**KENYA MEDICAL TRAINING COLLEGE – NYAMIRA**

**SEPTEMBER 2013 KRCHN CLASS (PRE-SERVICE)**

**ABNORMAL MIDWIFERY CAT**

DATE: ……………….

**PART ONE: MCQS (MULTIPLE CHOICE QUESTIONS) MIDWIFERY – 18MARKS**

1. One of the following include predisposing factors to hydramnious.
   1. Oesophageal atresia, choanal atresia, open neural tube defects.
   2. Chonioangioma, prolonged pregnancy, rhesus Isoimmunisation.
   3. Multiple gestation, chorioangioma,oesophageal atresia
   4. Choanal atresia, renal agenesis, open neural tube defect.
2. A diagnosis of gestational diabetes is made when.
   1. Fasting blood sugar is less than 6.1 mmols/litre
   2. During a glucose tolerance test, blood sugar at 2 hours is more than 11 mmols/litre.
   3. During a glucose tolerance test, blood sugar at 2 hours is less than 11 mmols/litre
   4. Random blood sugar is less than 11 mmols/litre
3. Which degree of placenta praevia has substantial portion in the lower uterine segment with its edge at the margin of the internal os.
   1. Type 1
   2. Type 2
   3. Type 3
   4. Type 4
4. While attending an antenatal woman at 28 weeks gestation, the midwife finds that she has elevated blood pressure and proteinuria, what is the possible diagnosis.
   1. Pregnancy induced hyopertension
   2. Eclampsia
   3. Gestational hypertension
   4. Pre- eclampsia
5. One of the following factors cause jaundice by interfering with transportation of bilirubin.
   1. Reduced albumin binding capacity
   2. Hypoglycaemia
   3. Reduced gut motility
   4. Increased beta glucoronidase enzyme.
6. Which of the following include signs of uterine rupture.
   1. Severe abdominal pains, bandl’s ring, palpable fetal parts in the abdomen
   2. Strong uterine contractions, altered fetal heart rate, presentation regress.
   3. Caesation of contractions, presentation regress, fetal part palpable in the abdomen.
   4. Uterine apoplexy, presentation regress maternal collapse.
7. A woman develops 2nd degree uterine inversion, what are the possible findings.
   1. The body of the uterus is inverted into the internal OS.
   2. The fundus of the uterus reaches the external OS.
   3. The uterus, cervix and vagina are visible.
   4. The uterus inverts within 24 hours of delivery.
8. In face presentation, what are the presenting diameters.
   1. Mental vertical and Bi temporal.
   2. Mental vertical and Bi parietal
   3. Submental bregmatic and Bi parietal
   4. Submental bregmatic and Bi temporal
9. Which of the following includes management of preterm pre-labour rupture of membranes.
   1. If pregnancy is more than 34 weeks give tococytics.
   2. If pregnancy is more than 34 weeks give corticosteroids.
   3. If pregnancy is below 32 weeks and there are signs of infection give tocolytics
   4. If pregnancy is below 32 weeks give corticosteroids.
10. During routine blood tests, a pregnant woman is found to be Rhesus Negative, the subsequent care should include.
    1. Direct coombs test, administer anti D immunoglobulins, induce labour.
    2. Indirect coombs, fetal serum bilirubin, maternal blood transfusion.
    3. Screen for Rhesus antibodies give anti D immunoglobulin’s check baby’s blood group and rhesus factor.
    4. Monitor fetal serum bilirubin, check fetal blood group, monitor fetal haemoglobin.
11. Common factors aggravating cardiac failure in clients who have cardiac disease in pregnancy include:
    1. Anaemia, hypertension, multiple gestation, malaria.
    2. Singleton gestation, excessive rest, smoking ,anaemia.
    3. Multiple gestation, assisted vaginal delivery, anaemia, obesity.
    4. Obesity, smoking, malposition, emotional upset.
12. Which of the following include management of a pregnant woman with pyelonephritis .
    1. Urine for culture and sensitivity, oral antibiotics, intravenous fluids, antipyretics.
    2. Admission to hospital, urine for culture and sensitivity, parenteral antibiotics.
    3. Urine for culture and sensitivity, nurse as outpatient, intravenous antibiotics, antipyretics.
    4. Plenty of fluids ,oral antibiotics, antipyretics, nurse as outpatient.
13. A low birth weight baby is one:
    1. Born before 37 completed weeks.
    2. Whose weight at birth is below the 10th percentile for gestational age.
    3. Weight is appropriate for gestational age.
    4. Birth weight is below 2500gm regardless of gestation.
14. Which one of the following is not a predisposing factor to amniotic fluid embolism.
    1. Over stimulation of uterus with oxytocics.
    2. External cephalic version
    3. Spontaneous rupture of membrane
    4. Placenta abruptio
15. A preterm baby weighing 1.6kg is admitted into the new born unit and requires intravenous fluids how much intravenous fluid will the baby get on day one.
    1. 160 mls
    2. 128 mls
    3. 96 mls
    4. 16 mls
16. In right occipital posterior position the midwife will elicit.
    1. The sinciput is facing left illiopectineal eminence and the occiput facing right sacroiliac joint.
    2. The occiput is facing the right sacroiliac joint and sinciput is on left sacroiliac joint
    3. Occiput on right sacroiliac joint and the sinciput on right illiopectineal eminence.
    4. The occiput is facing the left sacroiliac joint and the sinciput on right illiopectineal eminence.
17. In assistance breech delivery, when the head is flexed which manoeuvre should the midwife apply to deliver the head.
    1. Loveset
    2. Mauriceau smellieveit
    3. Popliteal fossa press
    4. Burns marshall
18. One of the following includes management of tuberculosis and the newborn.
    1. If the woman has been on treatment for more than 2 months to her EDD and is smear negative, give the baby prophylaxis isoniazid.
    2. If the woman has active lung tuberculosis give the baby BCG.
    3. If the woman is smear negative and has been on treatment for more than 2 months to her EDD give the baby BCG.
    4. If the woman has been on treatment for less than two months to her EDD give the baby BCG.

**PART TWO: SHORT ANSWER QUESTIONS - MIDWIFERY – 42 MARKS**

1. In cord prolapse outline **FIVE (5)** methods of relieving pressure from the cord. 5 Marks
2. Outline **FIVE (5)** factors that increase production of bilirubin. 5 Marks
3. Outline **SIX (6)** intervention to prevent anaemia in pregnancy. 5 Marks
4. Outline **FOUR (4)** classification of cardiac disease in pregnancy. 4 Marks
5. Outline **FIVE (5)** ways of diagnosing occipito posterior position. 5 Marks
6. Outline **FIVE (5)** pathological changes that occur as a result of pre-eclampsia. 5 Marks
7. Draw a well labelled diagram of the chronic Villi. 5 Marks
8. Outline **FIVE (5)** Predisposing factors to uterine atony in post-partum

haemorrhage. 5 Marks

1. State two ways in which an infant born of a woman with tuberculosis can

acquire the infection. 2 Marks

Success