

FINAL QUALIFYING EXAMINATION DIPLOMA IN COMMUNITY HEALTH NURSING PAPER TWO

DATE: WEDNESDAY

18TH JANUARY 2017

TIME ALLOWED: 3 HOURS

9:00AM -12:00 NOON.

INSTRUCTIONS TO CANDIDATES:

- 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 <u>NOT</u> allowed in the examination hall.

Part One: Multiple Choice Questions: (40 marks)

- The dominant hormone of the anterior pituitary gland during the proliferative phase is:
 - a) Oestrogen
 - b) Progesterone
 - c) Luteinizing hormone
 - d) Follicle stimulating hormone
- 2. During the development of the embryo, the layer from which the digestive, respiratory and the urinary systems are formed is:
 - a) Mesoderm
 - b) Ectoderm
 - c) Endoderm
 - d) Trophoblast
- 3. The production of surfactant factor usually commences at:
 - a) 20 weeks
 - b) 22 weeks
 - c) 32 weeks
 - d) 34 weeks
- 4. Folic acid is important for the prevention of:
 - a) Spina bifida
 - b) Microcephaly
 - c) Hydrocephaly
 - d) Omphalocele
- 5. Lateral abdominal palpation is performed during the antenatal period to ascertain the:
 - a) Lie, gestation, descent
 - b) Lie, position, presentation
 - c) Position, presentation, denominator
 - d) Position, gestation, descent
- 6. During labour, retraction of the uterine muscle is important because it assists

in:

- a) Rupture of the membrane
- b) Formation of retraction ring
- c) Descent of the fetus
- d) Blood flow to the placenta

7. Engagement is said to have occurred when the widest presenting diameter of the foetal head has passed through the:

- a) Pelvic outlet
- b) Pelvic cavity
- c) Pelvic brim
- d) Level of the ischial spines.

8. The management of hyperemesis gravidarum includes:

- a) Antibiotics, psychological support
- b) Correct fluid and electrolyte imbalances, antibiotics
- c) Correct fluid and electrolyte imbalances, emetics
- d) Psychological support, correct fluid and electrolyte imbalances

9. The movements which occur during mechanism of normal labour in sequence are:

- a) Descent, internal rotation of the head, flexion, extention of the head, restitution, internal rotation of the shoulders, lateral flexion,
- b) Descent, flexion, internal rotation of the head, extension of the head, restitution, internal rotation of the shoulders, lateral flexion
- c) Descent, flexion, internal rotation of the head, internal rotation of the shoulders, extention of the head, lateral flexion
- d) Descent, flexion, internal rotation of the head, restitution, extension of the head, restitution, lateral flexion

10. The causes of delayed second stage of labour include:

- a) Shoulder dystocia, prepicipitate labour, strong contractions
- b) Cord round the neck, prepicipitate labour, uterine inertia
- c) Uterine inertia, shoulder dystocia, strong contractions
- d) Shoulder dystocia, cord round the neck, uterine inertia

11. Footling breech should be delivered by:

- a) Caesarean section
- b) Burns marshal manoeuvre
- c) Lovesets' manoeuvre
- d) Performing a generous episiotomy

12. The role of the midwife in the control of pain during labour includes:

- a) Fluid administration, breathing technique.
- b) Breathing technique, back massage.
- c) Fluid administration, back massage.
- d) Oral sips of glucose, breathing technique.

13. The rationale for using prostaglandin gel in a client prior to induction of labour is to:

- a) Prevent cervical tears and lacerations
- b) Stimulate uterine contractions
- c) Soften and efface the cervix
- d) Decrease pain sensation during labour

14. A third degree perineal tear predisposes a woman to:

- a) Recto-vaginal fistula
- b) Vesico-vaginal fistula
- c) Vulval haematoma
- d) Incontinence of urine

15. Match the items in column A with the statements in column B

Column A

- a) Lie − ∨
- b) Position 11

COLUMN B

- I. The part of the foetus which lies at the pelvic brim
- II. Relationship of the denominator to the six areas of the pelvic brim
- III. Relationship of the long axis of the foetus to the long axis of the abdomen
- IV. Relation of the foetal limbs and the head to its trunk
 - V. Relationship between the long axis of the foetus and the long axis of the uterus

16. The factors that initiate respiration in a newborn at birth are:

- a) Lack of carbon dioxide and high level of oxygen in the blood stream
- b) Lack of oxygen and low level of carbon dioxide in the blood stream
- c) Lack of oxygen and high level of carbon dioxide in blood stream
- d) High levels of oxygen and high levels of carbon dioxide in the blood stream

17. The living ligatures that help in controlling bleeding in the postpartum period are located in the:

- a) Upper uterine segment
- b) Lower uterine segment
- c) Perimetrium
- d) Endometruim

18. The factor in the breast milk that inhibits the growth of pathogens in the gut of the newborn is:

- a) Anti-allergic factors
- b) Lactose
- c) Lactoferin
- d) Lactobacillus

19. Indicate whether the following statements are true or false:

- a) A baby born of tuberculosis mother whose sputum smear is negative two months before delivery should be given BCG.
- b) A baby born of tuberculosis mother whose sputum smear is positive two months before delivery should be given isoniazid 5mg/kg body weight for six months.

20. A mother who seeks contraceptive method at 6 weeks postpartum and breastfeeding should be advised to use:

- a) Minipill, logynon
- b) Jadelle, microgynon
- c) Logynon, intrauterine copper device
- d) Microlut, intrauterine copper device

Part Two: Short Answer Questions: (40 marks)

- 1. Draw and label a diagram showing the structures of the female breast (5marks)
- 2. State four (4) routine blood tests under taken during the first antenatal visit

(4marks)

- 3. State five (5) health messages a midwife would share with a pregnant woman on the prevention of malaria (5marks)
- **4.** Outline four (4) findings the midwife will identify to diagnose occipito-posterior position (4 Marks)
- 5. State five (5) interventions of the midwife during first stage of labour (5marks)
- **6.** Outline five (5) advantages of kangaroo baby care (5marks)
- 7. Outline four (4) health messages a midwife would give to a postnatal mother on discharge (4Marks)
- **8.** Formulate three (3) nursing diagnoses of an infant with apnoea (3marks)
- 9. Using the following headings, write short note on magnesium sulphate
 - Dosage and one route of administration (1marks)
 - II. Mode of action (2marks)
 - III. Two (2) precautions (2marks)

Part Three: Long Answer Questions: (40 marks)

- Mrs susumake para 5+0 is brought to the healthy facility and starts to bleed profusely immediately after delivery of the baby:
 - a) State two (2) types of post partum haemorrhage

(2marks)

- b) Outline three (3) predisposing factors to post partum haemorrhage (3marks)
- c) Describe the specific management of Mrs susumake till bleeding stops

(11 marks)

- d) Outline four (4) measures a midwife would undertake antenatally to prevent postpartum haemorrhage (4marks)
- 2. Baby chekicheki born at term scores 9/1, 10/5 and 10/10:
 - a) State three (3) reflexes elicited by the newborn at birth

(3marks)

- b) Explain three (3) physiological changes that occur in a normal newborn immediately after birth (6marks)
- (11marks) Describe the management of baby chekicheki for the first 24 hours