



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

**DATE: WEDNESDAY**

**21<sup>ST</sup> JUNE 2017**

**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 1-MULTIPLE CHOICE QUESTIONS (20 MARKS)**

### **1.The secretory phase of menstrual cycle is:**

- a) Under the influence of progesterone and oestrogen from the corpus luteum and the functional layer thickens and becomes spongy.
- b) Under the control of oestrogen and consists of regrowth and thickening of the endometrium
- c) Characterized by vaginal bleeding 3-5 day and the endometrium is shed down to the basal layer.
- d) Characterized by growth of the graafian follicles under the influence of follicle stimulating hormone.

### **2.The physiological changes in the alimentary system during pregnancy includes;**

- a) Heart burn, bleeding gums
- b) Constipation , stasis of urine
- c) Heart burn, Oedema of gums
- d) Stasis of urine, bleeding gums.

### **3.The intervention during 4<sup>th</sup> focused Antenatal visit includes:**

- a) Check on individual birth plan, give 2<sup>nd</sup> dose of sulfadoxin pyrimethazine, look for anaemia
- b) Look for anemia, give sulfadoxin pyrimethazine, do vaginal examination.
- c) Update on individual birth plan, look for anaemia, and check foetal presentation.
- d) Do physical examination, advice on individual birth plan, screen for syphilis.

### **4.The four comprehensive personalized antenatal visits according to World Health Organization are scheduled as.**

- a) 1<sup>st</sup> visit 20 weeks, 26-28weeks , 28-32 weeks
- b) 1<sup>st</sup> visit less than 16 weeks, 16-20 weeks ,26-34weeks.
- c) 1<sup>st</sup> visit less than 16 weeks , 16 -28 weeks , 32 -34 weeks.
- d) 1<sup>st</sup> week less than 16 weeks, 22- 30 weeks, 36 -40 weeks.

**5. Direct causes of Maternal Mortality include:**

- a) Haemorrhage , Malaria , Anaemia
- b) Eclampsia, haemorrhage, anaemia
- c) Haemorrhage, sepsis, eclampsia.
- d) Malaria, eclampsia, sepsis.

**6. The effects of Rhesus ISO immunization on the foetus includes:**

- a) Kernicterus, hydrops fetalis
- b) Hydrops fetalis, reduced fetal antibodies.
- c) Kernicterus, hypotension
- d) Hypoglycaemia, stillbirth.

**7. During abdominal examination of a mother in labour the following procedures are carried out in sequence:**

- a) Auscultation, palpation, presentation
- b) Presentation, inspection, descent.
- c) Inspection , palpation, auscultation
- d) Auscultation, inspection, descent.

**8. Active management of 3<sup>rd</sup> stage of labour involves:**

- a) Deliver the placenta by control cord traction, massage the uterus, examine the birth canal
- b) Examine birth canal , give oxytocin 10 units intramuscular, clamp and cut the cord.
- c) Clamp and cut the cord, give oxytocin 10 units intramuscular, deliver the placenta by control cord traction.
- d) Give oxytocin 10 units intramuscular, massage the uterus, examine the birth canal.

**9. The indicators on the partograph that are monitored half hourly includes:**

- a) Vaginal examination, fetal heart, contractions.
- b) Fetal heart, moulding ,contractions
- c) Contractions, maternal pulse, fetal heart.
- d) Vaginal examination, maternal pulse, contractions

**10. Indicate whether the following statements are true or false.**

- i) Ovulation occurs at the midpoint of menstrual cycle
- ii) Basal body temperature is affected by the production of progesterone and is lowered just before ovulation.

**11. The nursing intervention applied to a pregnant woman with nausea and vomiting to maintain adequate nutritional intake includes:**

- a) Advise the woman to take daily laxatives to stimulate peristalsis and food digestion.
- b) Encourage the woman to prepare meals before going to bed when nausea is less severe.
- c) Suggest to the woman to eat foods rich in fat to increase caloric intake.
- d) Teach the woman to stop eating for at least 6hrs before bed time to decrease morning nausea.

**12. The location of fetal heart sounds in the upper left quadrant of the mother's abdomen would indicate**

- a) The right mental vertical
- b) Breech delivery
- c) occipital posterior position
- d) Left antero posterior position

**13. The length of the uterine contraction is timed by:**

- a) Asking the woman when the beginning of the contraction was felt, then time interval from this point until the woman states that the contraction has subsided.
- b) Gently feeling the abdomen for the beginning of the uterine tensing to the beginning of the next tensing.
- c) Gently feel the abdomen for the beginning of tightening of the uterus and timing the interval from this point until the tightening subsides.
- d) Note the upwards slopes of contraction on the monitor and measure from one upwards to the next.

**14. The nursing diagnosis for woman in labour with assessment data of severe anaemia in 1<sup>st</sup> trimester and severe backache in 2<sup>nd</sup> trimester with difficult labour would be:**

- a) Altered coping related to the changes of pregnancy
- b) Altered rest pattern related to decreased tolerance of pain.
- c) Potential for impaired bonding related to maternal resentment.
- d) Potential for impaired infant growth related to maternal growth.

**15. The intervention a midwife can take when foetal heart deceleration is noted on monitor is:**

- a) Limit oral and intravenous fluids to decrease maternal fluid volume and decrease circulatory overload.
- b) Prepare a tray for removal of the excess amniotic fluid causing the problem.
- c) Removal of oxygen if present and instruct the mother to breathe slowly since this is a sign of hyperventilation.
- d) Turn the mother to different position to relieve pressure on the umbilical cord and restore circulation.

**16. The immediate action taken after repair of episiotomy include:**

- a) Cleaning the woman's vulva then perineum and anus area to remove any fecal incontinence or vaginal secretions.
- b) Monitor the woman for shivering and complain of chills sensations which may indicate an adverse reaction to medication.
- c) Palpate the uterine fundus for size, consistency and position then take vital signs to obtain baseline data.
- d) Remove all drapes except the gown to prevent development of postpartum fever.

**17. The indication for deep breathing exercises as part of pre caesarean section preparation is:**

- a) Prevent pulmonary oedema
- b) Prevent stasis of mucus in the lungs.
- c) Promote involution on traumatized uterus
- d) Stimulate diaphragm to contract.

**18. The dose of Magnesium Sulphate administered to pregnant woman with eclampsia immediately after a fit is:**

- a) Intravenous 4gms given slowly followed by intravenous 5gms every four hourly for 24 hrs.
- b) Intravenous 5gms stat slowly, then 5gms intramuscular slowly for four hourly for 24 hrs
- c) Intravenous 4gms loading dose slowly followed by intramuscular 5gm four hourly 24 hours after last fit.
- d) Intravenous 4gm loading dose, intravenous 4gm four hourly for 24hours after a fit.

**19 Apgar score is :**

- a) A daily examination of a newborn baby
- b) Standardized system to assess a baby's condition after birth.
- c) Standardized method of monitoring the baby's condition after birth
- d) A method of assessing increase in carbon dioxide in a new born.

**20. The features of tonic uterine action include:**

- a) Premature rupture of membranes, acidosis
- b) Inefficient uterine contraction, ketoacidosis
- c) Features of exhaustion, ketoacidosis
- d) Spasms of cervix, features of exhaustion.

**PART 11-SHORT ANSWER QUESTIONS (40 MARKS)**

1. Outline the processes of nutrients exchange from the mother to the fetus during pregnancy. **(5marks)**
2. Explain three (3) immediate interventions undertaken in the care of a baby born of a diabetic mother. **(6marks)**
3. State five (5) danger signs observed in a woman with premature rupture of membranes. **(5marks)**
4. Explain the pathophysiology of rhesus isoimmunisation **( 5 marks)**
5. Using a flow chart explain the pathophysiology of jaundice in a newborn **( 6 marks)**
6. outline four (4) factors associated with development of cord prolapse **( 4 marks)**
7. State five (5) factors that will aid the diagnosis of ante partum hemorrhage **(5 marks)**
8. Outline the steps in sequence that take place in ovarian cycle of menstruation **( 4marks)**

**PART 111-LONG ANSWER QUESTIONS (40 MARKS)**

1. **Mrs Basic is admitted to your labour ward with the foetal heart rate of 145/m and the diagnosis of obstructed labour is made.**
  - a) Explain two(2) major causes of obstructed labour **( 4 marks)**
  - b) Describe the role of a midwife and the care she will receive during labour. **(12 marks)**
  - c) State four (4) complications that are likely to occur to:
    - i) the Mother **(2 marks)**
    - ii) the Baby **( 2 marks)**
2. **Madam x delivers a term female living baby through spontaneous vertex delivery**
  - a) Explain three (3) characteristics of a term baby **(6marks)**
  - b) Describe the pulmonary adaptation of a newborn **(11 marks)**
  - c) State three ways how a newborn loses weight **(3marks)**