

# AMREF INTERNATIONAL UNIVERSITY SCHOOL OF MEDICAL SCIENCES DEPARTMENT OF NURSING AND MIDWIFERY SCIENCES KENYA REGISTERED COMMUNITY HEALTH NURSING END OF SEMESTER EXAMINATIONS

DNS 123: MIDWIFERY I

DATE: 18<sup>TH</sup> APRIL 2024

TIME:2 Hours START: 0900 HOURS FINISH: 1100 HOURS

### **INSTRUCTIONS**

- 1. This exam will be marked out of 70 Marks
- **2.** ALL Questions are compulsory.
- 3. The Examination has Three Sections: Section I- Multiple Choice Questions, Section II: Short Answer Questions, Section III: Long Essay Questions
- 4. Answer all Questions in the ANSWER BOOKLET provided
- 5. 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. Internal female genitalia include:
  - A. Vagina, vestibule, uterus
  - B. Fourchette, ovaries, fallopian tube
  - C. Vagina, hymen, mons veneris
  - D. Vagina, cervix, uterus
- 2. The non gravid uterus measures:
  - A.  $5\text{cm} \times 2\text{cm} \times 1.5\text{cm}$
  - B. 30cm× 23cm×20cm
  - C.  $7\text{cm} \times 3\text{cm} \times 1.5\text{cm}$
  - D.  $7.5 \text{cm} \times 5 \text{cm} \times 2.5 \text{cm}$
- 3. The cavity of the true pelvis comprises of the:
  - A. Inlet, sacrococcygeal joint, ischial spines
  - B. Ilium, anterior pelvic wall, sacral curve
  - C. Sacral curve, pubic bone, symphysis pubis
  - D. Sacrococcygeal joint, ischial spines, posterior pelvic wall
- 4. Transverse perineal muscles:
  - A. Pass through ischial tuberosities to the center of perineum
  - B. Encircles the anus
  - C. Are part of deep pelvic muscles
  - D. Pass from perineum through the vagina to corpora carvenosa of the clitoris
- 5. During abdominal palpation on a pregnant woman lateral palpation:
  - A. Locate foetal pole to determine presentation
  - B. Locate foetal back to determine position
  - C. Ascertain the level of engagement
  - D. Rule out splenomegaly in case of jaundice

- 6. In circumvallate placenta:
  - A. There is doubling of amnion and chorion forming a ring on the fetal surface
  - B. There is an accessory placenta
  - C. Umbilical cord is attached at the edge of the placenta
  - D. There is division of placenta into two or three complete lobes
- 7. Transverse diameter of the fetal skull include:
  - A. Sub-mento bregmatic, bi-parietal,
  - B. Mental vertical, bi-temporal
  - C. Bitemporal, bi-parietal
  - D. Sub-occipital bregmatic, mental vertical
- 8. In mechanism of normal labour, restitution of the head allows:
  - A. The bregma, forehead, face and chin to pass over the perineum
  - B. The head to right itself with the shoulders by untwisting the neck
  - C. The head and the shoulders to emerge in the antero-posterior diameter
  - D. The head emerge under the pubic arch and no longer recede during contraction
- 9. The occiput of the fetal skull:
  - A. Extends from anterior fontanelles and coronal sutures to the orbital ridges
  - B. Is bordered by posterior fontanelle, two parietal eminence and anterior fontanelle
  - C. Is found between foramen magnum and posterior fontanelles
  - D. Extends from orbital ridges and the root of the nose to the neck
- 10. When teaching students about moulding they indicate 3+ if sutures:
  - A. Are opposed
  - B. Just touch each other
  - C. Overlap but reducible digitally
  - D. Overlapped and not reducible

- 11. Anatomical closure of foramen ovale after birth is:
  - A. One year
  - B. 3-7 days
  - C. 2-3 weeks
  - D. Immediately
- 12. Probable signs of pregnancy include:
  - A. Skin changes, quickening, morning sickness
  - B. Morning sickness, quickening, positive HCG test
  - C. Uterine changes, Braxton hicks, positive HCG test
  - D. Quickening, skin changes, morning sickness
- 13. Cervical dilatation refers to:
  - A. Inclusion of the cervical canal into the lower uterine segment
  - B. Enlargement of the cervical os from a tightly closed aperture to a large opening
  - C. Formation of a ridge between upper and lower uterine segment
  - D. Contraction of upper uterine pole to expel the fetus
- 14 Preferred first line regimen for HIV positive pregnant and breastfeeding mothers is a combination of:
  - A. Eferverence, lamivudine and nevirapine
  - B. Tenofovir, lamivudine and dolutegravir
  - C. Abacavir, zidovudine and dolutegravir
  - D. Tenofovir, zidovudine and lamivudine
- 15. First stage of labour:
  - A. Starts with onset of regular contraction to delivery of the baby
  - B. Is shorter in prim gravida than in multipara
  - C. Ends with full cervical dilatation
  - D. Is influenced by the secondary powers
- 16. While using partograph for labour monitoring mild contractions:
  - A. Lasts for 20-40 seconds
  - B. Should be chatted with dots
  - C. Are not siginificant
  - D. Lasts for less than 20 seconds

- 17.Good attachment of the baby onto the mother's breast occurs when:
  - A. Lower lip turns inwards, baby's head is held close to mother's body
  - B. More areola seen above baby's top lip, lower lip turns inwards
  - C.Baby's head is in line with the body, mouth is open wide
  - D.Baby's chin touches the breast, baby approaches the breast nose to nipple
- 18. When newborns are in light sleep:
  - A. Respirations are irregular, suckling movements occur intermittently
  - B. Rapid eye movements are present through closed eyelids
  - C. Eyes are closed, respirations regular and there is no eye movements
  - D. Eyes may be open or closed with fluttering of eyelids
- 19. During newborn assessment, the midwife indicates normal head circumference if it measures:
  - A.15-20 CM
  - B. 20-30 CM
  - C. 34-35 CM
  - D. 40-50 CM
- 20. Baby P born at term has blue extremities, regular respirations, pulse rate 98b/minute, some flexion and minimal grimace will have an APGAR score of:
  - A. 2
  - B. 4
  - C. 6
  - D. 8

# **SECTION II: SHORT ANSWER QUESTIONS** (30 MARK)

		Marks
1.	Draw and label a diagram of the fetal skull showing regions and landmarks of	
	clinical significance	5
2.	State four (4) danger signs in pregnancy	4
3.	Outline five (5) elements of focused antenatal care (FANC)	5
4.	Outline four (4) differences between fetal and adult circulation	4
5.	Differentiate between amnion and chorion	5
6.	State four (4)roles of an assistant during second stage of labour	4
7.	State three key steps in active management of third stage of labour (AMTSL)	3

# **SECTION III: LONG ANSWER QUESTION (20 MARKS)**

1. Mrs. L has just been admitted in the postnatal ward post normal vagina delivery. She complains that her breasts are dry but the midwife informs her that she need to commence breast feeding immediately.

a)	Explain the physiology of lactation	10
b)	State 5 benefits of breastfeeding	5
c)	State three signs of good breastfeeding attachment	3
d)	Outline two minor complications of the breast during post-natal period	2