Reproductive Health Exam 1

RH & Safe Motherhood I (Main paper)

SECTION A: MCQs 20 marks

1. The pelvic joint formed where the base of the coccyx articulates with the tip of the sacrum is:
A. Symphysis pubis
B. Sacroiliac
C. Sacrococcygeal
D. Hip joint

2. What causes pain during the last months of pregnancy?
A. Stretching of pelvic floor muscles
B. Increased mobility on symphysis pubis joint
C. Movement of coccyx bone outward
D. Descent of foetus in to the pelvic cavity

3. Obstetric conjugate diameter is measured from:
A. Posterior of the upper surface of the symphysis pubis to sacropromontory
B. Uppermost point of Symphysis pubis to sacropromontory
C. Lower part of Symphysis pubis to sacropromontory
D. Midpoint of Symphysis pubis to sacropromontory

Obstetric conjugate = 10.5 cm/. From the tip of the sacral promontory to the most bulging point on the back of symphysis pubis which is about 1 cm below its upper border. It is the shortest antero-posterior diameter.

4. Function of false pelvis is to:
A. Protects the foetus
B. Allows the passage of the foetus during birth
C. Forms the inlet diameter
D. Protects abdominal organs

5. Anteroposterior diameter of the outlet measures:
A. 10.5 cm
B. 11 cm
C. 12 cm
D. 13 cm

Anatomical antero-posterior diameter (true conjugate) = 11cm. From the tip of the sacral promontory to the upper border of the symphysis pubis.

6. The ligaments that maintain the uterus in position are:
A. The round, uterosacral, broad ligaments
B. The pubocervical, broad, tranverse cervical ligaments

C. Uterosacral, pubocervical, tranverse cervical ligaments
D. The broad, tranverse cervical ligaments,ovarian ligament

The ligaments that maintain the uterus in position are the round ligaments, uterosacral ligaments, and broad ligaments. Therefore, the correct answer would be option A: The round, uterosacral, and broad ligaments.

7. One of the following hormones maintains acidity of the vagina:
A. Oestrogen
B. Progesterone
C. oestradiol
D. oestrone

8. The decidua that covers the blastocyst is:
A. Basal layer
B. Capsular decidua
C. Basal decidua
D. Parietal decidua

9. The structure of trophoblast that enables the growing foetus to access nutrients in the maternal blood is:
A. Cytotrophoblast
B. Syncytiotrophoblast
C. Mesoderm
D. ectoderm

10. The inner cell mass of blastocyst develops into:
A. Placenta,amnio, foetus
B. Chorion, umbilical cord, placenta
C. Foetus, amnion, umbilical cord
D. Placenta, amniotic fluid, foetus
11. Quickening takes place at what gestation period?
A. 16-20 weeks
B. 20-24 weeks
C. 24-28 weeks
D. 28-32 weeks

12. Which of the following diameters are reduced when the foetal head is fully flexed?
A. Biparietal and mentovertical
B. Mentovertical and occipitofrontal
C. Suboccipitobregmatic and submentovertical
D. Biparietal and Suboccipitobregmatic

When the fetal head is fully flexed, the diameters that are reduced are the biparietal and suboccipitobregmatic diameters. Therefore, the correct answer is option D: Biparietal and suboccipitobregmatic.

13. Majority of women experience disorders of pregnancy. Which of the following disorders do most women complain of?
A. Breast tenderness
B. Constipation
C. Nausea and vomiting
D. Heartburn

The most common disorder of pregnancy that women complain of is nausea and vomiting, commonly referred to as morning sickness. Therefore, the correct answer is option C: Nausea and vomiting.

14. The midwife performs fundal palpation to determine:
A. Position
B. Foetal heart
C. Presence of head or breech
D. lie

The midwife performs fundal palpation to determine the position and lie of the fetus. Fundal palpation helps to locate the position of the fetus in the uterus relative to the maternal pelvis and can help to assess if the fetus is in a longitudinal or transverse lie. Therefore, the correct answer is option D: Lie

15. The period when the cervix is 3-4 cm dilated until full dilatation of cervix and is accompanied by rhythmic uterine contractions is:
A. First stage of labour
B. Active first phase
C. Latent phase
D. Transitional phase

The period when the cervix is 3-4 cm dilated until full dilatation of the cervix and is accompanied by rhythmic uterine contractions is known as the first stage of labor. During this stage, the cervix gradually opens (dilates) and effaces (thins), preparing for the birth of the baby. The first stage of labor is further divided into three phases: the latent phase, active first phase, and transitional phase. Therefore, the correct answer is option A: First stage of labor.
16. The midwife assesses uterine contractions from the start to the end in order to determine:
A. Tone
B. Intensity
C. Strength
D. duration

17. On abdominal examination the uterine contractions are frequent and last 60 seconds and a saucer-shaped depression in visible at the umbilical region. The first action by midwife would be to:
A. Call the doctor
B. Prepare for emergency ceasarian section
C. Set up IV line
D. Rule out full bladder

18. The determinants of progress of labour are:
A. Descent of foetal head and quality of uterine contraction

B. Foetal heart rate and cervical dilatation
C. Descent of foetal head and cervical dilatation
D. Maternal condition and foetal heart rate

19. Dysfunctional labor may be caused by which of the following?
A. Excessive or too early analgesia administration
B. Exhausted mother
C. Over distention of the uterus
D. Misdiagnosed onset of true labour

20. The most important nursing consideration in a postpartum woman with a hypotonic uterine contraction within 24 hours after delivery is to assess:
A. Infection
B. Bleeding
C. Foetal Heart Rate
D. Woman's coping mechanism

SECTION B SAQs (40 marks)
Instructions:
i. There are six questions in this section
ii. Answer all the questions

1. Outline six functions of mature placenta (6 marks)

- Oxygen and nutrient exchange
- Waste elimination
- Hormone production: human chorionic gonadotropin (hCG)
- Immunological protection
- Barrier function
- Endocrine regulation. It helps modulate the mother's hormonal balance during pregnancy,

2. Outline any 7 critical aspects that a midwife must pay attention to during physical assessment of antenatal mother (7 marks)

- Maternal Vital Signs
- Maternal nutrition
- Fetal Heart Rate
- Fundal height
- Weight gain
- Oedema
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3. State 8 danger signs in pregnancy (8 marks).

- 1. Vaginal bleeding
- 2. Severe and constant abdominal pain
- 3. Severe headaches with vision changes
- 4. Reduced fetal movements
- 5. Preterm labor symptoms (contractions, cramping, back pain)

- 6. Excessive nausea and vomiting (hyperemesis gravidarum)
- 7. High fever
- 8. Signs of infection (fever, abdominal pain, abnormal discharge)

4. State six functions of oestrogen that influences the onset of labour(6 marks)

- 1. Cervical Softening: Estrogen helps to soften and ripen the cervix, preparing it for dilation and effacement during labor.
- 2. Uterine Contractions: Estrogen plays a role in stimulating uterine contractions, which are essential for initiating and progressing labor.
- 3. Fetal Lung Maturation: Estrogen helps in the maturation of fetal lungs by stimulating the production of surfactant, a substance that allows the lungs to expand and function properly after birth.
- 4. Rupture of Membranes: Estrogen helps to weaken the membranes surrounding the amniotic fluid, making them more prone to rupture, which is a common sign that labor is about to begin.
- 5. Gastrointestinal Changes: Estrogen affects the smooth muscle in the intestines, leading to increased motility and bowel movements, which can help clear the intestines prior to labor.
- 6. Preparation of Mammary Glands: Estrogen stimulates the growth and development of mammary glands in the breast, preparing them for lactation and breastfeeding after delivery.

5. Outline indications for vaginal examination (7 marks)
6. Explain three causes of decreased variability in foetal heart rate (6 marks)

SECTION C LAQs (40 marks)

1. Describe the foetal circulation (20 marks)
2. Describe the nursing care for a mother in first stage of labour (20 marks)