

AMREF INTERNATIONAL UNIVERSITY

SCHOOL OF MEDICAL SCIENCES

DEPARTMENT OF NURSING AND MIDWIFERY SCEINCES

DIPLOMA IN KENYA REGISTERED COMMUNITY HEALTH NURSING

END OF SEMESTER EXAMINATIONS

ANS 412/ DNS 322/ DCHN 225: COLLEGE FINAL PAPER 2

DATE: MAY 16TH **2023**

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

INSTRUCTIONS

- 1. This examination will be marked out of 100 Marks
- 2. This examination comprises ONE section. Section I: Multiple Choice Questions
- 3. ALL questions are COMPULSORY.
- 4. Answer ALL questions in the Answer Booklet provided
- 5. DO NOT WRITE ON THE QUESTION PAPER

MULTIPLE CHOICE QUESTIONS

- 1. The viral STI commonly associated with cervical cancer is: -
 - A. Human immunodeficiency virus (HIV)
 - B. Human T-lymphotropic virus (HTL-V)
 - C. Human papilloma virus (HPV)
 - D. Herpes simplex types 2(HSV-2)
- 2. Anterior relations of the uterus include
 - A. Pouch of Douglas, bladder
 - B. Intestines, broad ligaments
 - C. Broad ligaments, pouch of Douglas
 - D. Bladder, uterovesical poach
- 3. Hutchison's teeth a clinical features seen in: -
 - A. Children born of mothers with untreated Chlamydia
 - B. Gonorrhoeal infection in children
 - C. Neurosyphilis in infants
 - D. Children born of HIV positive mothers
- 4. Vegan women need supplemental: -
 - A. Vitamin B2
 - B. Calcium
 - C. Vitamin A
 - D. Vitamin B12
- 5. Recommended timing for the administration of anti D in pregnancy is: -
 - A. 28 weeks, 34 weeks
 - B. 28 weeks, 40 weeks
 - C. 28 weeks, 38 weeks
 - D. 24 weeks, 37 weeks

D. Obstructed labour	
7. The following are layers of endometrium in pregnancy EXCEPT	
A.Decidua compatus	
B.Decidua spongiosum	
C.Decidua functionalis	
D.Decidua basalis	
8. The drug of choice in the management of gonorrhea is: -	
A. Valacyclovir	
B. Metranidazole	
C. Ceftriaxone	
D. Podophyllin	
9. The incubation period for gonorrhoea is: -	
A.12-24 hours	
B.14-21 days	
C.1-2 months	
D.2-5 days	
10. Proteinuria during pregnancy may be an indication of: -	
A. Renal tumours.	
B. Diabetes mellitus	
C. Pre-eclampsia	
D. Adrenal tumors	
11. The three major causes of neonatal mortality are: -	
A. Birth asphyxia, neonatal sepsis and prematurity	
B. Tetanus, sepsis and pneumonia	
C. Birth injuries, prematurity and birth asphyxia	
D. Diarrhoeal disease, prematurity and birth asphyxia Page 3 of 19	

6. The leading cause of maternal mortality is

A. Pre-eclampsia

B. Haemorrhage

C. Sepsis

12. Which genital condition is characterized by clustered intact vesicles that ruptured to form shallow tender ulcers? A. Syphilis B. Gonorrhea C. Chancroid D. Herpes simplex disease 13. Common cause of early onset neonatal sepsis is:-A. Pneumococcal bacteria B. Gram + ve beta haemolytic staphylococci C. Gram +ve Neisseria meningitides D. Klempsiella species 14. Presenting diameter when the head is well flexed in a vertex presentation are: A. Biparietal and occipitofrontal B. Suboccipitobregmatic and biparietal diameters C. Bitemporal and suboccipitobregmatic D. Submentobregmatic and biparietal 15. In normal labour which is the order of foetal movement after descent is: -A. Extension of the head, internal rotation of the head, extension of the head, lateral flexion, restitution B. Flexion, internal rotation of the head, extension of the head, restitution, lateral flexion C. Flexion, extension of the head, internal rotation of the head, restitution, lateral flexion D. Lateral flexion, extension of the head, internal rotation of the head, lateral flexion 16. During second stage of labour, upon delivery of the baby's head the provider should: -A. Clear the baby's airway B. Check the cord around the neck C. Apply gentle traction on the baby's head D. Wait for restitution to occur 17. A woman who is in second stage of labour is encouraged to push when: -A. The anus dilates and gapes

B. She feels the urge to push

- C. The cervical OS is fully dilatedD. The fetal head become visible
- 18. The correct way of performing neonatal resuscitation is by:
 - A. 3 chest compressions and 1 breath per minute
 - B. 2 chest compressions per 1 breathes per second
 - C. 90chest compressions and 30 breathes per minute
 - D. 60 chest compressions and 30 breathes per minute
- 19. The rooting reflex is defined as response of the baby to;
 - A. Being left to drop from an angle of 45
 - B. Stroking of the check or side of the mouth
 - C. Being supported upright with his feet touching flat surface
 - D. Being pulled upright by the wrist to a sitting position
- 20. What is the first action on commencing resuscitation of a new-born baby:
 - A. Follow ABC approach
 - B. Dry and cover the baby
 - C. Commence chest compressions
 - D. Insert a Guedel airway
- 21. The most useful initial assessment of the newborn includes which of the following: -
 - A. Tone, breathing, heart rate
 - B. Colour of the baby
 - C.APGAR score
 - D. Activity of the baby
- 22. If a newborn baby's heart rate falls or fails to respond following five inflation breaths what should be done?
 - A. Commence chest compressions
 - B. Insert an umbilical venous catheter
 - C. Recheck airway
 - D. Insert an endotracheal tube
 - 23. Sudden infant death syndrome (SIDS) is not a risk factor in: -
 - A. Premature infants
 - B. Low birth weight infants

- C. Female infants
- D. Infants born to mothers who are still young
- 24. During the resuscitation of the newborn: -
 - A. Keep parents informed of what is happening to their baby
 - B. Withhold information from the parents until the resuscitation event has finished.
 - C. Prevent the baby s parents from watching resuscitation taking place
 - D. Take the baby away from the parent without informing them
- 25. Which of the following is a symptom of placenta previa: -
 - A. Quickening
 - **B.** Dizziness
 - C. Bright red, painless vaginal bleeding
 - D. Nausea and vomiting
- 26. The most effective management for eclamptic seizure is: -
 - A. Administration of calcium gluconate
 - B. Administration of normal saline
 - C. Administration of magnesium sulphate
 - D. Administration of midazolam
- 27. A side effects of too-rapid administration of magnesium sulphate is: -
 - A. Hypotension
 - B. Cardiac arrest
 - C. Respiratory distress
 - D. All of the above
- 28. You are managing a 20 yrs old female patient, 36/40 gestation with severe PV bleeding, haemodynamically unstable but with no abdominal pain. She is mostly likely suffering from: -
 - A. Placental abruption
 - B. Vasa previa
 - C. Placenta accreta
 - D. Placenta praevia
 - 29. Which of the following is the definition of pre-eclampsia: -
 - A. HELLP syndrome

- B. Gestational hypertension +proteinuria
- C. Seizure activity during pregnancy
- D. Hypertension during pregnancy higher than 160/110mmhg
- 30. The appropriate management of cord prolapse is: -
 - A. Clamp and cut the cord to facilitate delivery
 - B. Replace the cord back into her vagina and position her to prevent cord compression.
 - C. Position the mother and instigate early transport
 - D. Wrap the cord in plastic and continuously palpate for the foetal pulse
- 31. Which of the following is an external manoeuvre for the management of shoulder dystocia:-
 - A. McRoberts manoeuvre
 - B. Reverse woods screw
 - C. Loveset manoeuvre
 - D. Rubins manoeuvre
- 32. Which of the following is NOT a specific cause of primary post-partum haemorrhage:
 - A. Pregnancy induced hypertension
 - B. Recto-perineal tears
 - C. An atonic uterus
 - D. Delivery of an incomplete placenta
- 33. Prophylactic interventions for the newborns include: -
 - A. Breastfeeding, resuscitation, stimulation.
 - B. Administration of vitamin K, phototherapy.
 - C. Breastfeeding, administration of vitamin K, phototherapy.
 - D. Skin to skin, phototherapy, and administration of tetracycline eye ointment.
- 34. Permanent closure of ductus arteriosus occurs: -
 - A. Immediately after birth
 - B.8-10 hours after birth
 - C. within 3 months after birth
 - D. After one year of birth
- 35. Immediate post birth management of the neonate involves: -
 - A. Drying, stimulation and placing on the mother for warmth

- B. Placing the baby under /near a radiant heat source
- C. Routine suctioning of the airway
- D. Positive pressure ventilation to start it breathing
- 36. The following is NOT a sign of imminent delivery: -
 - A. Contraction lasting 30-60 sec
 - B. The mother having an urge to push
 - C. Bulging of the membranes
 - D. Crowning of the foetal head
- 37. The following is the cause of hyperemesis gravidarum: -
 - A. High levels of circulating HCG
 - B. Underlying infection
 - C. Over eating
 - D. Psychological issues
- 38. The potential diagnosis for a 25 year old Para 5 gravida 6 presenting with a Blood pressure of 150/100mmhg and proteinuria ++ upon urinalysis is: -
 - A. Mild pre-eclampsia
 - B. Severe pre-eclampsia
 - C. Moderate pre-eclampsia
 - D. Eclampsia
 - 39. Larger than expected fundus may be indicative of: -
 - A. Large fetus, oligodramnios
 - B. Fetal retardation, polyhydramnios
 - C. Multiple pregnancy, polyhydramnios
 - D. Multiple pregnancy, fetal retardation
 - 40. In class 3 cardiac disease in pregnancy, patient has: -
 - A. No limitation of physical activity, heart murmur on general examination
 - B. Slight limitation of physical activity, no symptoms when at rest
 - C. Marked limitation of physical activity, slight exertion leads to fatigue, palpitations, dyspnoea
 - D. Inability to carry out any physical activity without discomfort, signs of cardiac disease and heart failure even at rest

- 41. The rationale for routinely administering vitamin K to neonates after birth is: -
 - A. To increase the reserves for vitamins in the neonate
 - B. To combat clinical bleeding in neonate
 - C. To prevent a vitaminosis
 - D. To help establish normal flora in the neonate gut
- 42. Controlled cord traction is effective when preceded by: -
 - A. Good management of second stage
 - B. Close monitoring of first stage
 - C. Administration of uterotonic drug
 - D. Pulling the cord immediately the baby is born
- 43. After the delivery, the nurse prepares to prevent heat loss in the new-born resulting from evaporation by:
 - A. Warming the crib pad
 - B. Turning on the overhead radiant warmer
 - C. Closing the door to the room
 - D. Drying the infant in a warm blanket
 - 44. The condition that can arise in meconium aspiration syndrome include: -
 - A. Chemical pneumonitis, increase of surfactant factor, chronic lung disease
 - B. Chemical pneumonitis, increase of surfactant factor, acute lung disease
 - C. Chemical pneumonitis, loss of surfactant factor, chronic lung abscess
 - D. Chemical pneumonitis, loss of surfactant factor, chronic lung abscess
 - 45. In fetal circulation, which of the following carries blood that is rich in nutrients: -
 - A. Ductus arteriosus
 - B. Inferior vena cava
 - C. Umbilical vein
 - D. Portal vein
 - 46. In pregnancies complicated by Diabetes mellitus: -
 - A. Insulin requirement increase immediately after birth
 - B. Insulin requirement decrease immediately after birth
 - C. Insulin requirements decrease during pregnancy

- D. The prenatal mortality is markedly decreased
- 47. In a mother with preeclampsia, the fetus is in danger of: -
 - A. Being delivered prematurely, with congenital abnormality
 - B. Being delivered prematurely, suffering intrauterine growth retardation
 - C. Having macrosomia, being with a congenital abnormality
 - D. Having macrosomia, being delivered premature
- 48. Characteristics of normal labour are: -
 - A. Duration 24 hour and presentation vertex
 - B. Minimal injuries and spontaneous onset
 - C. Occurs at term and membranes rupture early
 - D. Gradual cervical dilatation and thickening
- 49. Persistent occipitoposterior position is always associated with: -
 - A. Deep transverse arrest
 - B. Face to pubis
 - C. Face impaction
 - D. Normal labour
- 50. Major complications during puerperium include: -
 - A. Constipation, deep vein thrombosis, engorged breast
 - B. Puerperal sepsis, urinary tract infections, deep venous thrombosis
 - C. Puerperal pyrexia, urinary tract infections, after pains
 - D. Sub-involution of uterus, frequency of micturition, cracked nipples
- 51. A woman with preterm labor is given magnesium sulphate:
 - A. Enhance fetal lung maturity
 - B. Prevent seizures
 - C. Inhibit uterine contractions
 - D. Prevent high blood pressure
- 52. In breech delivery, the principle of hands off as the baby progressively descends so as to:
 - A. Ascertain fetal progress

- B. Allow enough room for the fetus to pass
- C. Allow gravitating descent of the fetus
- D. Avoid injury to the fetus
- 53. Contraindications for induction of labour include:
 - A. Cephalopelvic disproportion
 - B. Pre-eclampsia
 - C. Intrauterine fetal death
 - D. Diabetes mellitus
- 54. Trial of labour will be carried out when:
 - A. The fetal is longitudinal
 - B. There is cepholopelvic disproportion
 - C. There is moulding of fetal head of +3
 - D. The presentation is cephalic
- 55. A pregnant mother who has had 3 miscarriages and one live child is described as:-
 - A. Para 1+3, gravida 5
 - B. Para 1+2, gravida 3
 - C. Para 3+1, gravida 5
 - D. Para 2+2, gravid 4
- 56. A term neonate is born at: -
 - A. At 36 weeks of gestation
 - B. After 37 completed weeks up to 42 weeks of gestation
 - C. Before 37 weeks and weighing at least 3.0 kgs
 - D. Between 36 and 42 weeks of gestation.
- 57. Smaller than expected fundal height may be due to: -_
 - A. Multiple pregnancy
 - B. Maternal obesity
 - C. Intrauterine growth restriction
 - D. Large fetus
- 58. A mother has history of a live birth followed by neonatal death and recurrent abortion, which investigations is necessary: -
 - A. Blood disorders
 - B. HIV infection

- C. Rhesus incompatibility
- D. Sexually transmitted infections
- 59. In placenta type 4 it is characterized by: -
 - A. Located in the upper uterine segment
 - B. Partially covering the cervical os
 - C. Centrally covering the cervical os
 - D. Situated in the vaginal os
- 60. During window period in HIV infection:
 - A. Typically last 7-10 years
 - B. Patients have a high level of antibodies of HIV
 - C. Antibody tests are negative
 - D. Is characterized by a slow decline in CD 4 count
- 61. The most common cancer in people living with HIV /AIDS is: -
 - A. Lymphomas
 - B. Hodgkin's lymphoma
 - C. Retinoblastoma
 - D. Kaposi sarcoma
- 62. In HIV infected persons with Tuberculosis (TB), TB is treated prior to ARV initiation: -
 - A. To be resistance
 - B. To decrease toxicity
 - C. To improve adherence
 - D. To reduce occurrence of Immune Reconstitution Inflammatory Syndrome (IRIS)
- 63. The following STIs commonly cause ophthalmic neonatorum: -
 - A. Syphilis and gonorrhea
 - B. Chanchroid and Chlamydia
 - C. Chlamydia and syphilis
 - D. Chlamydia and gonorrhea
- 64. The organs majorly affected by untreated syphilis include: -

A. Liver and kidney
B. Brain and heart
C. Brain and kidneys
D. Kidneys and heart
65. Syphillitic gummas are commonly seen in: -
A. Primary syphilis
B. Secondary syphilis
C. Tertiary syphilis
D. Latent phase of syphilis
66. A nurse places a baby near a cold object or on a cold object, the baby will loss heat through: -
A. Conduction B. Convection
C. Radiation
D. Evaporation
67. When monitoring labour using a partograph, the key components to monitor are:
A. Descent, fetal heart rate, urine output
B. Fetal heart rate, moulding, liquor
C. Cervical dilatation, descent, uterine contractions
D. Maternal vital signs, fetal progress, cervical dilatation
68. The following are the consequences of occipital posterior position: -
A. Obstructed labour, cerebral haemorrhage, face to pubis
B. Maternal trauma, short ro tation, normal delivery
C. Long rotation, short rotation, deep transverse arrest
D. Prolonged labour, deep transverse arrest, long rotation
69. An adolescent is described by ages between: -
A.15-24 years
B. 10-19 years
C.13-19 years
D.13-19 years
70. The following best suits a social definition of an adolescent: -

A. Gradual onset of mature reproductive hormonal activity

	B. Period when the individual goes through physical and psychological changes
	C. One aged between 10-19 years old
	D. Stage of human development from onset of puberty to full integration of the individual.
are: -	71. Microgynon can be used as an emergency contraceptive, the required number of pills per dose
	A.2
	B.1
	C.3
	D. 4
	72. The following is a symptom based fertility awareness method: -
	A. Coitus interuptus
	B. Lactational Amenorrhea method
	C. Cycle beds
	D. Basal body temperature
	73. Youth friendly services must be: -
	A. Affordable, accessible and equitable
	B. Accessible, equal and expensive
	C. Acceptable, inappropriate, affordable
	D. Effective, equitable, limited
	74. Adolescents and young people have the right to: -
	A. Judgmental treatment
	B. Selective service
	C. Accurate information
	D. Expensive effective services
	75. The direct causes of maternal mortality include: -
	A. HIV/AIDS, TB, Hemorrhage
	B. Hemorrhage, anemia, abortion
	C. Malnutrition, obstructed labour, diabetes mellitus
	D. Abortion, pre-eclampsia, ante partum hemorrhage
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	C. Fetal heart sound is less than 120/minutes
	B. Meconium stained liquor
	A. Fetal heart sound is irregular
81	. The signs of fetal distress are: -
	D. Increased detoxification demands on mother's liver
	C. Decreased erythropoietin after first trimester
	B. Decreased dietary intake
	A. Increased blood volume
80	. Physiological anemia during pregnancy is a results of: -
	D. Myocardium
	C. Deciduas capsularis
	B. Decidua Vera
	A. Chorion frondosum
79	. The placenta originates from:
	D. Mc Donald's sign
	C. Goodells sign
	B. Chadwick's sign
	A. Braxton –Hicks signs
78	. Purple blue tinge of the cervix is:
	D. Abruption placentae
	C. Incomplete cervix
	B. Ectopic pregnancy
	A. Placenta previa
	. Premature separation of normally implanted placenta during the second half of pregnancy usually the haemorrhage is known as: -
	D. Pneumococcus
	C. Enterococcus
	B. Staphylococcus

76. 25 years old lactating mother presented with fever, acute breast pain and swelling, the following organisms can cause this acute mastitis: -

A. Streptococcus

D. All of these 82. A patient progress from pre-eclampsia to eclampsia, the nurse first action should be to: -A. Administer oxygen by face mask B. Clear and maintain as open airway C. Administer magnesium sulphate intravenously D. Assess the blood pressure and fetal heart rate 83. Most frequent side effect associated with the use of IUCD is: A. Excessive menstrual flow B. Ectopic pregnancy C. Rupture of uterus D. Expulsion of IUCD 84. Seven weeks after conception, the product of conception in the uterus is termed as: -A. Zygote B. Embryo C. Fetus D. Neonate 85. In which gynecological disorder there is continuous escape of urine in vagina: -A. Vaginal atresia B. Vesicovaginal fistula C. Rectovaginal fistula D. Uterine prolapse 86. Which of the following is NOT a characteristics feature of gonococcus salpingitis:-A. It is transmitted by unprotected sexual act B. It is always bilateral infection C. It occurs mainly during and after menstruation D. It is always unilateral infection

A. Decrease number of CD-4 T –lymphocytes

87. After HIV infection there is immunodeficiency mainly due to: -

- D. Increase number of RBC
- 88. The following statement is NOT TRUE: -
 - A. Transmission of HIV from male to female is high
 - B. Breastfeeding may also be the cause of transmission of HIV
 - C. The vertical transmission to the new born of an infected mother is about 14-25%
 - D. Transmission of HIV from female to male is high
- 89. Sexual transmitted lumphogranuloma venerem is cause by:
 - A. Traponema pallidum
 - B. Chlamydia trachomatis
 - C. Hemophilus decreyi
 - D. HIV
- 90. Clinical manifestation of pelvic inflammatory disease includes: -
 - A. Lower abdominal pain
 - B. Fever
 - C. Irregular and excessive vaginal bleeding
 - D. All of the above
- 91. The common cause of senile vaginitis is: -
 - A. Increase FSH level
 - B. Oestrogen deficiency
 - C. Malnutrition
 - D. Androgen deficiency
- 92. Presence of yellowish or blood mixed vaginal discharges after menopause and vulval pruritis are the manifestation of:
 - A. Menopause
 - B. Toxic shock
 - C. Atypical menorrhagia
 - D. Senile vaginitis
- 93. Vaginal trichomoniasis is the most common cause of vaginitis in the childbearing period, because:-
 - A. PH of vagina ranges between 1-2
 - B. PH of vagina ranges between 3-4
 - C. PH of vagina ranges between 6-7
 - D. No effect of changes in PH
 - 94. Absence of menstrual cycle in a female during reproductive period is termed as: -
 - A. Amenorrhoea
 - B. Epimenorrhoea
 - C. Hypomenorrhoea

D. Dysmenorrhoea 95. Which of the following is NOT a primary cause of dysmenorrhoea: A. Narrowing of the cervical canal B. Uterine hypoplasia C. Increased vasopressin release D. Decreased production of prostaglandins 96. Causative organism of chancroid is: A. Pox virus B. Haemophilus ducreyi C. Treponema palladium D. Chlamydia trachomatis 97. Factors that initiate respirations in a newborn include: -A. Impact of cold air on the face, high levels of oxygen, handling the baby B. Low levels of Carbon Dioxide, compression of chest wall, crying C. High levels of Carbon dioxide, impact of cold air on the face, compression of chest wall D. High levels of oxygen, sneezing, handling of the baby 98. The Antiretroviral administered to a HIV exposed infant is: -A. Zidovudine B. Nevirapine C. Lamivudine D. Stavudine 99. The earliest sign of hydrocephalus a nurse would observe in a 2 weeks old infant is: -A. Loss of appetite B. Increasing head circumference C. Sunken eyes D. Excessive cry

100. Most of maternal death occurs during: -

A. First trimester of pregnancy

B. Second trimester of pregnancy

C. Third trimester of pregnancy

