



**NURSING FINAL QUALIFYING EXAMINATION.
DIPLOMA IN COMMUNITY HEALTH NURSING.
PAPER TWO (MIDWIFERY)**

DATE: WEDNESDAY

4TH FEBRUARY 2015

Time Allowed: 3 Hours

9:00am -12:00 Noon.

INSTRUCTIONS TO CANDIDATES:

1. ENTER YOUR EXAMINATION NUMBER on the space provided on the examination answer booklet and inside every page of the answer booklet.
2. Enter QUESTION NUMBERS on the space provided in the examination answer book.
3. Confirm you have written the EXAM and QUESTION numbers correctly before handing in your booklet
4. 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.
5. Observe all the examination rules and regulations as stipulated in the college rules and regulations.
6. Follow any other instructions from the supervisor as may be necessary.
7. Mobile phones are NOT allowed in the examination hall.

Part one: Multiple Choice Questions (20 Marks)

1. The hormones responsible for the secretory phase of the menstrual cycle are:

- a) Oestrogen, progesterone
- b) Gonadotrophin, oestrogen
- c) Luteinizing, progesterone
- d) Follicle stimulating, gonadotrophin

2. The **obstetric conjugate** is important because it:

- a) Provides space for the passage of the foetus
- b) Is the most important pelvic landmark
- c) Is the diameter of the midcavity
- d) Occupies the area from the uppermost point of the symphysis pubis

3. After fertilization the layer responsible for the formation of the skin and the nervous system is:

- a) Endoderm
- b) Mesoderm
- c) Ectoderm
- d) Basal layer

4. Match the words in column A with the correct phrases in column B

COLUMN A

- a) Monozygotic twin
- b) Decidua

COLOMN B

- i. Is the outmost layer of the uterine cavity
- ii. Two chorions
- iii. One ovum one spermatozoa
- iv. Name given to endometrium during pregnancy
- v. Two ova and one spermatozoa

5. During antenatal care, the midwife teaches the client on the following major risk factors:

- a) Backache, blurring vision, frequency of micturation
- b) Frequency of micturation, severe headache, backache
- c) Vaginal bleeding, severe headache, epigastric pain
- d) Vaginal bleeding, frequency of micturation, blurring vision

6. The management of hyperemesis gravidarum includes:

- a) Antibiotics, psychological support
- b) Psychological support, correct fluid and electrolyte imbalances
- c) Correct fluid and electrolyte imbalances, antibiotics
- d) Encourage oral fluids, antiemetics

7. The midwife will encourage the mother to empty the urinary bladder during first stage of labour mainly to:

- a) Minimize infection during labour
- b) Avoid complications during second stage and third stage of labour
- c) Prevent contamination during second stage of labour
- d) Avoid bladder rupture during third stage of labour

8. The midwife's most appropriate action immediately the fetal head is delivered is:

- a) Check the cord round the neck
- b) Wait for restitution to take place
- c) Administer injection oxytocin
- d) Ask the mother to push

9. A neglected shoulder presentation will be diagnosed when:

- a) Anterior fontanelle felt on vaginal examination
- b) An arm is presenting
- c) The presenting part is out of reach
- d) There is a very large caput

10. Indicate whether the following statements are TRUE or FALSE

- a) In brow presentation, the presenting diameter is mento-vertical of 13.5 cm
- b) Inco-ordinate uterine action results in obstructed labour

11. **On the examination of the placenta, absence of one umbilical artery is an indication of:**

- a) Placental insufficiency
- b) Atresias
- c) Heart disease
- d) Renal anomalies

12. **Twenty four hours after delivery, the fundus is:**

- a) 5cm below the umbilicus
- b) 12cm above the umbilicus
- c) Midway between the symphysis pubis and the umbilicus
- d) At the level of the umbilicus

13. **The milk secreting cells in the breast are referred to as:**

- a) Acini cells
- b) Myoepithelial cells
- c) Alveolar cells
- d) Montgomery tubercle

14. **A warning sign of puerperal psychosis which a midwife should observe is:**

- a) Mother feels sleepy all the time, unable to attend to her needs
- b) Persistent insomnia, fears of unknown
- c) Increased appetite, Persistent insomnia
- d) Increased lactation, fears of unknown

15. **Cephalohaematoma is a swelling on the foetal skull due to:**

- a) Accumulation of blood under the Skin of the scalp
- b) Accumulation of blood under the Dura matter
- c) Accumulation of blood under the Tentorium cerebella
- d) Accumulation of blood under the Periostum of one of the skull bones

16. **The commonest causative organism of ophthalmia neonatorum is:**

- a) Candida albicans
- b) Staphylococcus aureus
- c) Neisseria gonorrhoea
- d) Beta-haemolytic streptococcus

17. **Deaths of newborns that occur in the first week of life are classified as:**

- a) Infant deaths
- b) Fresh still births
- c) Perinatal deaths
- d) Neonatal deaths

18. **The leading causes of maternal death in developing countries include:**

- a) Haemorrhage, pulmonary embolism, sepsis
- b) Haemorrhage, sepsis, hypertensive disorders
- c) Haemorrhage, pulmonary embolism, hypertensive disorders
- d) Haemorrhage, heart disease, sepsis

19. **The appropriate action the midwife would take to minimize mother to child transmission of HIV during vaginal delivery include:**

- a) Minimize number of vaginal examinations, avoid perineal tears
- b) Minimize number of vaginal examinations , wipe the baby immediately
- c) Avoid artificial rupture of membranes, wipe the baby immediately
- d) Avoid perineal tears, wipe the baby immediately

20. **The risk factors that will lead to shoulder dystocia during labour include:**

- a) Oxytocin augmentation, prolonged labour, post-term pregnancy
- b) Oxytocin augmentation, prolonged labour, prolonged second stage of labour
- c) Obstructed labour , prolonged second stage of labour, post-term pregnancy
- d) Prolonged labour, Oxytocin augmentation, obstructed labour

Part Two: Short Answer Questions-(40 Marks)

1. Draw and label a diagram of the female external genitalia (5marks)
2. Explain two (2) effects of pregnancy on the urinary system (4marks)
3. Outline five (5) nonpharmacological ways of relieving pain in labour (5marks)
4. State four (4) factors which determine trial of labour (4marks)
5. Explain three (3) effects of precipitate labour to the mother (6marks)
6. Outline four (4) roles of the midwife in the prevention of anaemia in pregnancy (4marks)
7. Explain three (3) health messages a midwife will give to a postnatal mother to prevent development of deep venous thrombosis (6marks)
8. Explain three (3) factors that lead to increase in perinatal mortality (6marks)

Part three: Long Answer Question (40 Marks)

1. **Mother x has delivered a normal newborn at 38 weeks gestation**
 - a) Differentiate between a normal and a small for gestation newborn (3marks)
 - b) Explain three (3) physiological changes that take place in the gastrointestinal system of the newborn (6marks)
 - c) Describe the management of the baby for the first 72 hours (11marks)

2. **Mrs. Lolo para 2+0 is brought to the healthy facility and bleeds profusely immediately after delivery of the baby due to atonic uterus**
 - a) Formulate two (2) nursing diagnoses for Mrs. Lolo (2marks)
 - b) State three (3) predisposing factors to primary post partum haemorrhage (3marks)
 - c) Describe the specific management of Mrs. Lolo till bleeding stops (11marks)
 - d) Outline four (4) measures a midwife would take antenatally to prevent postpartum haemorrhage (4marks)