		KRCHN (BASIC) EXAMINATION: PAPER TWO: APRIL 2017 PART I: MULTIPLE CHOICE QUESTIONS:
Q:1:	Quickening in a multipara is experienced at !-	
	a)	24 weeks.
	b)	22 weeks.
	c)	20 weeks.
	d)	18 weeks.

- In MCH, priority should be given to a woman who is:-Q:2:
 - Pale, in pain, has difficulty in breathing, term. a)
 - Pale, in pain, difficulty in breathing, generalized edema. b)
 - Generalized edema, term, in pain, difficulty in breathing. c)
 - Term, generalized edema, pale, vomiting. d)
- On palpating for fundal height the midwife formed four fingers below the xiphisternum. Q:3: The possible gestation would be:
 - a) 36 weeks, 40 weeks.
 - 32 weeks, 36 weeks. b)
 - 32 weeks, 40 weeks. c)
 - 38 weeks, 40 weeks. d0
- An infant with fetal alcohol syndrome is:-O:4:
 - Small for gestation, cognitively impaired, has craniofacial deformity. a)
 - Normal size, cognitively impaired, has craniofacial deformity. b)
 - Small for gestation, has craniofacial deformity, preterm. c)
 - Small for gestation, has craniofacial deformity, no cognitive impairment. d)
- Q:5: Fetal surface of the placenta has:-
 - Chorion and visible blood vessels. a)
 - Amnion and visible blood vessels. b)
 - Chorion and amnion. c)
 - Decidua and amnion.
- Occipitofrontal diameter measures of the fetal skull:-Q:6:
 - 13.5 cm. a)
 - 9.5 cm. b)
 - 10.5 cm. c)
 - d) 11.5 cm.
- Q:7: Antenatal exercise should be geared towards:
 - a) Child birth and general physique.
 - Child birth and posture. b)
 - Posture and general physique. c)
 - Relaxation and posture. d)

- Q:8: In second stage, the appropriate mode of delivery in a woman with cardiac disease grade III is:
 - a) Vacuum extraction.
 - b) SVD.
 - c) C/S.
 - d) Laparatomy.
- Q:9: In management of post partum hemorrhage the ideal canula gauge should be size:
 - a) 18.
 - b) 16.
 - c) 20.
 - d) 22.
- Q:10: Symptoms of second stage are:
 - a) Urge to bear down, excessive show.
 - b) Strong uterine contractions, gaping anus.
 - c) Excessive show, gaping anus.
 - d) Urge to bear down, strong uterine contractions.
- Q:11: Indicate whether the statement is true or false:
 - i) In face presentation the midwife maintains extention.
 - ii) An infant born through mentoanterior position has a normal face.
- Q:12: Appropriate action following ketone + in urine during labour is to:
 - a) Ambulate mother, massage her back.
 - b) Feed the mother and encourage plenty of oral fluids.
 - c) Put in left lateral position, massage her back.
 - d) Feed the mother, continue monitoring contractions.
- Q:13: Signs of true labour are:
 - a) Presence of show, erratic pain, cervical dilatation.
 - b) Presence of show, rhythmic uterine contractions, cervical dilatation.
 - c) Presence of show, rupture of membranes, cervical dilatation.
 - d) Presence of show, bandles ring, cervical dilatation.
- Q:14: The objective of first examination of the newborn is to:
 - a) Assess maturity, rule out congenital abnormalities, ascertain condition at birth.
 - b) Rule out congenital abnormality, ascertain condition at birth, check meconium staining.
 - c) Assess maturity, birth injuries and rule out congenital abnormalities.
 - d) Assess maturity, check meconium staining, ascertain condition at birth.

Q:15: Premature babies should be given:-

- a) Vitamin K 1mg, BCG, birth polio.
- b) Vitamin K 0.5 mg, BCG, polio.
- c) Vitamin K 1 mg, BCG, polio 1.
- d) Vitamin K 0.5 mg, BCG, birth polio.

Q:16: Post delivery, if combined oral contraceptive is not available the midwife can give:-

- a) Progesterone only pills and condoms.
- b) Intra uterine contraceptive devise and condoms.
- c) Implants and progesterone only pills.
- d) Condoms and implants.

Q:17: Promotion of breast feeding can be enhanced by:-

- a) Sounds of a baby, sight of a baby and touching the baby.
- b) Sounds of a baby, pain and touching the baby.
- c) Sounds of a baby, worries, touching the baby.
- d) Sounds of a baby, full breasts, touching the baby.

Q:18: Tetanus toxoid should be given at:-

- a) > 36 weeks.
- b) During the first visit.
- c) After > 16 weeks.
- d) During 4th visit.

Q:19: Complete involution of the uterus occurs at:-

- a) 2 weeks.
- b) 4 weeks.
- c) 6 weeks.
- d) 10 weeks.

Q:20: Maternal audit should focus on:-

- a) 'Hospital morbidity.
- b) Hospital mortality.
- c) Maternal mortality.
- d) Supplies management.

	PART II: SHORT ANSWER QUESTIONS:	<u>MARKS</u>
Q:1:	With the help of diagrams, illustrate the different types of placenta praevia.	
Q:2:	Outline five (5) ways you are going to teach a woman kegel exercises following normal delivery.	
Q:3:	Outline specific interventions by a midwife to a woman in second stage of labour with card presentations.	3
Q:4:	State four (4) benefits of breast feeding to the mother and four (4) benefits of breast feeding to the baby.	
	a) Benefits to the mother.	4
	b) Benefits to the baby.	4
Q:5:	Explain two (2) environmental factors and two (2) newborn factors that predispose to hypothermia.	
	a) Environmental factors.	3
	b) Fetal factors.	3
Q:6:	Explain three (3) specific health messages you will give to a woman with cracked nipples.	6
Q:7:	State four (4) complications of polyhdromnious.	
Q:8:	State three (3) causes of haemorrhage after normal delivery.	3

MARKS PART III: ESSAY/LONG ANSWER QUESTIONS: Mrs. B, 27 years old primigranda comes to labour ward in established Q:1: labour at term. 1 Define normal labour. a) 11 Describe the management of Mrs. B till delivery. b) State four (4) potential nursing diagnoses for Mrs. B and four (4) c) potential nursing diagnosis for baby B following normal spontaneous vertex delivery. Potential nursing diagnoses for Mrs. B. i) Potential nursing diagnoses for the baby. ii) Baby X, born via spontaneous vertex delivery from a mother para 6 + 0 weighs Q:2: 2 kgs at 39 weeks gestation. 1 Define small for gestational age. a) Describe the specific management of Baby X till discharge. 11 b) Explain preventive measures of small for gestation deliveries. 8 c)