductive cycle of a woman. 1 ½ mark

(c) Define septic abortion. ½ marks

Q.2. Mary, a 32 year old woman, went to a hospital where you have been posted as a

KRCHN nurse. She realised that there was no fetal movement for twelve days, a

reason for her to visit the health facility. Induction failed and she was done caesarean section. A macerated fetus was extracted. Bwt 2.2 kgs. Mary was discharged home, but came back in two days complaining of tendfer abdomen and leakage of urine through the vagina.

1. Name and define the possible diagnosis. 1 mark
2. State two (2) classifications of obstetric fistula. 4 marks
3. Briefly explain the physiology of obstetric fistula. 4 marks

Q.3. (a) Name four (4) causes of ectopic pregnancy. 2 marks

(b) State four (4) causes of abortions. 2 marks

1. Name four common positions used in gynaecological nursing. 2 marks
2. Name two (2) aims of treatment of cancers. 1 mark

**PART THREE: LONG ANSWER QUESTIONS – GYNAECOLOGY – 20 MARKS**

Q.1. Jenida, a form three student has come with complains of amenorrhoea, abdominal pains, rhythmic and strong uterine contractions. On vaginal examination, the cervix is dilated, and products of conception were felt through the internal os. A diagnosis of inevitable abortion was made.

1. Define the following terms:
2. Abortion.
3. Inevitable abortion.
4. Threatened abortion.
5. Therapeutic abortion. 2 marks
6. State any two (2) complications of abortion. 2 marks
7. Explain the specific management for Jenida. 6 marks

Q.2. Moraa attended a surgical clinic where she was found to have cancer of the breast.

1. Name four (4) signs and symptoms that Moraa will present with. 2 marks
2. Outline three (3) major ways in which cancer of the breast spreads. 3 marks
3. Draw a well labelled diagram of the breast. 5 marks