

BSCN EXAMINATION: PAPER TWO: JANUARY 2011
PART I: MULTIPLE CHOICE QUESTIONS:

- Q:1: Fetal causes of early pregnancy loss include:-
- Structural abnormalities of the genital tract.
 - Bicornuate uterus and fibroids.
 - Chromosomal abnormalities of the conceptus
 - Infections such as rubella, listeria and Chlamydia.
- Q:2: The outcome of labour is not dependent on:-
- Effectiveness of uterine contractions.
 - Maternal size.
 - The "give" of the pelvic joints.
 - The degree of moulding of the fetal head.
- Q:3: In monitoring fetal well being using the fetal kick chart, you will tell the client to notify you if she counts:-
- More than 10 movements in 3 hours.
 - Less than 10 movements in 3 hours.
 - More than 10 movements per hour.
 - Less than 10 movements per hour.
- Q:4: During discharge, an important advise for the breastfeeding mother is to:-
- Routinely avoid onions, cabbage and chocolate.
 - Keep her calcium intake the same as during pregnancy.
 - Increase her calories over her pregnancy requirements.
 - Return to her pre-pregnancy intake for proteins but not calories.
- Q:5: The part of the uterus in which a contraction begins is:-
- Cornua.
 - Fundus.
 - Isthmus.
 - The body or corpus.
- Q:6: The follicle stimulating hormone and luteinizing hormone are secreted by the:-
- Ovaries and testes.
 - Posterior pituitary gland.
 - Anterior pituitary gland.
 - Hypothalamus.
- Q:7: Uterine contractions are controlled by the:-
- Central nervous system.
 - Sympathetic nervous system.
 - Peripheral nervous system.
 - Autonomic nervous system.
- Q:8: The volume of amniotic fluid after 20 weeks gestation is:-
- 500 to 1000 ml.
 - 350 to 500 ml.
 - 200 to 500 ml.
 - 1000 to 1500 ml.

Q:9: The ectoderm differentiates to form the:-

- a) Cardiovascular system.
- b) Peripheral nervous system.
- c) Respiratory tract.
- d) Connective tissues.

Q:10: The hormone that maintains endometrium and stimulates maternal metabolism and development of breast alveoli during pregnancy is:-

- a) Human chorionic gonadotrophin.
- b) Human placental lactogen.
- c) Oestrogen.
- d) Progesterone.

Q:11: The anteroposterior diameter of the pelvic outlet measures:-

- a) 12 cm.
- b) 13 cm.
- c) 11 cm.
- d) 10 cm.

Q:12: During pregnancy, the glomerular filtration rate:-

- a) Only changes when pathological conditions are present.
- b) Is directly influenced by the woman's posture.
- c) Increases significantly above pre-pregnant levels.
- d) Makes the most dramatic changes near birth.

Q:13: Signs of cardiac decompensation in a pregnant woman with cardiac disease are likely to appear at:-

- a) 28 to 32 weeks gestation.
- b) 36 to 40 weeks gestation.
- c) 12 to 16 weeks gestation.
- d) 20 to 24 weeks gestation.

Q:14: The mechanism of labour that allows the fetal head to present itself to fit the widest anteroposterior diameter of the pelvic cavity is:-

- a) Flexion.
- b) Internal rotation.
- c) Descent.
- d) Extension.

Q:15: Closure of the newborn's foramen ovale occurs when:-

- a) Blood flows from the pulmonary artery to the aorta.
- b) PO_2 is increased causing constriction to occur.
- c) The umbilical cord is severed.
- d) Left atrial pressure exceeds right atrial pressure.

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Q:16: The newborn with postmaturity syndrome is at high risk for cold stress due to:-

- a) Absence of vernix.
- b) Decreased subcutaneous fat.
- c) Parchment like skin.
- d) Extended posture.

Q:17: Presence of meconium in the newborn's lungs:-

- a) Leads to respiratory alkalosis.
- b) Prevents air leaks.
- c) Traps inspired air in the alveoli.
- d) Prevents air from entering the airway.

Q:18: Symptoms of superficial thrombophlebitis include:-

- a) Local redness and tenderness in a portion of the vein.
- b) Edema of the ankle and lower leg.
- c) Pain in the affected leg and foot.
- d) Positive Homan's sign.

For question 19 indicate whether the statements are True or False on the answer sheet provided.

- Q:19: a) In the management of shoulder dystocia, Wood's Manoeuvre is executed by exerting pressure on the anterior fetal shoulder to achieve rotation.
- b) Zavanelli Manoeuvre is an obstetric maneuver that involves pushing back the delivered fetal head into the birth canal in anticipation of performing a cesarean section in case of shoulder dystocia.

Q:20: Direct causes of placenta abruption include:-

- a) Abnormally short umbilical cord, sudden loss of uterine volume.
- b) Defective vascularization of the deciduas, previous uterine surgery.
- c) Injury to the abdomen from fall or accident, multiple pregnancy.
- d) Advanced maternal age, injury to the abdomen from fall or accident.

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PART II: SHORT ANSWER QUESTIONS:

MARKS

- Q:1: State the five (5) leading causes of maternal mortality according to WHO indicating their percentages. 5
- Q:2: Describe the process of fertilization. 4
- Q:3: Outline five (5) factors that reduce accuracy of fundal height measurement in estimating duration of pregnancy. 5
- Q:4: State two (2) conditions that must be met in order to establish a diagnosis of active phase labour. 2
- Q:5: Identify five (5) factors that can cause deviations in labour. 5
- Q:6: a) List four (4) causes of post-partum haemorrhage. 2
b) Explain the management of post-partum haemorrhage focusing on the above four causes. 6
- Q:7: Explain five (5) risks for a baby born through caesarean section. 5
- Q:8: Draw a well labeled diagram showing the deep muscle layer of the pelvic floor. 6

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