



**AMREF INTERNATIONAL UNIVERSITY**

**UNIVERSITY EXAMINATIONS**

**HIGHER DIPLOMA IN COMPREHENSIVE REPRODUCTIVE HEALTH**

**APRIL 2022 EXAMINATIONS**

**School of Medical Sciences**

**Department of Nursing and Midwifery Sciences**

**Course Unit: HDRH 134: Certification Examination Paper 2**

**Date: 12th April, 2022**

**Time: 2 hours 9:00am-11:00 am**

**Instructions**

- 1) This paper has three sections: Section A, Section B and Section C
- 2) Answer **ALL** questions in Section A and Section B and C
- 3) Use the University examination booklets provided
- 4) Re-writing the questions on your answer sheet is unnecessary

## **SECTION A: MULTIPLE CHOICE QUESTIONS (MCQs) (20 MARKS)**

1. Larger than expected fundal height may be due to;
  - a. Intrauterine growth restriction, polyhydramniotic
  - b. Maternal obesity, multiple pregnancy
  - c. Polyhydramniotic, multiple pregnancy
  - d. Large fetus, oblique lie
  
2. Constipation experienced by pregnant women is mainly due to;
  - a. Relaxed sphincter and upward displacement of the diaphragm.
  - b. The craving of certain food substances that may lack roughage.
  - c. Relaxation and decreased peristalsis in the gut.
  - d. Inadequate consumption of food associated with nausea and vomiting (morning sickness).
  
3. Placenta abruption is characterized by;
  - a. scanty or heavy bright red coloured painless bleeding, foetal heart sounds are usually absent
  - b. a high presenting part, soft and relaxed uterus with non-tender abdomen
  - c. Visible bleeding of dark red blood or concealed, pain and tenderness on the abdomen may or may not be present.
  - d. A high presenting part, visible bleeding of dark red blood
  
4. Early signs of uterine rupture in a client with a previous scar include;
  - a. Tenderness over the scar line in late pregnancy, fresh bleeding easily mistaken for show and features of obstructed labour.
  - b. Tenderness over the scar line in late pregnancy, fresh bleeding easily mistaken for show and severe pain and shock.
  - c. Sudden abdominal pain, irregular foetal heart rate, foetal parts easily visible
  - d. Tenderness over the scar line in late pregnancy, fresh bleeding easily mistaken for show, foetal parts easily visible
  
5. Complete abortion presents with;
  - a. Dilated cervix, severe bleeding
  - b. Closed cervix, Strong uterine contractions
  - c. Dilated cervix, products of conception at cervical os
  - d. Cervix closed, minimal pain
  
6. Pre-requisites for vacuum extraction include;
  - a. Face presentation, cervical dilatation of 10 cm
  - b. Cephalic presentation, descent 2/5
  - c. Cervical dilatation of 7 cm, descent 1/5

d. Empty bladder, cervical dilatation of 10 cm

7. Indications for an empty uterus during manual vacuum aspiration procedure include;

- a. Relaxed uterus, pink foam
- b. Tight grip on cannula, passage of clots
- c. Relaxed uterus, bleeding
- d. Pink foam, tight grip on cannula

8. A woman who is in second stage of labour is encouraged to push when:-

- a. The cervical os is fully dilated.
- b. The fetal head becomes visible.
- c. She feels the urge to push
- d. The anus dilates and gapes.

9. In the management of shoulder dystocia, the manoeuvre that involves helping the woman to lie flat and bring her knees up to her chest as far as possible is known as:-

- a. Rubin's maneuver
- b. Woods maneuver
- c. Zavanelli maneuver
- d. McRoberts maneuver

10. The type of breech where the baby presents with the hips flexed and the legs extended is called;

- a. Frank breech
- b. Complete breech
- c. Footling breech
- d. Knee presentation

11. The likely diagnosis for a patient with persistent yellowish-white vaginal discharge with a fish like odour;;

- a. Bacterial Vaginosis
- b. Chlamydia
- c. Gonorrhoea
- d. Trichomoniasis

12. The mode that carries the greatest risk for HIV transmission is;

- a. Sexual intercourse
- b. Mother to child transmission
- c. Blood transfusion
- d. Injecting drug use

13. The physiological alteration that places the preterm infant at increased risk of drug's toxicity is;
- Lack of cutaneous fat deposits
  - Immature central nervous system
  - Presence of foetal haemoglobin
  - Immaturity of renal system
14. The prophylactic dosage for Vitamin K to new-borns is;
- 0.1mg for term baby and 0.5 mg for preterm baby
  - 0.5 mg for term baby and 0.01 mg for preterm baby
  - 1 mg for term baby and 0.5 mg for preterm baby
  - 0.5 mg for term baby and 1 mg for preterm baby
15. When a newborn baby is placed on a cold surface, heat loss occurs through the process of;
- Radiation
  - Evaporation
  - Conduction
  - convection
16. Signs of good attachment during breastfeeding includes:-
- More areola visible below the baby's mouth
  - Upper lip turned outwards
  - Baby's face touching the breast
  - Baby's chin touching the breast
17. The stimuli for spontaneous respirations for neonates at birth is:-
- Exposure to warm external environment
  - Stimulation by rubbing the baby at the back
  - Mild hypercapnia and hypoxia
  - Metabolic alkalosis
18. Indicate if the following statements are true or false in the answer sheet provided
- Neonates on replacement feeding should be given vitamin A 50,000 units at birth
  - Hospitalized neonates should not be immunized till after discharge from the hospital
19. While ventilating a newborn with bag and mask, the mask should cover:-
- Mouth, chin and nostrils
  - Chin, face and mouth
  - Face, mouth and nose
  - Nose, mouth and eyes

20. For a mother who opts for alternative (formula) feeding, she should start feeding her term new-born with:-

- a. 60ml/kg body weight per day
- b. 80ml/kg body weight per day
- c. 75ml/kg body weight per day
- d. 100ml/kg body weight per day

**PART B: SHORT ANSWER QUESTIONS (30 MARKS)**

1. State five (5) functions of amniotic fluid (5 marks)
2. State five (5) danger signs during pregnancy (5 marks)
3. Explain three (3) levels of Family Planning/HIV integration (6 marks)
4. State five (5) health challenges neonates face due to prematurity (5 marks)
5. Outline five (5) ways of preventing infections in a special care baby unit (5 marks)
6. Regarding HIV diagnosis;
  - a. Outline the HIV testing and counselling package (3 marks)
  - b. List the laboratory test kits used in HIV Testing and Counselling (1 mark)

**SECTION C: LONG ANSWER QUESTION (20 MARKS)**

1. Ms. B para 5+0 develops postpartum haemorrhage 3 hours after birth.
  - a. Outline the classification of postpartum haemorrhage (2 marks)
  - b. State three (3) changes that occur to the myometrium during pregnancy (3 marks)
  - c. Describe the management of Ms. B until the condition is under control (12 marks)
  - d. Identify three (3) reasons why oxytocin is a preferred uterotonic drug (3 marks)