

CHUKA



UNIVERSITY

UNIVERSITY EXAMINATIONS

**EXAMINATION FOR THE AWARD OF DEGREE OF BACHELOR OF SCIENCE IN
NURSING**

NURS: 182: MIDWIFERY II

STREAMS: Y1S2

DAY/DATE: THURSDAY 13/04/2023

TIME: 2 HOURS

2.30 P.M. – 4.30 P.M.

1. How much does the non-pregnant uterus weigh?
 - A. 10g
 - B. 50g
 - C. 80g
2. What is the lining of the uterus called during pregnancy?
 - A. Decidua
 - B. Endometrium
 - C. Basal
3. Which two terms describe the position of the uterus?
 - A. Anteverted & Antiflexed
 - B. Fully Flexed & Anteverted
 - C. Anteflexed & Fully Verted
4. The laboratory finding associated with HELLP syndrome is elevated;
 - a) Blood sugar
 - b) Platelet count
 - c) Creatinine clearance
 - d) Hepatic enzymes

5. What term describes the outer layer of the blastocyst in embryonic life form from which the placenta and chorionic membrane develop?
 - A. Trophoblast
 - B. Blastocyte
 - C. Sinuses
6. Which membrane lines the cavity of the uterus, developing from the trophoblast of the early embryo?
 - A. Chorion
 - B. Plasma
 - C. Amnion
7. Which stage of the menstrual cycle remains constant regardless of the regularity of a woman's cycle?
 - A. Menstruation
 - B. Proliferation/Follicular
 - C. Secretory/Luteal
8. Which type of fiber is the cervix made of?
 - A. Collagenous
 - B. Striated
 - C. Columnar
9. By how much does the body cells need for oxygen increase in pregnancy?
 - A. 20%
 - B. 30%
 - C. 40%
10. Amenorrhea is ...
 - A. Absence of monthly menstrual bleeding
 - B. Frequent urination
 - C. Softening of the cervix
11. Which hormone causes the maturation of an immature graafian follicle?
 - A. Oestrogen
 - B. FSH
 - C. LH

12. From where is amniotic fluid secreted?
- A. Chorion
 - B. Amnion
 - C. Placenta
13. A surge in which hormone causes ovulation?
- A. Oestrogen
 - B. FHS
 - C. LH
14. The production of oestrogen by the graafian follicle inhibits the production of which hormone?
- A. FSH
 - B. LH
 - C. Progesterone
15. Which of these facts regarding the vagina is false?
- A. It is 8-10cm long
 - B. It is described as a potential tube
 - C. It is joined to the ovaries
16. Which of the following urinary symptoms does the pregnant woman most frequently experience during the first trimester?
- A. Dysuria
 - B. Frequency
 - C. Incontinence
 - D. Burning
17. When talking with a pregnant client who is experiencing aching swollen, leg veins, the nurse would explain that this is most probably the result of which of the following?
- A. Thrombophlebitis
 - B. Pregnancy-induced hypertension
 - C. Pregnancy-induced hypertension

D. The force of gravity pulling down on the uterus

18. Cervical softening and uterine soufflé are classified as which of the following signs of pregnancy?

A. Diagnostic signs

B. Presumptive signs

C. Probable signs

D. Positive signs

20. Which of the following would the nurse identify as a presumptive sign of pregnancy?

A. Hegar sign

B. Nausea and vomiting

C. Skin pigmentation changes

D. Positive serum pregnancy test

21. The trophoblast of a blastocyst;

a. Is the inner cell mass

b. Is also referred to as the embryoblast

c. Forms the placenta and umbilical cord

d. Produces human chorionic gonadotrophin (Hcg)

23. Quickening;

a. Can occur as early as 16 weeks of gestation

b. Is a positive sign of pregnancy

c. Refers to the pulsation of fornices

d. Is caused by increased blood flow to the uterus

24. A client who is pregnant reports nausea and vomiting. The nurse reassures the client that these symptoms will subside by;

a. 5-8 weeks

b. 9-12 weeks

c. 14-17 weeks

d. 18-22 weeks

25. The four stages of an eclamptic fit in order of occurrence are:

- a. Premonitory, Tonic, clonic, coma
 - b. Premonitory, clonic, tonic, coma
 - c. Coma, clonic, tonic, premonitory
 - d. Clonic, tonic, premonitory, coma
26. In class III cardiac disease in pregnancy, patient has:
- a. No limitation of physical activity, heart murmur on general examination
 - b. Slight limitation of physical activity, no symptoms when at rest
 - c. Marked limitation of physical activity, slight exertion leads to fatigue, palpitations, dyspnoea
 - d. Inability to carry out any physical activity without discomfort, signs of cardiac disease and heart failure even at rest
27. Anaemia is defined as:
- a. A reduction in the oxygen carrying capacity of blood due to decrease in RBC production.
 - b. A reduction in the oxygen carrying capacity of blood relative to the RBC production.
 - c. A reduction in the oxygen carrying capacity of blood and decrease in RBC production.
 - d. A reduction in the oxygen carrying capacity of blood due to increase in plasma relative to RBC production.
28. The drug of choice in managing hypertension in pregnancy is;
- a. Propranolol
 - b. Methyldopa
 - c. Captopril
 - d. Enalapril
29. The preferred anticoagulant agent used in pregnant women with cardiac diseases is:
- a. Warfarin
 - b. Aspirin
 - c. Heparin
 - d. All of the above
30. High levels of glycosylated haemoglobin during pregnancy is associated with ;

- a. Hyperemesis gravidarum
 - b. Fetal malformations
 - c. Physiological anemia
 - d. Multiple pregnancy
31. Immediately after fertilization, the trophoblast develops into;
- a. Embryo and placenta
 - b. Chorion and placenta
 - c. Umbilical cord and amnion
 - d. Amnion and placenta
32. A woman presents at the ANC clinic at 16 weeks gestation with a history of one living child and 2 abortions. The midwife will interpret this as;
- a. Para 3+1 gravida 4
 - b. Para 1+3 gravida 4
 - c. Para 2+2 gravida 4
 - d. Para 1+ 2 gravida 4
33. Leucorrhoea which is observed in pregnancy is a result of;
- a. Marked desquamation of superficial epithelial cells
 - b. Increased vaginal vascularity
 - c. Interaction of epithelial cells with Doderleins bacillus
 - d. Increased vaginal elasticity
34. Diagnosis of gestational diabetes will be made after a glucose tolerance test results on 2 separate occasions indicate;
- a. Fasting blood sugar >5.9 mmol/L and random blood sugar >14.9mmol/L
 - b. Fasting blood sugar >3.9 mmol/L and random blood sugar >6.9 mmol/L
 - c. Fasting blood sugar >7.8mmol/L and random blood sugar >11.1 mmol/L
 - d. Fasting blood sugar and random blood sugar >10.9 mmol/L
35. A mother comes to the antenatal clinic at 36 weeks gestation with a history of a fresh stillbirth and an abortion. This will be interpreted as;
- a) Para 0+ 2 gravida 3
 - b) Para 3+ 0 Gravida 2

- c) Para 1+ 1 Gravida 3
 - d) Para 1+ 2 Gravida 3
36. Predisposing factors to polyhydramnios include;
- a) Multiparity, open neural tube defect, oesophageal atresia
 - b) Maternal diabetes, oesophageal atresia, multiple pregnancy
 - c) Eclampsia, anencephaly, chorioangioma
 - d) Anencephaly, placental abruption, oesophageal atresia
37. Cardiovascular changes noted in pregnancy include an increase in the following
- a) Plasma volume, haemoglobin, red cell mass
 - b) Total blood volume, red cell mass, hematocrit
 - c) Plasma volume, red cell mass, total blood volume
 - d) Hematocrit, plasma volume, total blood volume
38. One of the following statements is **True** regarding insulin needs during pregnancy;
- a) Insulin requirements moderate as the pregnancy progresses
 - b) A reduced need for insulin occurs during the second trimester
 - c) Elevation of human chorionic gonadotrophin decreases the need for insulin
 - d) Foetal development depends on adequate insulin regulation
39. The temporary structure of foetal circulation that connects the umbilical vein to the inferior vena cava is the;
- a) Hypogastric artery
 - b) Foramen ovale
 - c) Ductus venosus
 - d) Ductus arteriosus
40. A pre-eclamptic patient is admitted to the antenatal ward and started on magnesium sulphate regimen. The intervention that shows that the midwife is aware of magnesium sulphate toxicity is;
- a) Perform a vaginal exam every 30 minutes
 - b) Placing a padded blade at the bedside
 - c) Inserting a foley catheter
 - d) Darkening the room

41. During antenatal assessment, the midwife notes a small lesion on the perineum that is painful on touch. The most likely cause is
- a) Syphilis
 - b) Herpes
 - c) Gonorrhoea
 - d) Condylomata
42. Conception is most likely to occur when;
- a) Estrogen levels are low
 - b) Lutenising hormone is high
 - c) Endometrial lining is thin
 - d) Progesterone level is low
43. Spermatogenesis occurs in the;
- a) Corpus spongiosum
 - b) Prostate gland
 - c) Seminiferous tubules
 - d) Scrotum
44. The success of the calendar rhythm method depends on ;
- a) Age of the client
 - b) Frequency of intercourse
 - c) Regularity of menses
 - d) Range of clients temperature
45. A client with hyperemesis gravidarum is at risk of developing;
- a) Respiratory alkalosis without dehydration
 - b) Metabolic acidosis with dehydration
 - c) Respiratory acidosis without dehydration
 - d) Metabolic alkalosis with dehydration
46. Indicate whether the following statements are **TRUE** or **FALSE**
- a) Dizygotic twins have two amnions
 - b) In a singleton pregnancy, the fundus reaches the xiphisternum at 40 weeks
47. During pregnancy, relaxin hormone;

- a. Stimulates production of cervical mucus, enhances breast enlargement and reduces oxytocin release
 - b. Relaxes ligaments, inhibits release of follicle stimulating hormone and prevents secretion of prolactin
 - c. Relaxes the pelvic girdle, softens the cervix and suppresses uterine contractions
 - d. Reduces production of oxytocin, softens the cervix and inhibits the production of lutenising hormone
48. The correct regimen for administering magnesium sulphate loading dose intramuscularly is;
- a. 5 g given as a divided dose in each of the buttocks over a period of 10-15 minutes
 - b. 10 g as a divided dose in each of the buttock over a period not less than 5 minutes
 - c. 4g as divided dose in each buttock over a period of not less than 5 minutes
 - d. 5g over a period of between 10-15 minutes
49. The aim of performing abdominal examination during pregnancy is to;
- a. Assess mothers health status
 - b. Exclude pseudo-pregnancy
 - c. Assess fetal size and growth
 - d. Prepare for delivery
50. The layer of the uterine wall shed during menstruation is the,
- a. Perimetrium
 - b. Functional endometrium
 - c. Myometrium
 - d. Basal endometrium
51. The layer of the uterus that is functional during preganancy and labour is;
- a. Endometrium
 - b. Myometrium
 - c. Peritoneum
 - d. Peri-metrium
52. Factors that faciliatate the occurrence of lightening include,

- a. Parity of the mother, presentation
 - b. Good uterine tone, formation of lower uterine segment
 - c. Braxton hicks contractions, softening of pelvic floor tissues
 - d. Prostaglandin release, parity of the mother
53. The effect of oestrogen on the uterus during pregnancy is ,
- a. Contraction of the uterine smooth muscles
 - b. Increase in the uterine blood supply
 - c. Growth of the uterine smooth muscles
 - d. Relaxation of the uterine muscles
54. The layer of the blastocyst that erodes the walls of the blood vessels of the decidua is the:
- a) Mesoderm
 - b) Cytotrophoblast
 - c) Mesoderm
 - d) Ectoderm
56. Probable signs of pregnancy include;
- a) Amenorrhoea, pregnancy test positive, frequency of micturition
 - b) Ballottement of the fetus, Braxton hicks contractions, positive pregnancy sign
 - c) Amenorrhoea, breast changes, quickening
 - d) Foetal heart tones, visualization of the foetus, foetal parts palpated
57. Hegars sign is a probable sign of pregnancy characterised by
- a) Softening of the cervix
 - b) Periodic uterine tightening
 - c) Colour change of the vagina from pink to violet
 - d) Softening of the lower uterine segment
58. The phases of the ovarian cycle are;
- a. menstrual, follicular and luteal
 - b. Menstrual, proliferative and secretory
 - c. Follicular, luteal and proliferative
 - d. Secretory, luteal and follicular

59. Indicate whether the following statements are **TRUE** or **FALSE**.
- a) Streptomycin causes deafness to the unborn baby
 - b) Pregnant women infected with HIV Virus should receive three doses of SP drugs during pregnancy
60. The function of the seminiferous tubules is to;
- a. Store sperm
 - b. Produce sperm
 - c. Secrete seminal fluid
 - d. Transport semen
61. Monochorionic twinning is always characterized by the following;
- a. One placenta, one chorion
 - b. One placenta, one amnion
 - c. One chorion, one amnion
 - d. Two amnions, two chorions
62. Events of foetal development that happen during 8-12 weeks weeks gestation include;
- a. Fetal heart heard on auscultation, vernix caseosa appears
 - b. Lanugo appears, swallowing begins
 - c. Fetus responds to sound, eyelids close
 - d. Finger nails can be seen, gender determined
63. Leg cramps experienced by women during third trimester is usually due to;
- a. Increased serum ionized phosphates and decreased levels of sodium chloride
 - b. Lowered serum ionized iron and increased level of phosphates
 - c. Increased serum ionized calcium and decreased levels of phosphates
 - d. Lowered serum ionized calcium and increased level of phosphates
64. The effect of oestrogen on the uterus during pregnancy is ;
- a. Contraction of the uterine smooth muscles
 - b. Increase in the uterine blood supply
 - c. Growth of the uterine smooth muscles
 - d. Relaxation of the uterine muscles
65. Corpus luteum secretes;

- a. Follicle stimulating hormone and oestrogen
 - b. Oestrogen and progesterone
 - c. Luteinising hormone and estradiol
 - d. Estradiol and progesterone
66. The hormones that facilitate the mobility of pelvic joints during pregnancy and labour are;
- a. Relaxin and oestrogen
 - b. Relaxin and progesterone
 - c. Oxytocin and progesterone
 - d. Oestrogen and progesterone
67. Signs of impending eclampsia include;
- a. Vomiting, convulsions, nausea
 - b. Oedema, proteinuria, hypertension
 - c. Blurred vision, epigastric pain, severe frontal headache
 - d. Hypertension, blurred vision, coma
68. A patient is in last trimester of pregnancy. The nurse should instruct her to notify her health care provider immediately if she notices:
- a. Blurred vision
 - b. Hemorrhoids
 - c. Increased vaginal mucus
 - d. Shortness of breath on exertion
69. Areas of concern in individual birth plan during ante-natal care include:-
- a. Danger signs in pregnancy, identifying a birth partner during delivery diet
 - b. Identifying true and false signs of labour, ensuring availability of funds for emergency, use of drugs
 - c. Planning for transport, knowing when the baby is due, rest and exercise
 - d. Identifying danger signs in pregnancy, identifying a birth attendant, knowing when the baby is due.
70. Diabetogenic hormones in pregnancy include;
- a) Cortisol, oestrogen

- b) Progesterone, prolactin
 - c) Oxytocin, human placental lactogen
 - d) Human placental lactogen, cortisol
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