



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

DNS 212: Midwifery II

DATE: WEDNESDAY 8TH APRIL 2026

TIME: 2 HOURS

Start: 11.15 HOURS

Finish: 13.15 HOURS

INSTRUCTIONS

- 1. This exam will be marked out of 70 Marks**
- 2. ALL Questions are compulsory.**
- 3. The Examination has Three Sections: Section I- Multiple Choice Questions, Section II: Short Answer Questions, Section II: 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 (MCQs) (20 MARKS)

1. Regarding Abruptio placenta: -
 - a) Postpartum hemorrhage will occur only if there is hypofibrinogenemia
 - b) Maternal anemia is a major cause
 - c) Fetus is not usually affected
 - d) It is associated with antecedent hypertension

2. Placenta previa: -
 - a) Is diagnosed when the placenta occupies the fundus and starts to bleed
 - b) Always results in postpartum hemorrhage
 - c) Results in an abnormal fetal heart rate.
 - d) Is uncommon in patients with repeat caesarian section

3. Atonic Post-partum hemorrhage is best managed with: -
 - a) Intra-venone progesterone
 - b) 0.5 mg oral ergometrine and uterine massage
 - c) 10 units STAT syntocinon and uterine massage with 40 units syntocinon in 500ml Normal saline to be given Intravenously
 - d) Oxytocin and bimanual compression of the uterus

4. In disseminated intravascular coagulation (DIC):-
 - a) The level of Fibrinogen degeneration products(FDPs) is low
 - b) Platelet count is high
 - c) Bleeding time is prolonged
 - d) PT and PTT are normal

5. An indication for induction of labor includes: -
 - a) Placenta previa.
 - b) Postterm gestation.
 - c) Prior classical cesarean section.
 - d) Active genital herpes.

6. Compound presentation is commonly associated with: -
 - a) Prematurity.
 - b) Advanced maternal age.
 - c) Uncoordinated uterine contractions.
 - d) Diabetic pregnant woman.

7. Complete breech means: -
 - a) Flexion at hip joint and extension in knee joint
 - b) Flexion at hip joint and flexion at knee joint
 - c) Extension at the hip joint
 - d) Flexion at knee joint and extension at the hip join

8. The following is a contraindication of Vacuum Extraction delivery: -
 - a) Face presentation
 - b) 38 weeks gestation
 - c) Chorioamnionitis
 - d) Post-term pregnancy

9. In breech presentation: -
- Brachial plexus injury is a recognized complication.
 - Prolapse of the umbilical cord can occur.
 - Fetal mortality is increased.
 - All of the above.
10. In Pre-eclampsia, right upper quadrant part abdominal pain is due to: -
- Tension of the liver capsule
 - Cholecystitis
 - Pancreatitis
 - Gastric ulcer
11. Regarding eclampsia: -
- Caesarean section must be carried out in all cases
 - Hypotensive drugs should not be used
 - Antidiuretic drugs are essential in all cases
 - Ergometrine should be avoided in the third stage of labor
12. One of the following statements is true about Erbs palsy: -
- There is damage to the lower brachial plexus involving the 7th and 8th cervical root nerves
 - There is damage to the upper brachial plexus involving the 5th & 6th cervical root nerves
 - There is damage to all the brachial plexus nerve roots
 - There is damage to the spinal roots C8 and T1
13. A risk factor for neonatal sepsis includes: -
- Premature rupture of membranes over 18 hours
 - Group B hemolytic streptococcus
 - Enterococcus
 - Hypothermia
14. In regard to hemolytic diseases of the newborn: -
- Rhesus incompatibility matters only when a Rh-negative offspring is born to a Rh-positive mother.
 - ABO incompatibility is more likely than Rh incompatibility to precipitate significant anemia.
 - Exchange transfusions are frequently required in the treatment of hemolytic disorders.
 - The indirect Coombs' test is performed on the mother before birth; the direct Coombs' test is performed on the cord blood after birth
15. The major sign of ABO blood incompatibility in a neonate is: -
- Negative coombs test
 - Bleeding from nose and ears
 - Jaundice after the first 24 hours
 - Jaundice within the first 24 hours of life

16. Preterm babies should gain about _____ of body weight every day after the first 7 days of life.

- a) 20-30g/d.
- b) 10-15g/d
- c) 8-10g/d
- d) 15-20g/d

17. Absence of one artery during placenta examination is associated with: -

- a) Talipes
- b) Acyanotic defects
- c) Tetralogy of fallots
- d) Renal agenesis

18. One of the following statements describes a preterm baby on examination of the head: -

- a) Head appears larger in comparison with the rest of the body, sutures and fontanelles are widely separated, ears look flat, cartilage not yet formed
- b) Head appears larger in comparison with the rest of the body, only fontanelles are widely separated, ears look flat, cartilage not yet formed
- c) Head appears larger in comparison with the body, sutures and fontanelles are overlapping, ears look flat, cartilage not yet formed
- d) Head appears larger in comparison with the rest of the body, sutures only are widely separated, ears look flat, cartilage not yet formed

19. Complications commonly associated with low birth weight babies include: -

- a) Respiratory distress syndrome (RDS), macrosomia, hyperglycaemia
- b) Hypothermia neonatorum, neonatal jaundice, hyperglycaemia
- c) Hypoglycaemia, hyperglycaemia, Respiratory distress syndrome (RDS)
- d) Neonatal jaundice, Hypothermia, Respiratory distress syndrome (RDS)

20. A newborn in the postnatal ward is found to have a random blood sugar of 1.6 mmol/L.

The appropriate next step to take should be: -

- a) To tell the mother to breast feed the baby
- b) Feeding expressed breastmilk via nasogastric tube
- c) Administering intravenous 10% Dextrose 60 ml/kg
- d) Administering intravascular glucagon

SECTION II: SHORT ANSWER QUESTIONS (SAQ)

(30 MARKS)

1. Define the following terms: (3 Marks)
 - a) Obstructed labor
 - b) Symphysiotomy
 - c) Cephalopelvic disproportion
2. State four (4) impending signs of eclampsia (4 Marks)
3. Outline four (4) strategies for the management of breast engorgement (4 Marks)
4. State five (5) causes of malpresentation in pregnancy (5 Marks)
5. State two (2) environmental and two (2) neonatal factors that predispose the newborn to hypothermia. (4 marks)
6. State three (3) nursing diagnosis relevant in the nursing management of a baby with Neonatal sepsis (3 Marks)
7. Outline six (6) ways of preventing infection of babies in the newborn unit (3 Marks)
8. Highlight four (4) specific nursing interventions for a neonate on phototherapy (4 Marks)

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

1. Mrs. Z has just delivered her third baby, a live female infant weighing 3.5kg. The delivery was uneventful. Upon admission into the post-natal ward; there is profuse bleeding from the birth canal and a diagnosis of Postpartum hemorrhage is made.
 - a. Define postpartum hemorrhage (2 Marks)
 - b. Explain the two (2) types of post-partum hemorrhages (4 Marks)
 - c. Explain three (3) causes of post partum hemorrhage (6 marks)
 - d. Describe the management of Mrs. Z till discharge (8 marks)