

AMREF INTERNATIONAL UNIVERSITY SCHOOL OF MEDICAL SCIENCES DEPARTMENT OF NURSING AND MIDWIFERY SCIENCES DIPLOMA KENYA REGISTERED COMMUNITY HEALTH NURSING SUPPLEMENTARY/ SPECIAL EXAMINATIONS

DNS 212: MIDWIFERY II

DATE: MONDAY 28TH NOVEMBER 2022

TIME: 2 Hours Start: 1400 HOURS Finish: 1600 HOURS

INSTRUCTIONS

- 1. This examination will be marked out of 70 marks
- 2. The Examination has THREE Section: Section I: MULTIPLE CHOICE QUESTION, Section II: SHORT ANSWER QUESTIONS Section III: Comprising Multiple Choice Questions.
- **3.** Answer all Questions in the ANSWER BOOKLET provided. Do Not write anything on the question paper -use the back of your booklet for rough work if need be.

SECTION I: MULTIPLE CHOICE QUESTIONS (20 MARKS)

1.	The ligaments that form the posterior wall of the pelvic outlet are the:-	
	a) Sacrospinous ligament, sacroiliac ligaments	
	b) Sacrotuberous ligament, sacrospinous ligament	
	c) Cotyloid ligament, sacroiliac ligaments	
	d) Sacroiliac ligament, sacrotuberous ligament	
2.	If the occipito frontal diameters were caught between the bi-spinous diameters of the outle	et,
	the midwife would diagnose: -	
	a) Breech presentation	
	b) Persistent Occipito Posterior position	
	c) Brow Presentation	
	d) Deep transverse arrest	
3.	One of the complications that may occur as a consequence of an ill-fitting part is; prematu	ıre
	rupture of membranes leading to:	
	a) Prolonged labour	
	b) Furnic presentaiton	
	c) Cord prolapse	
	d) All of the above	
1	Familiantian taken along in the	
4.	Fertilization takes place in the of the fallopian tubes: -	
	a) Interstitial portion	
	b) Isthmus	
	c) Infundibulum	
	d) Ampulla	
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5.	Urinary tract infection during pregnancy is usually made worse by urinary stasis as a resul	lt
	of:-	
	a) Dilation and kinking of the ureters due to the effect of progesterone	
	b) Major diuresis	
	c) Increased glomerular filtration	
	d) Increased stroke volume	
6.	Lower back pain in pregnancy occurs due to the effect ofon the ligaments: -	
	a) Progesterone and estrogen	
	b) Progesterone and relaxin	
	c) Relaxin and estrogen	
	d) Progesterone	

- 7. Women are more vulnerable to HIV infection than men because:
 - a) Women have lower CD4 Cell count than men
 - b) Women have a larger surface area which can be easily traumatized
 - c) Women are passive participants in sexual intercourse
 - d) Women are more vulnerable to a variety of sexually transmitted infections
- 8. The hormone that causes resistance to insulin therefore causes gestational diabetes is:
 - a) Progesterone
 - b) Human chorionic gonadotrophin
 - c) Cortisone
 - d) Human placental lactogen
- 9. The recommended drug for preventing seizures in a client with pre-eclampsia is:
 - a) Hydrallazine
 - b) Nifedipine
 - c) Asprin
 - d) Magnesium sulphate
- 10. A breech presentation is classified as a:
 - a) Malposition
 - b) Malpresentation
 - c) Abnormal presentation
 - d) Normal presentation
- 11. Bandl's ring commonly occurs as a consequence of:
 - a) Retraction of uterine muscles
 - b) Reverse polarity
 - c) Obstructed labour
 - d) Cervical dystocia
- 12. The 'after-coming head' on a breech presentation should be delivered by the following maneuver
 - a) Thorn
 - b) Mauriceau-Smellie-Veit
 - c) Lovset
 - d) Burns and Marshall

13. The following describes the blood that passes through the foramen ovale in fetal circulation	:-
a) Mixed blood	
b) 100% oxygenated blood	
c) Deoxygenated blood	
d) Concentrated blood	
14. Type 3 placenta previa is a condition whereby the placenta is localized: -	
a) At the fundus of the uterus	
b) Wholly covering the cervical os	
c) Partly covering the cervical os	
d) At the lower pole of the uterus	
a) It the lower pole of the aterus	
15. Once the graffian follicle releases the ovum, it becomes aand continues to	
produce the oestrogen and progesterone for the next 14 days	
a) Corpus albicans	
b) Corpus luteum	
c) Primordial follicle	
d) Mature follicle	
d) Mattie Tomele	
16. The three major causes of neonatal mortalities are: -	
a) Tetanus, sepsis and pneumonia	
b) Birth injuries, prematurity and birth asphyxia	
c) Diarrhoeal disease, prematurity and birth asphyxia	
d) Birth asphyxia, neonatal sepsis and prematurity	
17. When clearing the airway of a neonate during resuscitation: -	
a) Suction the secretions for at least 30 seconds in a roll	
b) Suction only what is physically visible	
c) Ensure the neonate's head is flexed enough to open the airway	
d) Suction the nose first then the nostril next	
18. The correct way of performing neonatal resuscitation is by giving: -	
a) 3 chest compression and 1 breath per minute	
b) 90 chest compressions and 30 breathes per minute	
c) 2 chest compressions per 1 breathes per second	
d) 60 chest compressions and 30 breathes per minute	

- 19. The most common cause of early onset neonatal sepsis is:
 - a) Gram +ve beta haemolytic staphylococci
 - b) Gram +ve Neisseria meningitidis
 - c) Klepsiella species
 - d) Pneumococcal bacteria
- 20. A congenial condition that occur due to defective closure of the vertebral column is:
 - a) Omphalocele
 - b) Hydrocephalus
 - c) Spina bifida
 - d) Pheochromocytoma



SECTION II: SHORT ANSWER QUESTIONS (30 MARKS)

- 1. Differentiate between placenta previa and placenta abruption (4 Marks)
- 2. Explain the causes of the following minor discomforts during pregnancy
 - a) Leg cramps

(2 Marks)

b) Constipation

(2 Marks)

- 3. State three (3) etiologies of amniotic fluid embolism
- (3 Marks)
- 4. Differentiate between malpresentation and malposition
- (4 Marks)
- 5. Outline five (5) ways of preventing birth asphyxia
- (5 Marks)
- 6. State five (5) ways of preventing infections in special care baby unit (5 Marks)
- 7. State five (5) nursing interventions for a premature neonate
- (5 Marks)

SECTION III: LONG ANSWER QUESTIONS (20 MARKS)

- **1.** Miss T. a 19-year-old Gravida 1 Para 0 client has come to the clinic at 28 weeks gestation, she complains of fatigue, headaches and after examination you note that she is pale. Investigations show that her Hb is 8g/dl.
 - a) Explain four (4) effects of anemia on intra uterine foetal development (8 marks)
 - b) Describe the management of Miss T. (12 Marks)

