



KENYA MEDICAL TRAINING COLLEGE
FACULTY OF NURSING
DEPARTMENT OF NURSING

FINAL QUALIFYING EXAMINATION
FOR
CERTIFICATE IN COMMUNITY HEALTH NURSING

PAPER: MIDWIFERY

DATE: 2ND MARCH 2021

TIME: 3 HOURS (2:00PM – 5:00PM)

INSTRUCTIONS

1. This paper consists of:
 - Section 1 (40 Multiple Choice Questions)
 - Section 2 (8 Short Answer Questions)
 - Section 3 (1 Long Answer Question)
2. Attempt ALL Questions
3. Write the EXAMINATION NUMBER given on all the answer sheets provided and on the question paper.
4. Ensure that all examination answer scripts are handed in at the end of the examination
5. Ensure you sign the examination register provided

EXAMINATION NUMBER ECN / FQE / FEB-21 / 362
Clinical Head of Unit
Clinical Head of Unit
Clinical Head of Unit

PART 1 - MULTIPLE CHOICE QUESTIONS (MCQs):

- 1) A midwife diagnoses pregnancy when:
 - a) The woman complains of lower abdominal pain
 - b) There is amenorrhoea
 - c) Presence of human chorionic gonadotrophin hormone in urine
 - d) Frequency of micturition

- 2) The reproductive organs that form the external female genitalia include:
 - a) Labia majora, Mons pubis, Cervix
 - b) Clitoris, Vestibule, Labia minora
 - c) Vagina, Labia minora, Cervix
 - d) Vestibule, Vagina, Clitoris

- 3) The innominate bone consist of:
 - a) Ilium, Ischium, Pubis
 - b) Pubis, Coccyx, Ilium
 - c) Ischium, Sacrum, Coccyx
 - d) Sacrum, Ilium, Ischium

- 4) The anatomical / true conjugate measures:
 - a) 12 cm
 - b) 12.5cm
 - c) 13cm
 - d) 13.5cm

- 5) The marginal insertion of the umbilical cord is referred to as:
 - a) Velamentous
 - b) Succeturiate
 - c) Battledore
 - d) Circumvallate

- 6) The growth and maturation of graafian follicle is determined by:
 - a) Luteinizing hormone
 - b) Follicle stimulating hormone
 - c) Progesterone
 - d) Oestrogen

- 7) The rationale for establishing youth friendly clinics for the providing specialized reproductive health services is:
 - a) The youth are at risk of STI, HIV/AIDS and pregnancy
 - b) Youth are easily approachable
 - c) Majority are literate
 - d) Needs less financial support

- 8) According to Focused antenatal care, a pregnant woman attends antenatal clinic for:
- 3 visits
 - 6 visits
 - 4 visits
 - 2 visits
- 9) Components of birth plan include:
- Place of birth, ANC card, Transportation
 - Funds, Birth companion, ANC Card
 - Birth companion, Transportation, Funds
 - ANC profile, Place of birth, Funds
- 10) State whether true or false on the following statements:
- A midwife is someone recognized as responsible and accountable professional working with women to provide support during pregnancy and delivery.....
 - Midwives are essentially women in the society who assist in delivery.....
- 11) The outcomes of prevention of mother –to- child transmission of HIV include:
- Improved child health and child survival
 - Increased stigmatization
 - Prevention of unintended pregnancy in HIV mothers
 - Increased burden to health care system
- 12) Mrs. Tue aged 35 years para 0+0 gravida1 comes to ANC Clinic. Her last menstrual period is 12/4/2019. Her expected date of delivery is:
- 19/7/19
 - 21/7/20
 - 21/1/20
 - 19/1/20
- 13) Folic acid supplements given during the preconception and antenatal period is for prevention of :
- Microcytic anaemia
 - Neural tube defects
 - Nutritional anaemia
 - Maternal Congenital abnormalities
- 14) First stage of labour is considered to have occurred from:
- Dilatation of the cervical os
 - Onset of labour until full dilation of the cervix
 - Contractions of the uterus
 - Contractions until delivery of the baby

15) The following fetal observations are monitored during active labour:

- a) Fetal heart rate, Moulding, State of membranes
- b) Maternal pulse, Contractions, Fetal heart rate
- c) State of membranes, Cervical dilatation, Moulding
- d) Contractions, Temperature, Urinalysis

16) The purpose of frequent emptying of urinary bladder during labour is:

- a) To assess urinary output
- b) Allow descent of presenting part
- c) Prevent urinary bladder damage in the process of delivery
- d) Augment labour

17) Following delivery of the fetal head, the immediate action of the midwife is:

- a) Encourage the mother to push with every contraction
- b) Continue supporting the perineum to prevent injury
- c) Ask the mother to breathe by mouth as you check the cord round the neck
- d) Cut the cord immediately

18) In the mechanism of labour, the sequence of labour follows:

- a) Flexion, restitution, Lateral flexion
- b) Internal rotation, Complete flexion, Crowning
- c) External rotation, Lateral flexion, Restitution
- d) Complete flexion, Internal rotation, Crowning

19) The period within 1 hour after delivery is identified as:

- a) Second stage of labour
- b) Fourth stage of labour
- c) First stage of labour
- d) Third stage of labour

20) Lochia rubra occurs within day:

- a) 1 - 4
- b) 3 - 6
- c) 4 - 7
- d) 7 - 12

21) The hormone responsible initiation of lactation is:

- a) Oxytocin
- b) Prolactin
- c) Oestrogen
- d) Progesterone

- 22) Pain after delivery as the baby breastfeeds is associated with:
- Infection of the reproductive organs
 - Involution of the uterus
 - Injury to the reproductive system
 - Inadequate supply analgesics
- 23) Normal head circumference measures:
- 25 – 27 cm
 - 18 – 25 cm
 - 30 – 34 cm
 - 35 – 37 cm
- 24) One of the following is an indication of vacuum extraction:
- High head
 - Rigid perineum
 - Fetal distress in second stage
 - Cephalo - pelvic dislocation
- 25) The midwife would prevent physiological Jaundice by:
- Administering Vitamin K.
 - Phototherapy
 - Early breastfeeding
 - Providing warmth to the baby
- 26) Rhesus incompatibility occurs when:
- The mothers blood is Rhesus Positive and the baby is Rhesus negative
 - The mothers blood group is O and the baby is A or B
 - The mothers' blood group is Rhesus Negative and the father is unknown
 - The mother's blood group is Rhesus negative and the baby is Rhesus positive
- 27) The commonest causes of puerperal pyrexia are:
- Pneumonia, malaria
 - Genital tract infection, malaria
 - Deep venous thrombosis, Breast abscess.
 - Mastitis, Pneumonia
- 28) Excessive bleeding after delivery of the baby amounting to over 300mls of blood accompanied by shock is:
- Antepartum haemorrhage
 - Anaphylactic shock
 - Postpartum haemorrhage
 - Placenta abruption

- 29) The following statement is true about prevention of malaria in pregnancy:
- Pregnant women are more at risk of malaria because pregnancy reduces immunity
 - Malaria complicates severely in pregnancy
 - The infection may cause premature labour
 - Malaria is treatable
- 30) Neonatal death occurs:
- Within 28 days of life
 - After 7 days
 - Within 7 days
 - After 28 days
- 31) Causes of pre-term labour include:
- Multiple gestation, Placenta praevia, Congenital abnormality
 - Placenta abruption, Chorioamnitis, Oligohydrannios
 - Malpresentation, Polyhydramnios, Multiple pregnancy
 - Congenital abnormality, Malpositions, Placenta preavia
- 32) The immediate care of a baby suspected to be asphyxiated at birth following difficult labour include:
- Give oxygen, Clear the airway, Identify the baby
 - Wrap the baby, Stimulate the airway, Intubate
 - Intubate, Clear the airway, Give oxygen
 - Keep the baby warm, Stimulate the back, Clear the airway
- 33) Rescue breaths by ambu bag for a severely asphyxiated baby is at a rate of:
- 10 - 20
 - 5 - 10
 - 20 - 30
 - 30 - 40
- 34) The correct position for a woman in labour with cord prolapse is:
- Sitting up
 - Lateral
 - Knee-chest
 - Trendelenberg
- 35) Factors contributing to fetal distress include:
- Obstructed labour, Poor maternal nutrition, Cardiac disease in pregnancy
 - Prolonged labour, Malnutrition, Fever
 - Prolonged labour, Obstructed labour, Fever
 - Poor maternal effort, Obstructed labour, Prolonged labour

36) Risk factors associated with shoulder dystocia are:

- a) Fetal macrosomia, Maternal diabetes, Prolonged second stage
- b) Oxytocin augmentation, Cord prolapse, Contracted pelvis
- c) High parity, Fetal macrosomia, Prolonged labour
- d) Diabetes, Contracted pelvis, Nulliparity

37) One of the immediate complications of amniotic fluid embolism is:

- a) Fetal distress
- b) Maternal distress
- c) Disseminated intravascular coagulation
- d) Increased incidence of mortality

38) The advice a midwife would give to a pregnant woman with two previous caesarean section scar is:

- a) Avoidance of future pregnancies
- b) Prepare for elective surgery
- c) Importance of breastfeeding
- d) Prevention of anaemia in pregnancy

39) Lightening occurs when there is:

- a) Descent of the fetal head into the pelvic brim
- b) Sinking of the uterus in the abdominal cavity
- c) Involution of the uterus
- d) The feeling of being light within the body

40) Postpartum hemorrhage is mainly caused by:

- a) Tissue, tone, thrombin, trauma
- b) Tone, temperature, trauma, tissue
- c) Thrombin, time, tone, trauma
- d) Temperature, trauma, tone, tissue

PART - 11 SHORT ANSWER QUESTIONS (SAQs)

(40 MARKS)

- 1) Draw a well labeled diagram of the lactating breast (5 Marks)
- 2) Outline five (5) functions of the placenta (5 Marks)
- 3) State five (5) characteristics of youth friendly services (5 Marks)
- 4) Outline five (5) findings on vaginal examination (5 Marks)
- 5) Explain three (3) roles of the midwife in the prevention of heat loss in the newborn (6 Marks)
- 6) Outline four (4) characteristics of a neonate (4 Marks)
- 7) State five (5) danger signs in pregnancy (5 Marks)
- 8) Outline five (5) complications of breech presentation (5 Marks)

PART 111 - LONG ANSWER QUESTION (LAQ)

(20 MARKS)

- 1) Mrs Dedeeto aged 30years old Para 0+0 gravida 1 is admitted to labour ward at 38 weeks gestation with complains of lower abdominal and back pain.
 - a) Explain three (3) signs of true labour (6 Marks)
 - b) Describe the admission process of Mrs. Dedeeto (12 Marks)
 - c) State two (2) nursing diagnoses in normal labour (2 Marks)