

UNIVERSITY OF ESWATINI
FACULTY OF HEALTH SCIENCES
DEPARTMENT OF MIDWIFERY SCIENCE
FINAL EXAMINATION: MAY 2019

TITLE OF PAPER : NORMAL LABOUR AND INTRAPARTUM CARE
COURSE CODE : MID 409
DURATION : TWO (2) HOURS
TOTAL MARKS : 75

INSTRUCTIONS

1. ANSWER ALL QUESTIONS
2. FIGURES IN BRACKETS INDICATES MARKS ALLOCATED FOR EACH OR PART OF QUESTION
3. START EACH QUESTION ON A NEW PAPER
4. KINDLY USE BULLETS FOR EACH POINT IN YOUR ANSWER WHERE POSSIBLE
5. QUESTIONS **DO NOT** CARRY EQUAL MARKS

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

Question 1

Multiple choice question

Select the best answer from the following questions then write the letter that corresponds to the selected answer in your answer sheet. For an example: 1.30. B

1.1 Which of the following is **true** about Braxton Hicks contractions?

- A. They are the only true sign that labour has begun
- B. They become stronger as cervical dilatation progresses
- C. They prepare the cervix for labour
- D. They may be painful

1.2 Which of the following is true about normal spontaneous labour?

- A. It occurs from 37 weeks of gestation
- B. It occurs to any woman who had vaginal delivery
- C. It occurs in multiparous women only
- D. It occurs when a woman whose labour progresses well after induction of labour

1.3 Which of the following is true about the first stage of labour in a primigravida?

- A. Cervical dilatation occurs first and effacement follows
- B. Cervical dilatation and effacement occurs concurrently
- C. Cervical dilatation follows effacement of the cervix
- D. It is impossible for the cervix to efface

1.4 Which statement is true about the latent phase of first stage of labour in a multiparous woman?

- A. The cervix dilates at a rate of 1cm per hour
- B. It ends when the cervix is 4cm dilated
- C. It last for 10 hours in multiparous woman
- D. The cervix will be fully effaced at the end of the latent phase of labour.

1.5 Which of the following hormones has a relaxing effect on uterine muscles during pregnancy, there by inhibiting contractions?

- A. Prolactin
- B. Oxytocin
- C. Progesterone
- D. Oestrogen

1.6 Which of the following hormones stimulates prostaglandins production as pregnancy advances

- A. Oestrogen
- B. Progesterone
- C. Oxytocin
- D. Prolactin

1.7 How long does the third stage of labour last when managed passively?

- A. 5 to 15 minutes
- B. 10 to 25 minutes
- C. 20 to 35 minutes
- D. 45 to 60 minutes

1.8 Which of the following refers to fundal dominance?

- A. Contractions are more intense in the fundus
- B. The early separation of the placenta from the fundus
- C. Contractions are stronger because of the action of the oblique muscle fibres
- D. Contractions starts from the corpus and spread towards fundus

1.9 Which of the following hormones will fetal adrenal glands secrete to help stimulate onset of labour?

- A. Oxytocin
- B. Cortisol
- C. Prolactin
- D. Relaxin

1.10 Which part from the following will be leading in a normal cephalic presentation with increased flexion?

- A. Sagittal suture
- B. Biparietal diameter
- C. Suboccipitofrontal diameter
- D. Occiput

1.11 In a normal vertex presentation which diameter lies at the pelvic brim before labour starts?

- A. Sub-mentovertical diameter
- B. Sub - occipitobregmatic diameter
- C. Occipitofrontal diameter
- D. Sub-occipitofrontal diameter

1.12 What happen when the leading part during the mechanism of labour reaches the pelvic floor?

- A. It rotates 2/8 of a circle towards the symphysis pubis
- B. Rotates 1/8 of a circle towards the symphysis pubis
- C. It displaces the pelvic floor muscles
- D. It occupies the smallest diameter of the outlet

Nomsa a 23 years old primigravida reports in Mbabane Maternity unit at 0600 hours with history of uterine contractions accompanied by show since 0200hrs. On examination presentation cephalic, head 1/5 above pelvic brim. Contractions are 3 in ten minutes; fetal heart is 140 beats per minute. Her vital signs B/P 140/ 90 mmHg, T = 36.5 °c, Pulse 78bm Cervix fully effaced and 8cm dilated. Membranes intact. Use the above scenario to answer question 1.13 to 1.15.

- 1.13 In which phase of labour is Nomsa in?
- A. Latent phase of labour
 - B. Transition phase of labour
 - C. Second stage of labour
 - D. Resting phase of labour
- 1.14 Based on expected labour progress for primigravida, after how long is Nomsa likely to reach 3rd stage of labour?
- A. 2 hours
 - B. 3 hours
 - C. 4 hours
 - D. 5 hours
- 1.15 Which of the following prophylactic uterotonic drugs will you give to Nomsa during the third stage of labour?
- A. Syntocinon
 - B. Syntometrine
 - C. Ergometrine
 - D. Syntocinon, Syntometrine, Ergometrine
- 1.16 Which of the following statements is true about non pharmacological pain relief approach during labour?
- A. Pain is perceived as a side effect of abnormal process of labour
 - B. Its intention is to stop pain completely from the women
 - C. The midwife and other caregivers use it in order to assist the woman cope with labour pains
 - D. It is used in low resource countries where pharmacological pains are not affordable due to financial constrain.
- 1.17 Which of the following is a principle of non-pharmacological pain relieve approach?
- A. Reassurance
 - B. Guidance
 - C. Encouragement
 - D. All of the above
- 1.18 Which of the following women will you considered as high risk during labour
- A. A woman who is 15 years old primigravida
 - B. A woman who delivered a pre tern baby in her previous pregnancy
 - C. All women coming to the maternity clinic
 - D. Any woman who come to the labour room with false labour

- 1.19 In the labour room the midwife found that there was a lady who was admitted by the morning shift an hour ago in active stage of labour 6 cm dilated. What is the most appropriate initial care action by the midwife?
- A. Do fetomaternal condition monitoring including the vaginal examination to have baseline findings.
 - B. Perform maternal and fetal observations excluding vaginal exam
 - C. Do not disturb the woman as she has been examined an hour ago
 - D. Wait for 4 hours then assess the fetomaternal condition
- 1.20 What is the neuromuscular harmony that occurs between the upper and lower poles of the uterus called?
- A. Polarity
 - B. Retraction
 - C. Contractions
 - D. Pacemakers
- 1.21 Which of the following are factors that influence the onset of labour?
- A. Hormonal effect
 - B. Mechanical stimulation
 - C. Cervical irritation
 - D. All of the above
- 1.22 You were performing a vaginal examination on Mrs Zulu (G2P1) who is admitted in the maternity unit and discovered that her membranes have ruptured. Which observation would you make immediately?
- A. Check the fetal heart rate
 - B. Check her vital signs more especially her temperature
 - C. Assess the amount of the amniotic fluid
 - D. Confirm the presenting part to rule out cord prolapsed
- 1.23 Mrs Dladla (G3P2) is fully dilated but all of a sudden has no contractions and she feels sleepy instead of an urge to push. What is the most appropriate action that the midwife should take?
- A. Commence her on syntocinon in order to augment her labour and facilitate labour progress
 - B. Inform the doctor about the sudden change in the woman's labour progress and prepare her for possible caesarean session.
 - C. Wait and watch for normal labour progress while continuing with routine fetomaternal condition assessment
 - D. None of the above

1.24 In which phase of labour is Mrs Dladla in?

- A. Latent phase of first stage of labour
- B. Latent phase of second stage of labour
- C. Transition phase
- D. Active phase of second stage of labour

1.25 How will the midwife control bleeding from where the placenta has detached for Mrs Dladla?

- A. The midwife should pack the uterus with gauze to apply direct pressure into the placental site
- B. Massage the uterus and ensure that the uterus is well contracted
- C. Hydrate the woman at all times
- D. Encourage the woman to rest so that the uterus can contract well

[25 marks]

Question 2

Nomsa a 17 years old primiparous woman comes to Maternity Unit complaining of labour pains at 38 weeks of gestation.

2.1 How would you determine if Nomsa is having false labour or true labour (10)

2.2 Discuss how you will assess Nomsa's maternal condition throughout the first stage of labour. (10)

[20 marks]

Question 3

3.1 Describe the physiological changes that occur in the uterus during the first stage of labour under the following sub headings

- A. Polarity (5)
- B. Fundal dominance (5)
- C. Contraction and retraction (10)
- D. The upper and the lower uterine segment and retraction ring (10)

[30 marks]

Total = [75 marks]