



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: Physiotherapy in women health (Online Upgrading)

DATE: 7th APRIL 2025

TIME: 6pm-8.30pm

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 6 including the cover.**
- 6. Read through the paper quickly before you start.**
- 7. Upon finishing the exam paper, on submission, the message 'Your examination has been submitted' will appear.**

TOTAL: _____/70

PERCENT: _____/100%

POINTS EARNED TOWARDS FINAL GRADE _____/70

1. A possible cause of underactive pelvic floor muscles includes all EXCEPT:
 - A. Childbirth injury
 - B. Surgery
 - C. Aging
 - D. Joint Malalignment of the sacroiliac joint

2. A possible cause of overactive pelvic floor muscle includes all EXCEPT:
 - A. Hemorrhoids
 - B. Habitual postural changes
 - C. Joint malalignment of the pubic symphysis
 - D. Chronic increase in intra-abdominal pressure

3. The anorectal angle maintained by the puborectalis muscle associated with fecal incontinence is:
 - A. 20 degrees
 - B. 110 degrees
 - C. 90 degrees
 - D. 75 degrees

4. Simple constipation with mild to moderate symptoms responds well to conservative measures like fiber intake.
 - A) True
 - B) False

5. You are working with a patient regarding symptoms of prolapse. You have educated the client on constipation management already. What other techniques can you use for management?
 - A. Lifting modifications & breathing techniques
 - B. Splinting & stretches
 - C. Efficient bladder emptying
 - D. Lifting modifications & running

6. When providing education to your patients with incisional pain you want to encourage slow movement to minimize the chance of increasing pain.
 - A) True
 - B) False

7. Prolonged standing may increase symptoms of coccydynia.
 - A) True
 - B) False

8. If your client reports discomfort during intercourse only with their current partner, but not with their previous partner this would be considered:
 - A. Deep Dyspareunia
 - B. Entry Dyspareunia

- C. Situational Dyspareunia
 - D. Primary Dyspareunia
9. Your client has never been able to experience pain-free intercourse. What would be their diagnosis?
- A. Deep Dyspareunia
 - B. Entry Dyspareunia
 - C. Situational Dyspareunia
 - D. Primary Dyspareunia
10. There is a report from your client that they experience internal vaginal pain after the initial penetration. This is called:
- A. Deep Dyspareunia
 - B. Entry Dyspareunia
 - C. Situational Dyspareunia
 - D. Primary Dyspareunia
11. Your client has deep indentations from your fingers that return to normal after 5 to 30 seconds. What types of pitting edema does your patient have?
- A. 1+
 - B. 2+
 - C. 3+
 - D. 4+
12. Your patient has a slight indentation after you depress their skin with your fingers. What type of pitting edema do they have?
- A. 1+
 - B. 2+
 - C. 3+
 - D. 4+
13. Your client has been diagnosed with lymphedema without an identifiable triggering event. What is the classification of this lymphedema?
- A. Secondary
 - B. Congenital
 - C. Praecox
 - D. Tarda
14. Your patient's tumor is limited to just her breast. What stage is this?
- A. 0
 - B. I
 - C. II
 - D. III

15. Your patient's tumor has spread to regions surrounding the breast and has a high probability of metastatic spread. What stage is this?
- A. I
 - B. II
 - C. III
 - D. IV
16. Lymphedema refers to tissue swelling caused by:
- A. An accumulation of protein-poor fluid
 - B. An accumulation of protein-rich fluid
 - C. A reduction of protein-poor fluid
 - D. A reduction of protein-rich fluid
17. The most common causes of lymphedema include all EXCEPT
- A. Cancer
 - B. Chemotherapy
 - C. Surgery
 - D. Parasites
18. This type of breast cancer looks like mastitis.
- A. Metastatic
 - B. Peau d' orange
 - C. Inflammatory breast cancer
 - D. Triple Negative
19. If your patient, diagnosed with thrombocytopenia, experiences a platelet count below _____, massive bleeding may occur even when there is no injury
- A. 30,000
 - B. 40,000
 - C. 50,000
 - D. 20,000
20. According to the Osborne Exercise guidelines, your client with a red blood cell count of _____ can walk short distances and use a stationary bicycle for 5-10 minutes.
- A. 5-7
 - B. 8-12
 - C. 13-15
 - D. 17-20
21. No muscle is disturbed with this type of breast reconstruction surgery.
- A. Latissimus flap
 - B. TRAM
 - C. DIEP
 - D. SGAP

22. According to the Osborne Exercise Protocol, this would be appropriate during the 4-12 weeks post-op:
- A. Closed kinetic chain exercises
 - B. Pool therapy
 - C. Side Flexion stretching
 - D. Abdominal/lumbar stabilization exercises
23. Abdominal tone is ____ lower than pre-pregnancy 1 year postpartum in women who return to exercise compared to ____ in non-exercising, physically active women.
- A. 52%; 15%
 - B. 15%; 52%
 - C. 35%; 75%
 - D. 75%; 35%
24. The use of surface EMG assesses the recruitment NOT strength of the pelvic floor muscles.
- A) True
 - B) False
25. The most common site for diastasis recti to be present during pregnancy is
- A. Above the umbilicus
 - B. At the umbilicus
 - C. Below the umbilicus
 - D. Diastasis is not common during pregnancy
26. One of the main predictors of pelvic girdle pain during pregnancy is
- A. Asymmetrical laxity in the SI joints
 - B. Believing you will have pain
 - C. Exercising prior to pregnancy
 - D. Poor eating habits
27. A patient presents with daily pubic symphysis pain with transitional activities. How would this be classified?
- A. Coccydynia
 - B. Symphysiolysis
 - C. One-sided Sacroiliac Syndrome
 - D. Double-sided Sacroiliac Syndrome
28. What is the normal gap of the pubic symphysis?
- A. 5-9 mm
 - B. 9-11 mm
 - C. 12-16 mm
 - D. 1-5 mm

29. On average, a woman will experience pain during pregnancy when the width of the pubic symphysis is greater than:
- A. 9.5 mm
 - B. 6.5 mm
 - C. 7.0 mm
 - D. 8.5 mm
30. Your patient is 36 weeks pregnant and has an old ACL injury that has been painful since she was 20 weeks pregnant. She plans on an unmedicated birth. Which of the following positions should you tell her to AVOID during birth?
- A. Semi-recumbent
 - B. Sidelying
 - C. Seated
 - D. Squatting
31. A trained Physical Therapist's role in labor and delivery includes all of the following EXCEPT:
- A. Education on birthing positions while treating in the clinic
 - B. Positioning for delivery in the delivery room
 - C. Inform the OB what position the baby needs to be delivered in
 - D. Education at childbirth classes for musculoskeletal complaints
32. Your patient is referred to you for posterior pelvic girdle pain. Which of the following areas do you expect for the patient to complain of pain?
- A. Buttock to gluteal fold
 - B. Low back across L5 region
 - C. Sciatic nerve path
 - D. Inguinal canal
33. The goal of therapeutic intervention during pregnancy is:
- A. Stability with rigidity
 - B. Stability with flexibility
 - C. Stability with mobility
 - D. Stability only
34. What position do you want to minimize duration while treating a female patient at 24 weeks pregnant due to possible compression of the vena cava?
- A. Supine
 - B. Left Sidelying
 - C. Reclined
 - D. Unsupported sitting
35. The pelvic floor muscles have the primary functions to do:
- A. Sphincteric control
 - B. Support pelvic content

- C. Sexual function
 - D. All the above is true
36. Which hormone contributes to creating a protective environment in the early stages of embryo development
- A. hCG
 - B. Relaxin
 - C. Estrogen
 - D. Progesterone
37. This stage of labor is most important to ensure the mother's health has stabilized.
- A. First stage
 - B. Second stage
 - C. Third stage
 - D. Fourth stage
38. This hormone contributes to generalized smooth muscle relaxation and decreased motility of the gastrointestinal tract, often result in constipation.
- A. hCG
 - B. Relaxin
 - C. Estrogen
 - D. Progesterone
39. Women having back and pelvic pain are 4 times more likely to have postpartum depressive symptoms than those without.
- A) True
 - B) False
40. The World Health Organization defines normal term for birth as between
- A. 35-36 weeks
 - B. 37-42 weeks
 - C. 42-45 weeks
 - D. 30-35 weeks
41. What would you encourage your client to do during pregnancy to manage constipation
- A. Sleep 8 hours a night
 - B. Reduce fiber intake
 - C. Increase water intake
 - D. Sit more often
42. How much do you want to encourage your client to drink every 15 minutes of exercise?
- A. 4 ounces
 - B. 8 ounces
 - C. 10 ounces

- D. 12 ounces
43. Risk factors for a nerve injury in pregnancy and postpartum include all EXCEPT
- A. Nulliparity
 - B. Prolonged 2nd stage of labor
 - C. Semi-fowler-lithotomy position
 - D. Prolonged sitting
44. Someone who experienced a nerve injury in pregnancy or postpartum may experience changes in skin, hair, and nails.
- A) True
 - B) False
45. A client experiences a mild form of nerve injury with recovery within hours to weeks. What is the classification?
- A. Neuropraxia
 - B. Axonotmesis
 - C. Neurotmesis
 - D. Axonoprxia
46. According to ACOG, in the absence of either medical or obstetric complications, 15 minutes or more of moderate exercise a day on most days of the week is recommended for pregnant women.
- A) True
 - B) False
47. When incorporating muscle energy techniques for pubic symphysis pain you want to instruct your client to _____ energy
- A. Maximal and gentle
 - B. Maximal and hard
 - C. Submaximal and gentle
 - D. Submaximal and hard
48. An absolute indication for a C-section is
- A. Repeat C-section
 - B. Fetal distress
 - C. Placenta previa
 - D. Breech presentation
49. Your client reports hemorrhoids postpartum and experiencing discomfort. What may be contributing to this?
- A. Sidelying while feeding
 - B. Increase strain on rectal veins
 - C. Diarrhea

- D. Underactive pelvic floor muscles
50. Which is considered good biomechanics for a mom
- A. Use of pillow support behind the small of her back to avoid slouching
 - B. Lifting an item and turning body at the same time
 - C. Always holding their child on the same hip
 - D. Bending forward at the stove to prepare meals
51. Back pain that lasts more than 14 days postpartum is considered post epidural pain
- A) True
 - B) False
52. This test would be appropriate for assessing functional load transfer
- A. Stork test
 - B. Thigh thrust
 - C. FABERS
 - D. Gaenslen's
53. A client experiences a nerve injury during pregnancy that resolved in 2 months. What is the classification?
- A. Neuropraxia
 - B. Axonotmesis
 - C. Neurotmesis
 - D. Axonopraxia
54. A client, during their initial evaluation, reported knee buckling and sensory loss throughout her anterior thigh above the knee. You make note of pain relief with hip flexion and external rotation. Which nerve is involved?
- A. Obturator
 - B. Femoral
 - C. Pudendal
 - D. Sciatic
55. A client reports paresthesia and pain radiating down the lateral and anterolateral thigh and you make note of no associated motor weakness. Which nerve is involved?
- A. Lateral femoral cutaneous
 - B. Obturator
 - C. Pudendal
 - D. Sciatic
56. A client experienced a compression of the lateral femoral cutaneous nerve. What would be the diagnosis?
- A. Sciatica
 - B. Overactive obturator
 - C. Meralgia Paresthetica

- D. Pudendal neuralgia
57. During examination you discover your patient has adductor muscle weakness and diminished sensation in the medial thigh. Which nerve is involved?
- A. Lateral femoral cutaneous
 - B. Obturator
 - C. Pudendal
 - D. Sciatic
58. Your patient reports an increase in pain with prolonged walking and groin pain. During your examination you discover an increase in pain with hip internal rotation and external rotation, pain with light touch and no motor weakness. Which nerve is involved?
- A. Genitofemoral
 - B. Iliohypogastric
 - C. Ilioinguinal
 - D. Obturator
59. If you wanted to assess your client to determine if they are experiencing pain from their SIJ you would use this test:
- A. Stork test
 - B. Active Straight leg raise
 - C. Gaenslen's
 - D. Modified Trendelenburg
60. You are working to restore your pregnant patient to their prior level of functioning. You want to focus on
- A. Postural instructions & bladder emptying techniques
 - B. Correct breathing patterns & workplace ergonomics
 - C. Correct breathing patterns & bowel management
 - D. Biofeedback & postural instructions
61. Exercise in early and mid-pregnancy slows down placental growth
- A) True
 - B) False
62. Your patient is experiencing obstructive voiding. What kind of pelvic floor muscle condition would your patient be diagnosed with?
- A. Normal
 - B. Underactive
 - C. Overactive
 - D. Non-functioning
63. Your treatment goal during pregnancy is to:
- A. Optimize posture to optimize unload

- B. Reduce pelvic floor muscle activity
 - C. Focus on dynamic control of lumbopelvic orientation
 - D. Only train control during static lumbopelvic position
64. All of these special tests are considered pelvic provocation tests EXCEPT:
- A. FABER test
 - B. Modified Trendelenburg
 - C. Active SLR
 - D. Thigh thrust
65. You decide to use this test to assess if your client has transient osteoporosis of the hip:
- A. Hip scour
 - B. FADIR
 - C. Patellar-pubic percussion test
 - D. FABER
66. Cancer is the _____ leading cause of death in Kenya.
- A. 1st
 - B. 2nd
 - C. 3rd
 - D. 4th
67. Stage is how _____ the cancer is; Grade is how _____ the cells are from normal cells
- A. Non-invasive; different
 - B. Invasive; different
 - C. Non-invasive; similar
 - D. Invasive; similar
68. Tests to assess for neural tension includes all EXCEPT:
- A. Straight leg raise
 - B. Slump sit test
 - C. Gillet's
 - D. Femoral nerve test
69. What is considered the gold standard for DRA measurement
- A. Tape measurement
 - B. Ultrasound
 - C. Finger
 - D. Caliper
70. Goals for treatment with pelvic girdle pain include:
- A. Decrease load transfer ability
 - B. Do not address pain
 - C. Maximize asymmetrical movements

D. Normalize symmetrical gait pattern.

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