



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

DNS 212: Midwifery II

MONDAY 8TH DECEMBER 2025

TIME: 2 HOURS

Start: 1400 HOURS

Finish: 1600 HOURS

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 priority nursing diagnosis for a 28-year-old primigravida at 36 weeks gestation presenting with BP 160/100 mmHg, headache, and proteinuria is:
 - A. Risk for infection related to hypertension
 - B. Risk for injury related to cerebral irritation
 - C. Anxiety related to hospitalization
 - D. Imbalanced nutrition related to poor appetite
2. The priority nursing action for a woman in labor with severe abdominal pain, vaginal bleeding, and absent fetal heart tones is:
 - A. Insert IV line and give oxytocin
 - B. Position mother in left lateral and give oxygen
 - C. Prepare for emergency laparotomy
 - D. Administer analgesia and monitor
3. The Nursing diagnosis that best applies for a 34-year-old mother at 32 weeks gestation with Hb 6 g/dl reports dizziness and palpitations:-
 - A. Deficient fluid volume related to hemodilution
 - B. Activity intolerance related to decreased oxygen
 - C. Acute pain related to anemia
 - D. Risk for infection related to immunosuppression
4. The priority Nursing intervention for a 22-year-old mother, 18 weeks gestation with persistent vomiting, dehydration, and ketonuria is:
 - A. Provide small frequent meals
 - B. Electrolyte replacement
 - C. Encourage oral fluids as tolerated
 - D. Administer antiemetics

5. The priority initial neonatal assessment for a newborn whose mother had poorly controlled gestational diabetes is:
 - A. Heart rate
 - B. Blood glucose
 - C. Skin color
 - D. Reflexes

6. The immediate nursing action for a mother in the second stage of labor and positive signs of shoulder dystocia should be:
 - A. Apply fundal pressure
 - B. Perform McRoberts maneuver
 - C. Attempt vacuum extraction
 - D. Wait for obstetrician

7. The key intervention to minimize vertical transmission in a mother at 28 weeks gestation, HIV positive and on ART is:
 - A. Emphasis on elective C-section
 - B. Ensure strict adherence to ART
 - C. Encourage mixed feeding
 - D. Avoidance of breastfeeding

8. The most likely complication in a mother, 2 days postpartum, presenting with painful engorged breasts, fever, and chills is:
 - A. Breast engorgement
 - B. Mastitis
 - C. Breast abscess
 - D. Galactocele

9. The midwife providing care for a 40-year-old Gravida 8 Para 7 mother, a history of 2 previous scars, presenting in labor with severe abdominal pain and fetal bradycardia suspects:-
 - A. Placental abruption
 - B. Ruptured uterus
 - C. Cord prolapse
 - D. Cephalopelvic disproportion

10. A mother delivers twins; the second baby develops bradycardia before delivery. The likely explanation is:
- A. Twin-to-twin transfusion
 - B. Cord prolapse
 - C. Malpresentation
 - D. Uterine inertia
11. The appropriate nursing diagnosis for a 24-year-old primigravida presenting at 10 weeks with severe weight loss and dehydration due to hyperemesis gravidarum is:
- A. Imbalanced nutrition
 - B. Risk for infection
 - C. Fluid volume overload
 - D. Disturbed body image
12. The priority post-delivery intervention when a Rhesus-negative blood type mother delivers an Rh-positive infant is:
- A. Administer IV antibiotics
 - B. Administer anti-D immunoglobulin
 - C. Ensure early breastfeeding
 - D. Monitor for neonatal jaundice
13. The intervention for a mother, 5 days post partum with fever, uterine tenderness, and offensive lochia:
- A. Encourage ambulation
 - B. Start IV antibiotics as prescribed
 - C. Give antipyretics only
 - D. Massage the uterus
14. The appropriate intervention for a neonate delivered at 32 weeks who develops nasal flaring, grunting, and chest retractions:-
- A. Provide IV antibiotics
 - B. Oxygenation, surfactant and CPAP
 - C. Give oral and IV fluids
 - D. Place baby under warmer
15. The emergency action for a mother who, during induction of labor with oxytocin, develops hyperstimulation with fetal distress is:-
- A. Stop oxytocin infusion
 - B. Give IV fluids rapidly
 - C. Encourage deep breathing
 - D. Increase oxytocin dose

16. The most appropriate obstetric procedure for a primigravida with prolonged second stage and maternal exhaustion is:
- A. Episiotomy alone
 - B. Vacuum extraction
 - C. Induction of labor
 - D. External cephalic version
17. The priority intervention for a mother with epilepsy in pregnancy admitted immediately after a seizure is:
- A. Document seizure duration
 - B. Administer oxygen
 - C. Place IV line for fluids
 - D. Inform family of risks
18. The maternal puerperal complication associated with verbal reports sadness, worthlessness and characterized by gross inability to care for the newborn is:-
- A. Postpartum blues
 - B. Postpartum depression
 - C. Puerperal psychosis
 - D. Anxiety disorder
19. In polyhydramnios, Indomethacin, is administered to:
- A. Enhance fetal lung maturity
 - B. Reduce fetal urine output
 - C. Increase maternal diuresis
 - D. Enhance maternal perfusion
20. The likely condition in a 3 day old who develops conjunctival redness and purulent eye discharge is:
- A. Ophthalmia neonatorum
 - B. Conjunctivitis from trauma
 - C. Vitamin A deficiency
 - D. Allergic conjunctivitis

SECTION II: SHORT ANSWER QUESTIONS (30 MARKS)

1. Describe four (4) parameters of the Bishop Score used to assess cervical readiness for induction. (4 Marks)
2. Describe six (6) specific nursing interventions in the management of eclampsia, giving rationale for each (6 Marks)
3. With rationale for each, outline five (5) key discharge instructions for a mother who had an episiotomy (5 Marks)
4. State four (4) distinguishing features between physiological and pathological neonatal jaundice.(4 Marks)
5. Outline five (5) nursing interventions in the management of malaria during pregnancy (5 Marks)
6. Describe six (6) steps in the pathogenesis of disseminated intravascular coagulopathy (DIC) following amniotic fluid embolism (6 Marks)

SECTION III: LONG ANSWER QUESTIONS (20 MARKS)

1. A 32-year-old mother, para 2, gravida 3 is admitted in active labor at 38 weeks' gestation. On admission her blood pressure is 150/100 mmHg; she complains of severe headache and blurred vision, and urinalysis shows 2+ protein. Labor progresses and she delivers a live male infant weighing 4.0 kg. Thirty minutes later, she develops profuse vaginal bleeding estimated at 700 ml.
 - a) Describe Six (6) specific nursing interventions that should be provided during the intrapartum period for a mother with pregnancy induced hypertension (6 Marks)
 - b) Identify Four (4) common causes of postpartum hemorrhage stating one appropriate nursing intervention for each (8 Marks)
 - c) Outline six (6) essential neonatal nursing interventions within the first 24 hours of life to prevent associated complications (6 Marks)