

UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
MAIN EXAMINATION, QUESTION PAPER, MAY 2010

TITLE OF PAPER: NORMAL MIDWIFERY

COURSE CODE: MID 111

DURATION: TWO (2) Hours

TOTAL MARKS: 75

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

THIS PAPER SHOULD NOT BE OPENED UNTIL PERMISSION HAS BEEN GRANTED BY THE CHIEF INVIGILATOR

SPECIAL INSTRUCTIONS

COURSE: NORMAL MIDWIFERY 11

COURSE CODE: MID 111

DATE: MAY, 2010

MAIN EXAMINATION QUESTION PAPER

PROVIDE A COPY OF THE PARTOGRAPH FOR EACH STUDENT

QUESTION 1

Choose the most appropriate response e.g. 1.26 C. Each correct response carries one (1) mark. Total : 25 marks.

1.1 The following is true about “retraction” in labour.

- a) Results in the development of the thicker active contracting upper uterine segment
- b) The cervix dilates progressively
- c) The presenting part of the fetus is well applied to the cervix
- d) None of the above

1.2 Just prior to the onset of labour there is softening of the cervix as a result of

- a) The drop in the level of Progesterone
- b) The rise of oestrogen levels
- c) Both a and b
- d) Reduction in the amount of collagen due to an inflammatory response mainly caused by prostaglandins.

1.3 Abdominal examination during labour is carried out to

- a) Assess contractions
- b) Confirm the lie
- c) Identify the presentation
- d) All the above

1.4 The following is true about normal labour

- a) Locating the posterior fontanelle assists in determining the position
- b) The vertex will be presenting
- c) The anterior fontanelle is felt anteriorly
- d) a and b

1.5 The following measures can be used to assess fetal well being during labour

- a) Intermittent auscultation of fetal heart using a pinnard stethoscope
- b) External monitoring using a cardiotocograph
- c) Observing the colour of amniotic fluid when membranes rupture
- d) All the above.

1.6 The key principle(s) in the management of labour include

- a) Moderate pain relief
- b) Intravenous fluids should be administered to maintain hydration
- c) Provision of continuity of care and emotional support to the mother
- d) All the above

- 1.7 During normal delivery of the baby, the body of the fetus is delivered by
- Increased descent
 - Restitution
 - Both a and b
 - Lateral flexion
- 1.8 The following is true about the mechanism(s) that aid in placental separation
- Blood collects behind the placenta following constriction and rupture of blood vessels supplying the placenta
 - The retroplacental clot forms centrally
 - The placental site is reduced by the action of retraction
 - All the above
- 1.9 Following delivery of the baby and placenta bleeding is controlled by
- Strengthening uterine contractions
 - Clot formation which is increased and a fibrin mesh covers the placental area
 - a and b
 - Oxytocin which reduces the contraction and retraction of the myometrium
- 1.10 Key features of normal labour include
- Single cephalic presentation
 - 37- 42 weeks of gestation
 - No artificial interventions
 - All the above
- 1.11 The common causes of pain in the puerperium include
- Dysuria
 - Nipple pain
 - Uterine cramps
 - All the above
- 1.12 The following is noted on breast examination in the puerperium
- Tension
 - Consistency
 - Condition of nipple and areola in breast feeding mothers
 - All the above
- 1.13 Measures to prevent infection during labour include(s) the following;
- Use of sterile equipment and aseptic technique during vaginal examination (s)
 - Good personal hygiene by the midwife
 - Keeping bath tubs clean
 - All the above

- 1.14 Some of the factors which affect the women's perception to pain include
- Expectations
 - Fatigue
 - Fear and anxiety
 - All the above
- 1.15 The following is true about providing psychological support to a woman in labour except;
- Allowing the client to participate in planning for her care
 - Providing a homely atmosphere
 - Administering Pethidine when the woman is in pain
 - Orientation to the maternity unit
- 1.16 Immediate postnatal care involves the following except
- Counselling the client on danger signs
 - Examining the clients' breasts for engorgement
 - Excluding excessive postpartum bleeding
 - Checking for signs of thrombosis
- 1.17 Some of the maternal danger signs noted at postnatal clinics include
- Broken down episiotomy
 - Excessive vaginal bleeding
 - Foul smelling discharge
 - All the above
- 1.18 Tests routinely conducted at postnatal visits include
- Haemoglobin and HIV if status unknown (Provider initiated counseling to be done)
 - FBC and HIV if status unknown (Provider initiated counseling to be done)
 - Haemoglobin only
 - Haemoglobin and malarial parasites
- 1.19 The principles in psychophysical methods of pain relief include
- Encouraging relaxation
 - Distraction
 - Encourage a positive attitude
 - All the above
- 1.20 An episiotomy should always be performed
- When the presenting part is directly applied to the superficial muscles and the skin
 - When the levator ani muscles are displaced laterally
 - When a tear is impending
 - All the above

- 1.21 When the mother becomes ambulant for the first time in the puerperium, the amount of lochia
- a) Decreases significantly
 - b) Increases
 - c) Moderately decreases
 - d) None of the above
- 1.22 A bulky uterus in the puerperium may signify
- a) Presence of blood clots
 - b) Retained products of conception
 - c) Full rectum
 - d) All the above
- 1.23 Postpartum diuresis in the puerperium occurs within
- a) 48 hours
 - b) 72 hours
 - c) 24- 48 hours
 - d) 24-72 hours
- 1.24 Genital tract infection in the puerperium can be minimized through
- a) Early ambulation
 - b) Attention to the mother's personal hygiene
 - c) Preventing cross infection
 - d) All the above
- 1.25 Puerperal pyrexia usually occurs as a result of
- a) Breast infection
 - b) Genital tract infection
 - c) Urinary tract infection
 - d) All the above

Total 25 marks

QUESTION 2

Swaziland as a country in an effort to strengthen postnatal care has introduced the Postnatal Care Package.

- a) Outline the puerperium (1 mark).
- b) Identify and briefly describe the components of the Postnatal Care Package (24 marks). (Consider 3 points for the mother and three points for the baby for each component).

[Total 25 marks]

QUESTION 3

- a) Plot the following findings on the partograph provided.
Mrs X is Para O, Gravida 1. Mrs X reported in labour ward at 09.00 hours and the cervix was 3cms dilated head 4/5 palpable, no moulding, fetal heart rate 130 bpm. At 11.00 hours the cervix was 5cms dilated, membranes intact, head 3/5/ palpable, fetal heart rate 135 bpm, membranes intact. At 13.00 hours the cervix was 8cms dilated no moulding, head 2/5 palpable, and membranes ruptured and amniotic fluid clear, fetal heart rate 140bpm. At 15.00hours the cervix was 10 cms dilated, head 0/5 fetal heart rate 150 bpm amniotic fluid clear and no moulding.
(15 marks).
- b) Comment about the progress of labour and motivate your answer. (10 marks).

Total [25 marks]

END OF QUESTION PAPER

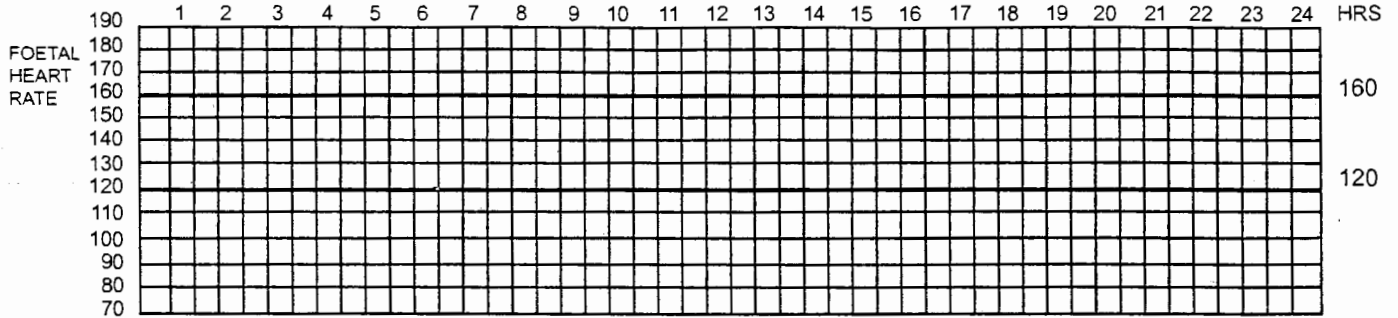
NAME AGE HOSPITAL No.

PARITY: ALIVE: SB/NND ABORTIONS EDD HEIGHT CMS

PELVIS ADEQUATE / BORDERLINE. RISK FACTORS:

REGULAR CONTRACTIONS STARTED AT: MEMBRANES RUPTURED AT

FETAL CONDITION

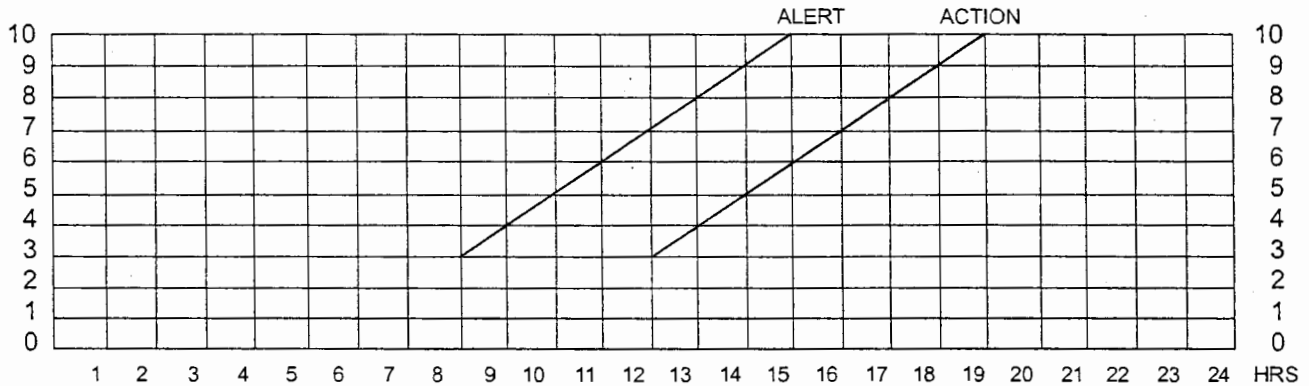


LIQUOR MOULDING																							
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PROGRESS OF LABOUR

C
E
R
V
I
X

DESCEND



TREATMENT

TIME

Contractions per 10 mins.

40 sec
40 sec
20 sec

5																							
4																							
3																							
2																							
1																							

DRUGS ORAL AND I.V. FLUIDS

OXYTOCIN Units/L.

220																										
210																										
200																										
190																										
180																										
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PULSE AND B.P.

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