

UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
FINAL EXAMINATION PAPER: MAY, 2015

TITLE OF PAPER **EMERGENCY OBSTETRIC AND NEONATAL CARE**

COURSE CODE : **MWF 404**

DURATION : **TWO (2) HOURS**

TOTAL MARKS : **75**

INSTRUCTIONS:

- 1. ANSWER ALL QUESTIONS**
- 2. FIGURES IN BRACKETS INDICATE MARKS ALLOCATED TO EACH OR PART OF A QUESTION**
- 3. ANSWER EACH QUESTION ON A NEW PAGE**

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QUESTION 1

INSTRUCTION: SELECT A SINGLE CORRECT RESPONSE TO THE FOLLOWING QUESTIONS.

1.1 Which one of the following statements is a risk factor for protracted 2nd stage of labour?

- (a) Android pelvis
- (b) Maternal age
- (c) Previous history of obstructed labour
- (d) A& C are correct responses
- (e) All of the above responses are relevant responses

1.2 Which one among the following is a complication of a breech presentation?

- (a) Impacted breech
- (b) Stillbirth
- (c) Prolapsed umbilical cord
- (d) All of the above is relevant response

1.3 Which one of the following options should you include in your rapid assessment for a client who is diagnosed with prolonged labour?

- (a) Maternal and foetal vital signs
- (b) Colour of amniotic fluid
- (c) General condition, pain, dehydration, vaginal bleeding
- (d) Duration of labour

1.4 Which among the listed is a drug that prevents eclampsia?

- (a) Salbutamol
- (b) Pethidine
- (c) Nifedipen
- (d) Magnesium sulphate

1.5 Which one of the listed types of history should be a priority for a midwife caring for a woman who is diagnosed with eclampsia?

- (a) History of epilepsy
- (b) Pregnancy history
- (c) Drug history
- (d) Dietary history

- 1.6 You are a midwife in charge of a postpartum ward. A multigravida woman has just given birth following prolonged difficult labour, which among the listed potential problems may result to postpartum haemorrhage?
- (a) Coagulopathy
 - (b) Urinary tract infection
 - (c) Uterine trauma
 - (d) Pelvic infection
- 1.7 You are in charge of a labour ward and a woman who was walking down the passage has spontaneous rupture of membranes and a cord prolapse. Which one of the following is an appropriate intervention by a midwife?
- (a) Inform the client about the danger signs of cord prolapse
 - (b) Help client to adopt an exaggerated Sim's position
 - (c) Allow client to ambulate in order to augment labour
 - (d) Monitor maternal heart rate
- 1.8 Which among the following is the correct definition of postpartum haemorrhage?
- (a) Bleeding which occurs in the entire puerperal period
 - (b) Vaginal bleeding which occurs within the first week following childbirth
 - (c) Bleeding from the genital tract as a result of retained placenta
 - (d) Any vaginal bleeding which undermines maternal health during the puerperium
- 1.9 Which one among the following is the reason for urgent intervention once postpartum haemorrhage is diagnosed?
- (a) Post partum haemorrhage can re-occur in subsequent babies
 - (b) Post partum haemorrhage is not a common problem among Swazi women
 - (c) Post partum haemorrhage is a direct cause of maternal death
 - (d) Post partum haemorrhage occur once in a lifetime
- 1.10 Which one among the following is a direct cause of postpartum haemorrhage?
- (a) Atonicity of uterine muscle
 - (b) A full bladder
 - (c) A low haemoglobin
 - (d) Over-distention of the uterus
- 1.11 For which one among the listed conditions should a bed-side clotting test be performed ?
- (a) Suspected coagulopathy
 - (b) Diabetes
 - (c) Malaria
 - (d) Infection

1.12 A student midwife is conducting a digital vaginal examination to a woman in labour. She identifies the sagittal suture lying in the transverse diameter of the mid-pelvis. What is the possible cause of this situation?

- (a) Malpresentation
- (b) Deep transverse arrest
- (c) Face presentation
- (d) Brow presentation

1.13 What is the outcome of the condition identified in 1.12?

- (a) Labour will be obstructed at the outlet
- (b) Normal vaginal delivery is possible
- (c) Labour will be obstructed at the pelvic inlet
- (d) Labour will be obstructed at the mid-pelvis

1.14 Which among the listed conditions may report vaginal findings which indicates that a cervix was 'hanging like an empty sleeve' during labour

- (a) Prolonged labour
- (b) Premature labour
- (c) Obstructed labour
- (d) Precipitate labour

1.15 A student midwife is monitoring a puerperal client who is at risk of postpartum haemorrhage. Which one of the following interventions will she employ?

- (a) Administer oxytocic drugs every hour
- (b) Remain with the client until the uterine tone is restored
- (c) Massage the uterus every 15 minutes for the first 2 hours
- (d) Monitor blood loss every 12 hours until bleeding is controlled

1.16 Which one among the following is NOT a recommended 'best practices during labour'.

- (a) Allowing mothers to have a birth companion in the labour ward
- (b) Encourage ambulation during labour
- (c) Allowing women to have a light meal and drink during labour
- (d) Encouraging women to adopt a lateral position during childbirth

1.17 What should be included in the maternity policy in order to prevent infection while still upholding the recommended birthing practice which was identified in 1.16 above?

- (a) Allowing only one birth companion to support all women in labour
- (b) Ensuring that all birth companions are in a healthy state
- (c) Encouraging women to adopt a position of their choice during labour
- (d) Restricting ambulation

1.18 Which one of the following interventions should be practiced by midwives in order to prevent infection during delivery?

- (a) Use a common delivery tray for all mothers
- (b) Autoclave all equipment used and promote a clean delivery
- (c) Routine rupture of amniotic membranes to enhance progress of labour
- (d) None of the above is correct

1.19 Which among the following complications may occur following perineal suturing?

- (a) Oedema on the incision due to tight sutures
- (b) Pain and discomfort on the perineum
- (c) Haematoma formation
- (d) A&B are correct responses
- (e) All the responses are correct

1.20 Which among the following advices should be given to a woman whose perineum was sutured?

- (a) Use a condom when having sexual intercourse for the next seven days
- (b) Do not engage in sexual activity for the next four weeks
- (c) Keep the perineum clean and dry, change pad when using the toilet
- (d) Apply lotion on the perineum to enhance healing

1.21 Which one among the following conditions is a risk factor for uterine inversion?

- (a) Primigravid state
- (b) Grandmultiparity
- (c) Elderly women
- (d) Young women

1.22 Which one among the listed is an essential intervention when a woman presents with uterine inversion before the placenta is delivered?

- (a) Administer oxytocin to enhance delivery of the placenta
- (b) Deliver the placenta using active management of the third stage of labour
- (c) Replace the uterus to relieve discomfort
- (d) Lift the foot of the bed to relieve pain and call the doctor for advance management

1.23 Which one among the listed is an essential advice to give to a woman who is recovering from a Caesarian section?

- (a) Ambulate in order to promote blood circulation to the entire body
- (b) Remain in bed most of the time to enhance healing of the wound
- (c) Attend a gymnastic programme during the first two weeks of puerperium in order to restore muscle tone
- (d) Lift heavy weights in order to increase the tone of your abdominal muscles

1.24 Which among the following is the essential advice to give to a woman in the puerperium who has tested HIV positive?

- (a) Enrol in Life Long ART if eligible
- (b) Reveal your HIV status to a trusted person for emotional support
- (c) Make every effort to prevent mother to child transmission of HIV
- (d) All the above responses are correct

1.25 Maternal mortality is still high among Swazi women, which one among the listed is the current United Nations estimated mortality rate?

- (a) 550 per 100,000 live births
- (b) 410 per 100,000 live births
- (c) 320 per 100,000 live births
- (d) 250 per 100,000 live births