



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

DCHN 121: Midwifery

TIME: 2 HOURS

Start: 1115 HOURS

Finish: 1315 HOURS

13TH APRIL 2026

INSTRUCTIONS

1. This exam will be marked **out of 70 Marks**
2. ALL Questions are compulsory.
3. The Examination has Three Sections: Section A- Multiple Choice Questions, Section B: Short Answer Questions, Section C: Long Essay Questions
4. Answer all Questions in the ANSWER BOOKLET provided
5. Do not write anything on the question paper
6. Use the back of your booklet for rough work if need be.

SECTION I: MULTIPLE CHOICE QUESTIONS

(20 MARKS)

1. The pelvic joints include: -
 - a) One symphysis pubis, two sacrococcygeal joints, two sacroiliac joints
 - b) One symphysis pubis, one sacrococcygeal joint, one sacroiliac joint
 - c) One symphysis pubis, one sacrococcygeal joint, two sacroiliac joints
 - d) One symphysis pubis, two sacrococcygeal joints, one sacroiliac joint
2. The trophoblastic layer of the blastocyst differentiates into: -
 - a) Foetus and amnion
 - b) Placenta and chorion
 - c) Amnion and umbilical cord
 - d) Foetus and placenta
3. While monitoring uterine contractions, a midwife counts 4 contractions within 10 minutes, each lasting 30 seconds. This is interpreted as: -
 - a) Mild contractions
 - b) Strong contractions
 - c) Moderate contractions
 - d) Intermittent contractions
4. Performing counter traction during the delivery of the placenta: -
 - a) Prevents prolonged third stage of labour
 - b) Promotes uterine contractions
 - c) Fastens controlled cord traction
 - d) Prevents uterine inversion
5. Metrorrhagia is defined as: -
 - a) Irregular, frequent uterine bleeding of varying amounts but not excessive
 - b) Bleeding occurs at irregular, noncyclic intervals and with heavy flow
 - c) Bleeding at intervals greater than every 35 days
 - d) Regular bleeding at intervals of less than 21 days
6. Rectocele is: -
 - a) Descent of the uterus and cervix into the vaginal canal.
 - b) Descent of the vaginal apex into the vagina.
 - c) Downward displacement of the bladder.
 - d) Protrusion of rectum into the posterior vagina.
7. A maternal condition that warrants caesarean delivery to reduce the risk of neonatal STI transmission is: -
 - a) Active genital herpes or extensive vaginal warts at the time of delivery.
 - b) Maternal gonorrhoea treated with iron supplementation at the time of delivery.
 - c) Mild urinary tract infection without genital lesions at the time of delivery.
 - d) Mothers with positive syphilis serological test at the time of delivery.

8. A factor that best explains how substance use increases STI risk is: -
 - a) Use of alcohol or injection drugs can impair judgment and lead to unsafe sex
 - b) Use of herbal teas enhances relaxation and prevents unsafe sexual behavior.
 - c) Use of routine antibiotics eliminates all risk of STI acquisition during sexual activity.
 - d) Use of vitamin supplements improves immunity and reduces STI transmission risk.
9. A reproductive tract infection caused by an imbalance of normal vaginal flora, is best classified as a: -
 - a) Both Sexually Transmitted Infection (STI) and Reproductive Tract Infection (RTI).
 - b) Not an infection.
 - c) Reproductive Tract Infection (RTI) but not Sexually Transmitted Infection (STI).
 - d) Sexually Transmitted Infection (STI) only.
10. A factor that best illustrates how age and consent limit STI service uptake among adolescents is: -
 - a) Young people may face legal or parental consent requirements that restrict access to confidential STI services.
 - b) Adolescents are always granted full autonomy to access STI services without restrictions irrespective of their age.
 - c) Age and consent laws only apply to vaccination programs and not to sexual and reproductive health services.
 - d) Consent requirements are limited to surgical procedures and do not affect STI testing and family planning services.
11. A situation best illustrates heat loss by conduction in a neonate is: -
 - a) Evaporation of amniotic fluid from the baby's skin and mouth after birth
 - b) Exposure to cool air currents from an open window without a curtain.
 - c) Placing the baby on a cold metal weighing scale without a warm cover.
 - d) Radiant heat loss from the baby lying near a cold wall and floor in labour room.
12. A complication most strongly associated with untreated severe neonatal jaundice is: -
 - a) Mild dehydration that resolves spontaneously without long-term effects.
 - b) Kernicterus leading to permanent neurological damage and developmental delay.
 - c) Minor feeding difficulties that improve with routine breastfeeding support.
 - d) Temporary skin rash that disappears within a few days without intervention.
13. The appropriate position to establish airway during neonatal resuscitation is: -
 - a) Hyperextended position
 - b) Neutral position
 - c) Left lateral position
 - d) Sniffing position

14. When resuscitating a neonate with bag and mask, the nurse ensures: -
- The mask is large enough to cover the mouth
 - Mask covers mouth, chin and the nose
 - The neonates head is slightly flexed to maintain a neutral position
 - The mask is connected to piped oxygen
15. A barrier that most significantly limits male involvement in reproductive health services is: -
- Strong Community mobilization programs encouraging men to attend childbirth classes and immunization visits.
 - Strong cultural norms discouraging male presence in ANC and labour rooms, reinforced by peer pressure.
 - Strong national policies integrating men's roles in family planning and HIV prevention and child birth.
 - Sufficient availability of male-friendly clinics and couple-focused ANC appointments.
16. A statement which most accurately reflects the purpose of Maternal Death Review (MDR) is:
- A formal inquiry that emphasizes individual blame for maternal deaths rather than collective system learning.
 - A routine activity that documents maternal deaths focusing mainly on administrative documentation and reporting.
 - A structured process that examines maternal deaths to identify causes and strengthen health system responses.
 - A systematic approach that reviews maternal deaths concentrating primarily on service statistics and error logs
17. A maneuver used when fetal arms are stretched above the head during breech delivery: -
- Kristeller's maneuver to apply fundal pressure.
 - Lovset's maneuver to rotate and deliver the arms.
 - McRoberts' maneuver to flex the maternal hips.
 - Pinard's maneuver to deliver the fetal legs.
18. A clear indication for immediate delivery in a woman with pre-eclampsia is: -
- Eclampsia, 20ml/hr urine output, or acute pulmonary edema.
 - Gestational age of more than 28 weeks without complications.
 - Moderate hypertension with stable maternal and fetal condition.
 - Occasional nausea and vomiting without neurological symptoms
19. A principle that best ensures family planning services respect client autonomy is: -
- Accessibility, where services are provided free of charge to all.
 - Continuity, where follow-up is mandatory for every client.
 - Effectiveness, where methods are chosen only for medical eligibility.
 - Informed choice, where decisions are voluntary and client-centered.

20. A management option most appropriate for breakthrough bleeding (spotting) in a woman using COCs is: -

- a) Discontinue COCs immediately without supportive therapy and rely only on barrier methods.
- b) Encourage increased fluid intake and rest, but avoid prescribing any specific medication.
- c) Prescribe antibiotics routinely to prevent pelvic infection even without clinical evidence.
- d) Use NSAIDs such as ibuprofen 400 mg TDS × 5 days or mefenamic acid 250 mg TDS × 5 days.

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

1. State four (4) presumptive signs of the second stage of labour. (4 marks)
2. Outline four (4) functions of the female reproductive system. (4 marks)
3. Explain six (6) clinical manifestation of gestational diabetes in pregnancy. (6 marks)
4. Using the mnemonic “E-MOTIVE” state four (4) specific management of postpartum hemorrhage. (4 marks)
5. Outline the four (4) categories of Medical Eligibility Criteria (MEC) of the World Health Organization (WHO) that are used to determine the level of risk associated with contraceptive use. (4 marks)
6. State four (4) principles guiding effective chest compressions in neonatal resuscitation. (4 marks)
7. Explain four (4) reflexes present in a healthy newborn at birth. (4 marks)

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

1. Mrs. J, a pregnant woman was brought to the clinic by two of her female friends. She is lethargic, has a fever (39⁰C), and complains of relapsing headache, shivering and joint pains.
 - a) Based on the clinical presentation, name one (1) most likely medical condition affecting Mrs. J. (1 mark)
 - b) Explain four (4) clinical assessments carried out in the antenatal clinic to screen women for medical conditions in pregnancy. (4 marks)
 - c) Describe the specific management specific management of Mrs. J. (12 marks)
 - d) Explain three (3) measures recommended to protect other pregnant women from the most likely medical condition presented in scenario above. (3 marks)