



**AMREF INTERNATIONAL UNIVERSITY
SCHOOL OF MEDICAL SCIENCES
DEPARTMENT OF NURSING & MIDWIFERY SCIENCES
BACHELOR OF SCIENCE IN NURSING
END OF SEMESTER DECEMBER 2022 EXAMINATIONS**

COURSE: BSM 411: COMPLICATIONS OF THE NEONATE

DATE: 5TH DECEMBER 2022

Duration: 2 HOURS

Start: 2:00 PM

Finish: 4:00 PM

INSTRUCTIONS

- 1. This exam is out of 70 Marks**
- 2. This Examination comprises THREE Sections. Section I: Multiple Choice Questions
Section II: Short Answer Questions and Section III: Long Answer Questions**
- 3. Answer ALL Questions.**

SECTION I: MULTIPLE CHOICE QUESTION (20 MARKS)

1. A new born baby should NOT be bathed for how many days after birth: -
 - A. One day
 - B. Two days
 - C. Three days
 - D. Four days

2. Immediately after birth, breastfeeding of a newborn baby should begin within: -
 - A. One hour
 - B. Two hours
 - C. Three hours
 - D. Four hours

3. Post-term pregnancy is defined as: -
 - A. 287 completed gestational days
 - B. 294 completed gestational days
 - C. 301 completed gestational days
 - D. 302 completed gestational days

4. A birth defect characterized by an exposed abdominal organ is known as: -
 - A. Gastroschisis
 - B. Omphalocele
 - C. Umbilical hernia
 - D. Abdominal hernia

5. Respiratory distress syndrome is characterized by the following EXCEPT: -
 - A. Fast breathing > 50 breaths /min
 - B. Chest indrawing
 - C. Nasal flaring
 - D. Grunting

6. The following are some interventions for respiratory distress syndrome EXCEPT: -
 - A. Administration of vitamin K 0.5 mg stat in term babies
 - B. Crystalline penicillin 50,000 units/kg 12 hourly and Gentamicin 5mg/kg daily for 10 days
 - C. Administration of Vitamin K 1mg stat in term babies
 - D. Administration of vitamin K 0.5 mg stat in prematurity

7. A loading dose of intramuscular injection of Phenobarbitone 20mg/kg stat is administered in neonatal seizures followed by: -
- A. 5-10mg/kg within 12 hours with maintenance doses of 5mg/kg daily
 - B. 10-15mg/kg within 24 hours with maintenance doses of 5mg/kg daily
 - C. 5-10mg/kg within 24 hours with maintenance doses of 5mg/kg daily
 - D. 10-15mg/kg within 12 hours with maintenance doses of 5mg/kg daily
8. Mild cases of neonatal septic spots are treated with: -
- A. Oral Amoxicillin/ 62.5mg/ Cloxacillin 8 hourly daily for 5 to 7 days
 - B. Oral Amoxicillin/ 62.5mg/ Cloxacillin 8 hourly daily for 10 to 14 days
 - C. Oral Amoxicillin/ 63.5mg/ Cloxacillin 8 hourly daily for 5 to 7 days
 - D. Oral Amoxicillin/ 63.5mg/ Cloxacillin 8 hourly daily for 10 to 14 days
9. Signs of gonococcal ophthalmia neonatorum manifests: -
- A. At birth
 - B. One day after birth
 - C. Two days after birth
 - D. Three days after birth
10. Signs of chlamydial ophthalmia neonatorum manifests: -
- A. At birth
 - B. One to two days after birth
 - C. Three to four days after birth
 - D. Five to seven days after birth
11. Cases of gonococcal ophthalmia neonatorum admitted to the hospital are treated with: -
- A. Ceftriaxone 50 mg/kg or Kanamycin 75mg intramuscularly stat
 - B. Ceftriaxone 50 mg/kg or Kanamycin 75mg intravenously stat
 - C. Ceftriaxone 150 mg/kg or Kanamycin 175mg intramuscularly stat
 - D. Ceftriaxone 150 mg/kg or Kanamycin 175mg intravenously stat

12. Cases of chlamydial ophthalmia neonatorum admitted to the hospital are treated with: -
- A. Erythromycin 50 mg 6 hourly for 14 days
 - B. Erythromycin 50 mg 4 hourly for 14 days
 - C. Erythromycin 50 mg 8 hourly for 14 days
 - D. Erythromycin 50 mg 12 hourly for 14 days
13. Physiological jaundice usually appears:-
- A. At birth
 - B. Within 24 hours of birth
 - C. Within 24-48 hours of birth or later
 - D. After 48 hours of birth
14. Physiological jaundice usually resolves in: -
- A. 7-10 days or a little longer in preterm babies
 - B. 7-14 days or a little longer in preterm babies
 - C. 14-28 days or a little longer in preterm babies
 - D. 7 days or a little longer in preterm babies
15. The following statement is FALSE about pathological jaundice: -
- A. Lasts longer than 14 days in term babies and 21 days in the pre-term
 - B. Jaundice with fever
 - C. Deep jaundice usually involves palms and soles
 - D. Jaundice with no fever
16. In neonatal jaundice, the following is NOT an indication for immediate exchange blood transfusion: -
- A. Hb below 11g/100 milliliters
 - B. Bilirubin levels above 4 milligrams/100 milliliters
 - C. Signs of congestive cardiac failure
 - D. Signs of respiratory failure
17. Common fractures of the new born at birth include the following EXCEPT: -
- A. Clavicle
 - B. Humerus
 - C. Femur
 - D. Tibia

18. The following body part is NOT commonly affected by birth injuries:-

- A. Soles and palms
- B. Muscle trauma
- C. Nerve trauma
- D. Fractures

19. The following statements FALSE about Cephalohematomas: -

- A. It is an effusion of blood below the periosteum that covers the skull bones
- B. It is an edematous swelling under the scalp and above the periosteum
- C. It usually resolves after 2-3 weeks
- D. No treatment is necessary

20. The following statement is FALSE regarding Caput Succedaneum: -

- A. It is an effusion of blood below the periosteum that covers the skull bones
- B. It is an edematous swelling under the scalp and above the periosteum
- C. It does not need treatment
- D. It resolves spontaneously

SECTION II: SHORT ANSWER QUESTIONS (30 MARKS)

1. State six (6) interventions for neonate diagnosed with imperforate anus immediately at birth (6 marks)
2. Excluding abnormal movements, state six other (6) abnormal activities characterizing neonatal seizures (6 marks)
3. Outline six (6) specific measures to prevent respiratory distress syndrome in the neonate (6 marks)
4. State six (6) predisposing factors to neonatal asphyxia (6 marks)
5. Describe specific management of a neonate whose temperature is less than 35.5 degrees celcius (6 marks)

SECTION III: LONG ANSWER QUESTIONS (20 MARKS)

1. A neonate with a diagnosis of neonatal hypoglycemia is admitted to the newborn unit: -
 - a. Define neonatal hypoglycemia (1 mark)
 - b. State seven (7) diagnostic symptoms associated with neonatal hypoglycemia (7 marks)
 - c. Describe the specific management of a newborn with a blood glucose level of less than 1.1 mmol/liter (7 marks)
 - d. Describe the specific management of a newborn with a blood glucose level glucose between 1.1 - 2.6 mmol/liter (5 marks)

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