KENYATTA UNIVERSITY

UNIVERSITY EXAMINATIONS 2011/2012

SECOND SEMESTER EXAMINATION FOR THE DEGREE OF BACHELOR OF SCIENCE (NURSING AND PUBLIC HEALTH)

HNS 120 (N) : REPRODUCTIVE HEALTH AND SAFE MOTHERHOOD II

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DATE: FRIDAY 30TH MARCH 2012 **TIME: 2.00 P.M. - 4.00 P.M.**

INSTRUCTIONS

1. Answer ALL questions
2. Section A – MCQs – Tick the correct answer
3. Section B and C

   Answer in the booklet provided

   Each answer should start on a new page

PART A : MULTIPLE CHOICE QUESTIONS

1. The following minor complications of pregnancy are likely to develop into major complications
   a) Haemorrhoids, backache
   b) Morning sickness, PICA
   c) Backache, PICA
   d) Hemorrhoids, morning sickness

2. One of the following is true concerning cervical cerclage
   a) Carried out at 10 weeks gestation until 34 weeks gestation
   b) Carried out at 14 weeks gestation and remains in situ until 38 weeks gestation
   c) It does not matter at what gestational age it is done
   d) Usually inserted at the level of the external OS of the cervix.

3. One of the following is true regarding common disorders in pregnancy
   a) Haemorrhoids can become exacerbated in pregnancy and lead to obstruction
   b) Constipation in pregnancy can exacerbate haemorrhoids
   c) They can only disappear with surgery
   d) They are not as serious as varicose veins

4. Lie is said to be unstable if instead of remaining longitudinal it varies from longitudinal to oblique to transverse after:
   a) 32 weeks of gestation
   b) 35 weeks of gestation
   c) 36 weeks of gestation
   d) 37 weeks of gestation

5. Human placental lactogen is produced by:-
   a) Syncytio trophoblasts
   b) Chronic frondosum
   c) Trophoblasts
   d) Yolk sac

6. One of the following statements is true regarding dizziness and fainting in pregnancy
   a) It is as a result of the compression of the superior vena cava by the growing uterus
   b) It is a result of compression of the inferior vena cava by the growing uterus in a supine position
   c) It is as a result of compression of the abdominal Aorta when the woman is in the lateral side
   d) Hormonal changes are a contributing factor
7. Vernix cuseosa is important for:-
   a) Preventing the baby from friction
   b) Helping the fetus swim in the amniotic fluid
   c) Protecting the fetus from constant exposure of the amniotic fluid
   d) Protecting the fetus from infection

8. One of the following statements is true regarding meconium:-

a) Formed by the 20th week of fetal growth

b) Formed by the 10th week of fetal growth

c) Formed by the 15th week of fetal growth

d) Formed by the 19th week fetal growth

9. The reason why the fetal head faces the cervix in uterus:-

a) The fetus is more comfortable in the cervix

b) To protect it from pressure in the diaphragm

c) The head shifts downwards with amniotic fluid using gravity

d) The uterus is shaped like a pear

10. A single umbilical artery would be present in examination of the umbilical cord as a result of:-

a) It is a rare finding and is insignificant

b) It is a rate finding in singleton pregnancies

c) It is an indicator of an increased incidence of congenital anomalies of the fetus

d) It is equally common in newborns of diabetic and non diabetic mothers.

11. A succenturiate lobe of the placenta is seen implanted low on the interior wall of the uterus and a blood vessel is traversing the cervix connecting the two lobes. This will lead to one of the following risk factors:

a) Premature rapture of the membranes

b) Fetal exsanguination after rapture of the membranes

c) Torsion of the umbilical cord due to velamentous insertion of the umbilical cord

d) Amniotic fluid embolism

e) Placenta Accreta

12. One of the following is true when the placenta and uterine wall cannot be identified and this leads to retained placenta after delivery

a) Fenestrated placenta

b) Succesnturiate placenta

c) Vasa previa

d) Placenta previa

e) Placenta accreta

13. All of the following are danger signs in pregnancy EXCEPT:

a) Ruptured membranes

b) Bloody vaginal discharge

c) Decreased fetal movements

d) Varicose veins

14. The origin of the amniotic fluid is thought to be:-

a) Fetal urine from the 12^{th} week of pregnancy

b) The amniotic epithelium covering the fetal surface of the placenta and umbilical cord

c) From the fetal saliva from the 11^{th} week of pregnancy

d) The chromosomes at the 14^{th} week of pregnancy.

For question 15 and 16 , match each description with the correct type of abortion

15. Uterine bleeding at 12 weeks gestation accompanied by cervical dilation without passage of tissue.

16. Passage of some but not all placenta tissue through the cervix at 9 weeks gestation

a) Complete abortion

b) Incomplete abortion

c) Threatened abortion

d) Missed abortion

e) Inevitable abortion

17. Mrs. D comes to the clinic at 24 weeks gestation. Her L.M.P is 2.2. 2011. Calculate her expected date of delivery

a) 5.09.2011

b) 10.11.2011

c) 2.11.2011

d) 9.11.2011

e) 2.02.2012

18. One of the following is a presumptive sigh of pregnancy

a) Amennorrhoea

b) Abdominal enlargement

c) Softening of the cervix

d) Braxton Hicks contractions

19 During the development of the fertilized ovum, a cavity that joints in the cell mass called

a) Blastocyst

b) Morula

c) Trophoblast

d) Blastocele

20. The normal fetal Heart is:

a) 100 – 150 beats per minute

b) 130 – 180 beats per minutes

c) 120 – 170 beats per minute

d) 120 – 160 beats per minute

PART B. SAQ

1. Differentiate between amnion and chorion (5 marks)

2. Explain the specific management of hyperemesis gravidarum (6 marks)

3. a) State 3 types of placenta malfunctions (3 marks)

b) State 2 functions of the placenta (2 marks)

4. With the aid of a diagram, explain a placenta at term (6 mark)

5. Explain the changes in the cardio vascular system during pregnancy. (8 marks)

6. a) State 2 types of hydaticlform mole (2 marks)

b) Explain the signs and symptoms of hydatidform mole. (8 marks)

(**Total 40 marks)**

PART C - LAQ

1. Mrs Y comes to the antenatal clinic for follow up at 32 weeks gestation

   a) Describe focused antenatal care noting the requirements on every visit.

   (10 marks)

   b) Describe the health assessment of Mrs. Y form the chest to the pelvis.
   (10 marks)

2. Mrs Y comes to the clinic and you notice she is at 36 weeks gestation. She is not feeding well and is worried that she cannot breath comfortably at night.

   a) Describe the physiological changes that have taken place in the gastro-intestinal system (10 marks)

   b) Describe the physiological changes that take place in the respiratory system in pregnancy (10 marks)

(Total 40 marks)