

**UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
FINAL EXAMINATION, QUESTION PAPER, MAY, 2013**

TITLE OF PAPER: NORMAL MIDWIFERY

COURSE CODE: MID 111

DURATION: TWO (2) HOURS

TOTAL MARKS: 75

- INSTRUCTIONS:**
- 1. THE PAPER CONSISTS OF THREE QUESTIONS**
 - 2. ANSWER ALL QUESTIONS**
 - 3. ALL QUESTIONS CARRY EQUAL MARKS**
 - 4. FIGURES IN BRACKETS INDICATE MARKS
ALLOCATED TO A QUESTION OR PART OF A
QUESTION**
 - 5. START EACH QUESTION ON A FRESH PAGE**

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(MID111) NORMAL MIDWIFERY 11

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QUESTION 1

Answer all questions: Choose the most appropriate Response e.g. 1.26 A

1.1. The following signs indicate the onset of true labour:-

- a) Rupture of membranes and show
- b) Regular rhythmic contractions accompanied by the presence of show
- c) Show and very painful uterine contractions
- d) None of the above

1.2 Normal labour occurs:-

- a) Between 37 and 42 weeks
- b) Occurs any time during pregnancy
- c) Occurs at term and is signaled by rupture of membranes
- d) All the above

1.3 The fetal skull can allow for moulding during labour because:-

- a) The bones are made of cartilage
- b) There is incomplete ossification of the skull bones
- c) The bones are membranous
- d) All the above

1.4 The duration of the third stage of labour is calculated from the time of the delivery of the:-

- a) baby up to the time the placenta is delivered
- b) placenta to the time haemorrhage is arrested
- c) baby to the time the placenta and membranes are delivered including achieving haemeostasis
- d) the baby to the time the placenta and membranes are completely delivered

1.5 The onset of the second stage of labour is confirmed :-

- a) when restitution of the head occurs
- b) when the midwife sees the presenting part on the perineum
- c) on vaginal examination and the cervix is fully dilated
- d) when the mother strongly feels like 'bearing down'

- 1.6 Pethidine as opposed to morphine is preferred in labour to relieve labour pain because
- a) It is stronger than morphine
 - b) Most women like it
 - c) Acts more quickly
 - d) Causes less respiratory depression in the fetus
- 1.7 Among other signs; labour is considered normal when the
- a) liquor usually has slight meconium
 - b) uterine contractions gradually increase in strength, duration and frequency
 - c) blood pressure is monitored because it can drop significantly
 - d) None of the above
- 1.8 The duration of the normal second stage of labour ideally should:-
- a) be decided by the midwife
 - b) be based on the policy of the health institution
 - c) be considered by the hospital management team
 - d) not last more than an hour
- 1.9 The following is true about syntometrine
- a) Syntometrine is called oxytocin in its synthetic form
 - b) Syntometrine can be used in the induction of labour
 - c) Midwives can prescribe syntometrine in the management of the third stage of labour
 - d) All the above
- 1.10 Fundal dominance during labour refers to the following.
- a) Contractions are more intense in the fundus
 - b) The early separation of the placenta from the fundus
 - c) Contractions are stronger because of the action of the oblique muscle fibres
 - d) All the above
- 1.11 The use of the partogram in managing labour is to monitor at a glance the:-
- a) maternal condition
 - b) fetal condition
 - c) progress of labour
 - d) All the above

- 1.12 On average; the duration of the latent phase of labour is considered to be,..
- 12-16 hours
 - 6-8 hours
 - 10-20 hours
 - Within 24 hours from onset up to delivery
- 1.13 The following is true about not rupturing membranes during labour.
- Allows for increased descent of the presenting part
 - Allows for normal progress of labour
 - Promotes adequate oxygen supply to the foetus
 - None of the above
- 1.14 When labour is considered normal; the following can be utilised to promote pain relief during labour.
- Deep breathing exercises
 - Presence of a companion in labour
 - Massaging the back of the woman during a contraction
 - All the above.
- 1.15 The following is true about indications of vaginal examination during labour.
- To confirm the onset of the second stage of labour
 - To rupture the membranes during labour when the client is living with HIV infection
 - To insert a scalp electrode to monitor foetal condition
 - All the above.
- 1.16 To deliver the shoulders safely during the second stage of labour; the following is considered.
- Restitution should occur
 - The shoulders should lie in the oblique diameter of the outlet
 - External rotation of the head and internal rotation of the shoulders should occur simultaneously
 - None of the above.
- 1.17 The placenta should ideally be delivered by controlled cord traction to:-
- Assist the mother with bearing down
 - To reduce the pain which the mother may experience
 - Reduce the chances of postpartum haemorrhage
 - All the above

1.18 The following signs lead the midwife to suspect that the placenta has separated.

- a) A small loss of blood per vagina
- b) The cord initially shortens then lengthens
- c) A gush of blood accompanied by lengthening of the cord
- d) All the above

1.19 Lochia refers to

- a) Bleeding which normally occurs soon after delivery of the baby
- b) Bleeding from the genital tract within 24 hours after delivery
- c) a & b
- d) Discharges from the uterus during the puerperium

1.20 The midwife should examine the placenta and membranes to exclude:-

- a) Retained products of conception
- b) Retained fetuses in case of multiple pregnancy
- c) Bleeding from perineal tears following childbirth
- d) A tear of the cervix

1.21 "3rd day blues" normally occur in a woman following childbirth and are usually attributed to:-

- a) Anxiety for the mother
- b) Fatigue following delivery
- c) Occasionally family stress
- d) All the above

1.22 The postnatal examination at six weeks assists the midwife to

- a) Assess the physical well being of the mother
- b) Assess the emotional well being of the mother
- c) Advise the mother about family planning and care of the baby
- d) All the above

1.23 Research indicates that early mother-infant relationship is vital to future mental health. The midwife can support this statement by

- a) Delivering the baby on the mothers abdomen
- b) Facilitating infant feeding within the first hour following delivery
- c) a & b
- d) None of the above

1.24 Soon after delivery of the placenta and membranes, the nurse midwife's first priority is to:-

- a) Have a quick check of the placenta and membranes for completeness
- b) Give the baby to the mother
- c) Inspect the perineum for lacerations
- d) Check the uterus is well contracted

1.25 Soon after delivery of the placenta, contraction of the uterus may be affected by:-

- a) The desire of the mother to wake up
- b) The desire of the mother to see the baby
- c) A retroverted uterus
- d) A full bladder

QUESTION 2

One of the roles of the midwife during the immediate puerperium is to prevent postpartum haemorrhage.

2.1 Discuss the active management of the third stage of labour. **(10 marks)**

2.2 Describe and give rationales for the observations the midwife will make when examining the placenta and membranes **(10 marks)**

2.3 Outline and give a rationale for the management of the woman within the first 24 hours following delivery. Consider any two (2) points **(5 marks)**.

QUESTION 3

The majority of pregnant women go through the process of normal labour and they experience pain varying from moderate to severe from uterine contractions. Society considers this to be a normal developmental process. Some of the pain becomes unbearable and midwives have been educated on various methods to relieve labour pain.

3.1 Describe how you as a midwife will determine that a woman is in labour. **(5 marks)**

3.2 Discuss how you as a midwife will assess the progress of normal labour. **(20 marks)**

END OF QUESTION PAPER