



**AMREF INTERNATIONAL UNIVERSITY  
SCHOOL OF MEDICAL SCIENCES  
DEPARTMENT OF REHABILITATION MEDICINE  
BACHELOR OF SCIENCE IN PHYSIOTHERAPY**

**END OF TRIMESTER EXAMINATIONS JANUARY TO APRIL 2025**

**UNIT CODE: PHT 332**

**UNIT NAME: Women health (Main exam)**

**DATE: 9th DECEMBER 2025**

**TIME: 9am-11am**

**INSTRUCTIONS**

- 1. All students will have two (2) hours to complete the examination**
- 2. This is an online exam, Attempt all questions as per the instruction**
- 3. It is the student's responsibility to report any page and number missing in this paper.**
- 4. Check that the paper is complete**
- 5. Total number of pages is 7 including the cover.**
- 6. Read through the paper quickly before you start.**

**SECTION A (30Marks): Multiple Choice Questions (1 mark each)**

1. A 28-year-old woman in her third trimester reports low back pain and difficulty walking. Which physiotherapy approach is most appropriate initially?
  - A. High-intensity core strengthening exercises
  - B. Education on posture, pelvic tilt exercises, and gentle mobility work
  - C. Prolonged bed rest until delivery
  - D. Manual traction of the lumbar spine
  
2. During pelvic floor training, a patient is instructed to “squeeze as if trying to stop urine flow.” Which muscle is MOST directly targeted?
  - A. Pubococcygeus
  - B. Obturator internus
  - C. Iliococcygeus
  - D. Coccygeus
  
3. The pelvic diaphragm is mainly formed by which muscle group?
  - A. Obturator internus and piriformis
  - B. Transversus abdominis
  - C. Gluteus maximus and minimus
  - D. Levator ani and coccygeus
  
4. A woman presents with continuous leakage of urine after prolonged obstructed labour. She no longer feels the urge to urinate. The most likely diagnosis is:
  - A. Urge incontinence
  - B. Vesicovaginal fistula
  - C. Rectovaginal fistula
  - D. Stress incontinence
  
5. A patient undergoing pelvic floor rehab demonstrates urge urinary incontinence. Which behavioral strategy should be taught alongside pelvic floor training?
  - A. Bladder retraining with scheduled voiding and urge suppression techniques
  - B. Drinking less water to avoid urine production
  - C. Straining to void to empty bladder completely
  - D. Immediate use of indwelling catheter at home
  
6. Which stroke is NOT a technique used in manual lymph drainage?
  - a) Stationary circles
  - b) Scoop technique
  - c) Pump technique

- d) Friction massage
7. During rehabilitation, a patient with secondary lymphedema from pelvic radiotherapy reports increasing swelling after compression bandaging. What is the MOST important action?
- a) Encourage the patient to continue as swelling will resolve
  - b) Remove the bandage immediately and reassess technique
  - c) Apply additional tight layers to improve pressure
  - d) Switch to diuretics instead of compression
8. Which hormone is primarily responsible for softening pelvic ligaments during pregnancy?
- A. Progesterone
  - B. Estrogen
  - C. Relaxin
  - D. Oxytocin
9. A postpartum woman 4 weeks after vaginal delivery presents with mild diastasis recti. Which intervention is most appropriate at this stage?
- A. Heavy resistance core lifting
  - B. Gentle pelvic floor exercises and modified abdominal strengthening
  - C. Abdominal support
  - D. Avoid all physical activity until 12 weeks
10. A pregnant patient complains of pelvic girdle pain. Which physiotherapy strategy is likely to provide immediate relief?
- A. Manual therapy, pelvic support belts, and stabilization exercises
  - B. Bed rest
  - C. Pelvic support belt
  - D. Stabilization exercises of the lumbar spine
11. A woman who had a hysterectomy 2 weeks ago wants to start physiotherapy. Which approach is safest?
- A. Heavy resistance training for core and legs
  - B. Gradual ambulation, deep breathing exercises, and gentle mobility
  - C. Gradual ambulation on flat surface
  - D. Ignoring pain and performing full activity
12. Pelvic floor dysfunction can lead to:
- A. Incontinence
  - B. Pelvic organ prolapse
  - C. Sexual dysfunction

D. All of the above

13. A 19-year-old Jane with pre-eclampsia is referred for physiotherapy. Which intervention is considered safest?

- A. Bedrest
- B. High-intensity resistance training with careful monitoring
- C. Moderate-intensity aerobic exercise with careful monitoring
- D. Supervised vigorous yoga with careful monitoring

14. Which of the following is not a physiological change during pregnancy?

- A. Increased blood volume
- B. Decreased cardiac output
- C. Increased respiratory rate
- D. Weight gain

15. The levator ani muscle group includes all except:

- A. Pubococcygeus
- B. Iliococcygeus
- C. Puborectalis
- D. Coccygeus

16. A woman 12 weeks postpartum complains of persistent urinary incontinence. On history she had an instrumental delivery with perineal trauma. Which prognostic factor predicts poorer recovery with physiotherapy?

- A. Severe sphincter injury (3rd/4th degree obstetric tear)
- B. Short duration of symptoms (<6 weeks)
- C. Mild stress incontinence onset after exercise only
- D. Early initiation of pelvic floor exercises

17. During external observation, asymmetry of Anterior Superior Iliac Spine and Posterior Superior Iliac Spine levels is noted. This suggests:

- a) Obturator nerve palsy
- b) Coccygeal fracture
- c) Diaphragmatic weakness
- d) Pelvic tilt or rotation

18. A 32-year-old woman after fistula repair is educated on pelvic hygiene and avoiding heavy lifting. This intervention primarily aims to:

- A. Strengthen abdominals
- B. Prevent wound breakdown and recurrence
- C. Increase intra-abdominal pressure
- D. Improve flexibility

19. A patient presents with swelling of the leg, “squared toes,” and a positive Stemmer’s sign. What is the clinical implication of this finding?

- a) Indicates venous insufficiency rather than lymphedema
- b) Suggests early-stage, reversible lymphedema
- c) Confirms presence of lymphedema
- d) Suggests arterial insufficiency

20. The normal duration of the postpartum period is considered:

- A. 6 weeks
- B. 2 weeks
- C. 3 months
- D. 9 months

21. A runner presents with posterior pelvic pain. On exam, the physiotherapist suspects pudendal nerve irritation. Which anatomical landmark is MOST relevant for nerve entrapment?

- A. Ischial spine and sacrospinous ligament
- B. Anterior Superior Iliac Spine and inguinal ligament
- C. Pubic symphysis and rectus abdominis
- D. Greater trochanter and iliotibial band

22. During pregnancy, the center of gravity shifts:

- A. Upward
- B. Forward
- C. Backward
- D. Laterally

23. A 65-year-old man has involuntary leakage of stool after rectal surgery. On assessment, weakness of which structure is MOST implicated?

- a) Internal anal sphincter
- b) External anal sphincter
- c) Puborectalis muscle
- d) Levator ani

24. A 28-year-old woman presents with fecal soiling after childbirth. Which type of tear is MOST associated with this dysfunction?

- a) First-degree
- b) Second-degree
- c) Third-degree
- d) Fourth-degree

25. During breast examination post-lumpectomy, a physiotherapist observes restricted scar mobility. Which intervention is MOST appropriate?
- a) Scar mobilization and soft tissue therapy
  - b) High-intensity exercise
  - c) Avoiding arm movement
  - d) Cervical traction
26. Which of the following best describes the preventive role of physiotherapists in women's health?
- a) Managing gynecological malignancies
  - b) Promoting ergonomics and safe exercise guidelines
  - c) Conducting manual therapy
  - d) Pain preventive procedures
27. patient with early-stage lymphedema shows swelling that reduces overnight after limb elevation. Which grade is MOST consistent with this presentation?
- a) Grade 1
  - b) Grade 2
  - c) Grade 4
  - d) Stage 3
28. A patient with fecal incontinence shows reduced endurance on pelvic floor testing. Which strategy is MOST effective for rehabilitation?
- a) Quick flick contractions only
  - b) Long-hold contractions with progression
  - c) Electrical stimulation exclusively
  - d) Bed rest and avoidance of exercise
29. A physiotherapist begins manual lymph drainage for a patient with lymphedema. Which area should be treated FIRST?
- a) The swollen limb directly
  - b) The unaffected proximal lymphatic regions
  - c) The distal swollen areas
  - d) The thoracic duct only
30. A patient present with postpartum urinary leakage and low back pain. Weakness of which muscle group BEST explains both symptoms?
- a) Pelvic floor and Rectus abdominis
  - b) Pelvic floor and transversus abdominis
  - c) Pelvic floor and Hip abductors
  - d) Hamstrings

## **SECTION B (20 MARKS)**

### **SHORT ANSWER QUESTIONS (5 marks each)**

31. Differentiate between obstetric fistula and pelvic floor dysfunction in terms of causes, pathophysiology, and physiotherapy management.
32. Analyze the physiological and musculoskeletal adaptations during pregnancy.
33. Formulate an evidence-based physiotherapy program for a woman 6 weeks postpartum focusing on safe return to physical activity.
34. Evaluate the role of physiotherapists in promoting women's health through prevention, education, and community outreach.

## **SECTION C (20 Marks): Long Answer Questions (10 marks each)**

**Answer any TWO questions.**

35. Develop a comprehensive physiotherapy management plan for a patient with *pelvic floor dysfunction*, including clinical reasoning from assessment to discharge.
36. Critically appraise physiotherapy strategies in *breast cancer rehabilitation*, emphasizing evidence-based interventions for lymphoedema prevention and psychosocial reintegration.
37. Design a physiotherapy protocol addressing the anatomical, physiological, and biomechanical changes throughout the *childbearing year*, linking adaptations to functional implications.