

TITLE OF PAPER:	ABNORMAL MIDWIFERY 2
COURSE CODE:	MID120
SUPPLEMENTARY EXAMINATION:	JULY 2010
TIME:	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

SELECT THE MOST APPROPRIATE RESPONSE

1.1 A pregnant client who gives a history of having had one live birth, a perinatal death, a stillbirth and an abortion is classified as:

- (a) Para 4 gravida 5
- (b) Para 3 gravida 4
- (c) Para 3+1 gravida 5
- (d) Para 2+2 gravida 5

1.2 A client who has a normal body weight of 52kg becomes pregnant, at 25 weeks gestation she had gained a total of 3kg; she is regarded to be of:

- (a) Normal weight for the gestational age
- (b) Overweight by 2.5kg
- (c) Grossly obese for the gestational period
- (d) Underweight by 2.5Kg

1.3 A midwife is examining a gravida two (2) at 28 weeks gestation and finds that the size of the uterus is larger than the expected size, basing the findings from the last menstrual period. The following pregnancy conditions may be a possibility except for:

- (a) Multiple pregnancy
- (b) Abdominal pregnancy
- (c) Polyhydramnios
- (d) Large foetus

1.4 The outcome of a post mature pregnancy may be:

- (a) A delivery of a stillborn baby
- (b) A delivery of a preterm infant
- (c) A delivery of a malformed infant
- (d) Induction of labour

1.5 What is the rationale for the response mentioned in question 1.4

- (a) Cessation of optimal placental function may cause foetal demise.
- (b) A preterm baby may be delivered as the placenta may not function effectively
- (c) A malformed baby may be delivered due to inefficient hormonal support from the placenta.
- (d) Induction of labour may be the method of delivering a post-mature infant

1.6 In multiple pregnancy, if one foetus dies and is retained in utero, while pregnancy continues is called:

- (a) Carneous mole
- (b) Stillbirth
- (c) Intra-uterine death
- (d) Fetus papyraceous

1.7 Which support structure is widely separated in the case of a pendulous abdomen:

- (a) Uterine muscles
- (b) Rectus abdominus muscles
- (c) Pelvic muscles
- (d) Abdominal muscles

1.8 In folic acid deficiency anaemia the red blood cells are:

- (a) Normal in size
- (b) Microcytic
- (c) Megaloblastic
- (d) Sickle cell in shape

1.9 An elderly primigravida is generally regarded as an obstetric risk case, the reason is that:

- (a) Older women are less cooperative to younger midwives
- (b) The bones of the pelvis are less likely to move hence the give of the pelvis bone may not occur
- (c) Older women do not comply to health related practices
- (d) There is increased incidence of placental insufficiency among elderly primigravid clients.

1.10 An induction of labour is indicated to which one of the following conditions:

- (a) Rhesus iso-immunisation
- (b) Previous prolonged labour
- (c) Abnormal babies
- (d) Multiple pregnancy

1.11 Which pelvis may result to prolonged labour due to the narrow sub-pubic angle and prominent ischial spines:

- (a) Gynaecoid
- (b) Antropoid
- (c) Android
- (d) Justo-minor

1.12 A woman diagnosed with vomiting in pregnancy is advised to eat small frequent meals, the rationale for this advice is:

- (a) It is better to vomit small amounts, clients are less distressed
- (b) Dehydration is less evident when small amounts of vomiting occurs
- (c) Frequent meals are easily retained than large amounts
- (d) To maintain a normal blood sugar level as low blood sugar may cause vomiting

1.13 The main reason for requiring clients to recall the last normal menstrual period is to rule out:

- (a) Miscarriage which is common in the first month of pregnancy
- (b) Implantation bleeding
- (c) Missed abortion which can complicate pregnancy
- (d) Ectopic pregnancy

1.14 A diabetic client who is managed by insulin may need an adjustment of the insulin because of the ----- hormone which produces a resistance to insulin:

- (a) Human placental lactogen
- (b) Oestrogen
- (c) Progesterone
- (d) Prolactin

1.15 Risk cases for gestational diabetes are all the following except for:

- (a) Sedentary lifestyle
- (b) Apple shaped women
- (c) Athletes
- (d) Advancing age

1.16 The organism responsible for pyelonephritis is:

- (a) Clostridium welchii
- (b) Diplococci
- (c) Treponema pallidum
- (d) Escherichia coli

1.17 Most pregnant women taking anti-epileptic drugs develop anaemia because:

- (a) Anti epileptic drugs are contra-indicated in pregnancy
- (b) Anti epileptic drugs act as folic acid antagonists
- (c) Anti epileptic drugs are iron antagonists
- (d) Anti epileptic drugs are routinely given during pregnancy

1.18 The most accurate test for confirming placenta praevia is:

- (a) A speculum exam in order to visualise the placenta.
- (b) A placental monitor which identifies the localisation of the placenta.
- (c) A radio active device which locates the placenta
- (d) An ultrasonic scan which localises the placenta

- 1.19 The most critical stage for mother to child transmission of HIV infection is when :
- (a) Maternal CD4 count is high
 - (b) Maternal CD4 count is normal
 - (c) Maternal viral load is high
 - (d) Maternal viral load is low
- 1.20 HIV positive clients are encouraged to join support groups in order to:
- (a) Share experiences about the virus
 - (b) Prevent stigma
 - (c) Acquire necessary public support
 - (d) Share available resources
- 1.21 A pregnant client who is HIV positive is advised to wear a condom if she engages in sexual intercourse, the advantage of this practice is to:
- (a) Prevent further fertilisation that may occur
 - (b) Minimise the risk of other pregnancy related complications which the client is at risk of
 - (c) Prevent other sexually transmitted infections that may be introduced.
 - (d) Protect the foetus from harm
- 1.22 Women at risk of developing genital herpes simplex virus may benefit from the prophylactic treatment of----- given during the antenatal period:
- (a) Podophyllin
 - (b) Acyclovir
 - (c) Probenecid
 - (d) Penicillin
- 1.23 Psychological factors are one of the causes of abortion, this may be a result of:
- (a) Stress associated with early pregnancy
 - (b) Working outside home initiate the onset of uterine contractions
 - (c) Insufficient hormones to maintain pregnancy to term
 - (d) Alteration in the level of pituitary hormones affects uterine activity and may lead to abortion
- 1.24 A Shirodkar suture is usually inserted as a treatment for:
- (a) Cervical cerclage
 - (b) Rigid cervix
 - (c) Incompetent cervix
 - (d) Cervical dystocia

1.25 Epigastric pain associated with signs of impending eclampsia indicates:

- (a) Indigestion
- (b) Impairment of liver function
- (c) Gall bladder problem
- (d) Gastro intestinal infection

Question 2 (a)

Mrs Xaba reports to the antenatal department at about 32 weeks gestation for a regular check up. She is obese, of mature age and is not sure of her last menstrual period. As a midwife caring for Mrs Xaba you suspect that she is a candidate for gestational diabetes. Discuss in detail the obstetric history that Mrs Xaba will give in order for you to confirm the diagnosis; give a rationale for your responses.

15 marks

Question 2 (b)

A midwife working in a malaria-defined maternity centre is caring for a pregnant woman diagnosed with malaria. Describe the care that he/she shall render to the client; give a rationale for the care offered.

10 Marks

Question 3

Mrs Gumedze is 36 weeks pregnant, she complains of vaginal bleeding since last night. Her blood pressure is 150/100 and the doctor recommends that she should be admitted to hospital for close observation. Discuss in detail the care that should be rendered by a midwife to this client.

25 marks