Reproductive Health Exam 2

SECTION I: MULTIPLE CHOICE QUESTIONS

1) In the development of a fertilized ovum,when a fluid filled cavity or blastocele appears in the morula,it becomes.
a) Inner cell mass
b) blastocyst
c) trophoblast
d) syncytiotrophoblst

2) Indicate True or False for the following statements:
i) Myometrium is thin in the upper part of the uterus and thicker in cervix.
ii) Bulbourethral gland produces lubricating fluid that passes in to the urethra below the prostate gland.

3) The aim of preconception care is:
a) To detect any abnormalities during pregnancy
b) To ensure the couple is in optimal state of health before conception
c) To teach mothers on breathing excercises before labor
d) To enhance bonding of the mother and the newborn

4) The anteroposterior diameter of the brim that is measured from the sacral promontory to the posterior border 1.25 cm lower is called;
a) Anatomical conjugate
b) The diagonal conjugate
c) The obstetrical conjugate
d) The gynaecological conjugate

5) The following is a probable signs of pregnancy
a) Amenorrhoea
b) Morning sickness
c) Presence of(HCG) in urine
d) Presence of foetal heart sound

6) In focused antenatal care [FANC], the pregnant woman makes ANC visits as follows:
a) <16 wks, 16-28 wks, 28-32 wks, 34-40 wks
b) >16 wks, 18-28 wks, 28-34 wks, 34-40 wks
c) 16 wks, 16-28 wks, 28-32 wks, 34-40 wks
d) >16 wks, 16-28 wks; 28-32 wks; 34-40 wks

7) A mother comes to labour ward complaining of lower abdominal pain. On assessment, the midwife discovers that contractions do not progress in intensity, frequency and no cervical dilatation. The midwife will document the findings as:
a) False labor
b) 1st stage of labor
c) Premonitory signs of labor

d) True labor

8) During examination of the placenta, the midwife observes that the cord is inserted into the membranes some distance from the edge of the placenta and the umbilical vessels run through the membranes from the cord to the placenta. This is termed as:
a) Circumvallete placenta.
b) Velamentous insetion of the cord.
c) Battledore insetion of the cord.
d) Bipartite placenta.

9) Engagement in a primigravida takes place between which gestation:-
a) 28-30 weeks
b) 30-32 weeks
c) 36-38 weeks
d) 38-40 weeks

10) According to focused antenatal care [FANC] repeat of VDRL and Hb antenatally should be between:
a) 32-34 weeks
b) 30-32 weeks
c) 28-30 weeks
d) 34-36 weeks

11) During uterine contractions there is:
a) Increased fetal heart rate, reduced uterine blood circulation.
b) Reduced uterine blood circulation, reduced fetal heart rate.
c) Increased uterine blood circulation, increased fetal heart rate.
d) Decreased fetal heart rate, increased uterine blood circulation.

12) The following are true about normal labor EXCEPT:
a) Begins spontaneously
b) Contractions reduce in frequency and intesity
c) Begins at term
d) Is accompanied by show

13) In examination of newborn reflexes, the midwife held the baby at an angle of 45 degrees with trunk and head supported from below then the head and shoulders were suddenly allowed to fall back.the reflex tested was;
a) Rooting reflex
b) Moro reflex
c) Sucking reflex
d)Gag reflex

14) Lateral abdominal palpation on a pregnant woman is done to:
a) Locate fetal pole to determine presentation.
b) Locate fetal back to determine position.
c) Ascertain the level of engagement
d) Rule out splenomegally in case of jaundice.
15) The predisposing causes of hyperemesis gravidarum include:

a) Endocrine imbalance and diminished motility of the stomach.
b) Vitamin B6 deficiency and anaemia.
c) Metabolic changes of pregnancy and electrolyte imbalance.
d) High levels of gonadotrophins and impaired electrolyte balance.

16) A higher blood volume is required in pregnancy to:
a) Maintain normal vascular peripherical resistance.
b) Increase flow to the liver for adequate metabolism
c) Counter balance effects of lowered osmotic pressure and immunity
d) Counter balance the effects of increased arterial and venous capacity.

17) Mechanical factors that facilitate progress of labour during first stage are:
a) General fluid pressure, fetal axis pressure.
b) Cervical dilation, fundal dominance
c) Polarity, cervical effacement
d) Fundal dominance, polarity

18) In Schultz mechanism during third stage of labour:
a) The placenta begins to separate from one of the lateral borders.
b) Blood from placental site escapes so that separation is unaided by a retroplacental clot.
c) The placenta descends, slipping sideways, maternal surface first at the vulva.
d) Placenta begins to separate centrally and a retroplacental clot is formed aiding the separation.

19) Indicate whether the following statements are TRUE or FALSE:
a) The placenta at birth weighs approximately 1/6 of the babies weight.
b) The normal heart rate of a newborn baby ranges between 130-170 beats per minute.

20) During the first 48 hours of puerperium
a) Cervix is soft and flabby
b) Uterus weighs approximately 600mg
c) Diameter of placental site measures 7.5cm
d) Uterine fundus is palpable 5cm above the umbilicus

SECTION II: SHORT ANSWER QUESTIONS 40 marks

1) Draw a diagram of fetal skull as observed from above showing landmarks of importance(.5marks)

2) State five physiological changes that occur in the reproductive system during pregnancy. [5 marks]

3) Explain four ways of preventing mother to child transmission of HIV. [8 marks]

4) Outline the active management of 3rd stage of labour. [3marks]

5) Explain 5 direct causes of maternal mortality (5marks)

6) Define the following obstetric terms:
a) Presentation [1 mark]
b) position [1 mark]

c) Normal labour [2 marks]

7) Explain three causes of the onset of labor [6 marks]

8) Explain any four health messages you can give to a postnatal mother . [4 marks]

SECTION III: LONG ANSWER QUESTIONS 40 marks

1) Zawadi has been in labour for 6 hours. She is experiencing contraction of moderate intensity every 4-5 minutes, lasting 20-30 seconds each, cervical dilation is 5-6cm, FHR 130-140 bpm.

a) Explain five physiological changes of 1st stage of labour. [10 marks]

b) Describe the immediate care given to the newborn at birth [10 marks]

2) Miss Jay Para 0+0 comes for her 1st antenatal visit at 24 weeks gestation.

a) Explain 5 goals of focused antenatal care. [5marks)

b) Describe the management of Miss Jay during her booking visit(first visit) [15 marks]