UNIVERSITY OF SWAZILAND
FACULTY OF HEALTH SCIENCES
FINAL EXAMINATION PAPER: MAY, 2016

TITLE OF PAPER:  EMERGENCY OBSTETRIC AND NEONATAL CARE
COURSE CODE:  MWF 404
DURATION:  TWO (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 a single appropriate response from the options provided.

You are a midwife working in a rural clinic; you admit a woman who is probably pregnant and lying helpless in the back of the van. Question 1-8 relates to this scenario.

1.1 Which one of the following assessments will inform the midwife about the general condition of the woman before she is transported to the ward?

(a) Blood pressure
(b) Ultrasound scan
(c) Rapid assessment
(d) Vital signs

1.2 The woman has not missed any period but she is pale, no bleeding from the genital track but she is restless. Which is the probable diagnosis for this client?

(a) Threatened abortion
(b) Missed abortion
(c) Hydatidiform mole
(d) Ectopic pregnancy

1.3 If the woman is 34 weeks pregnant and there is no vaginal bleeding, but she is pale, restless and in shock. What is the probable diagnosis for this client?

(a) Placenta praevia
(b) Placenta abruptio
(c) Placenta velamentous
(d) Placenta accreta

1.4 Which one among the following conditions is associated with uterine apoplexy?

(a) Placenta praevia
(b) Placenta percreta
(c) Placenta abruptio
(d) Placenta accreta

1.5 If a woman was bleeding from the genital track at 37 weeks of gestation and the bleeding was not associated with trauma; what is the probable diagnosis?

(a) Placenta praevia
(b) Placental haemorrhage
(c) Placenta abruptio
(d) None of the above is a correct response
1.6 Which one among the listed conditions/situation is a direct cause for postpartum haemorrhage among women in health care facilities in Swaziland?

(a) Full bladder
(b) Atonic uterus
(c) Adherent placenta
(d) Placenta velamentous

1.7 Which among the listed conditions is a direct cause of puerperal sepsis among women in Swaziland?

(a) Blood group O is associated with infection
(b) Poor use of postnatal services
(c) Grandmultiparity
(d) Retained products of conception

1.8 If a midwife is preventing shock resulting from postpartum haemorrhage, which one of the following is a critical intervention to save the woman’s life?

(a) Administer pain medication
(b) Apply bimanual compression of the uterus
(c) Administer oxytocic agents during the delivery of the anterior shoulder
(d) Infuse blood transfusion

1.9 Which one among the listed situations result to delay in accessing maternal health services among women in Swaziland?

(a) Delay in making a decision to attend health care services
(b) Delay in reaching maternal health services
(c) Delay in accessing quality care
(d) All of the above are correct responses

1.10 Identify one condition/situation which may result to obstetric shock from the list provided:

(a) Complete abortion
(b) Air embolism
(c) Infection
(d) B & C are correct responses
(e) None of the above is a correct response
1.11 Which one among the following danger signs would cause a midwife to omit the administration of Magnesium Sulphate to a woman diagnosed with pregnancy induced hypertension?

(a) Urine output of 30 MI per hour  
(b) Respiratory rate of less than 16 breaths per minute  
(c) Blood pressure of 180/110  
(d) Pre-tibia oedema

1.12 Identify one among the listed obstetric conditions, that is a complication of severe pregnancy-induced hypertension

(a) Abdominal pain  
(b) Anaemia  
(c) Fever  
(d) Placenta praevia

1.13 Which one among the listed drugs is effective in reducing the blood pressure

(a) Diazepam  
(b) Hydralazine  
(c) Magnesium sulphate  
(d) Both B and C are correct responses

1.14 One of the recommended drugs for controlling an eclamptic fit is:

(a) Nifedipine  
(b) Phenobarbitone  
(c) Hydralazine  
(d) Magnesium sulphate

1.15 A Braddie’s ring may be diagnosed in which one of the following conditions/situations

(a) Disordered uterine contractions  
(b) Obstructed labour  
(c) Precipitate labour  
(d) Transverse lie

1.16 Which definition among the listed describes shoulder dystocia?

(a) Failure of the shoulders to transverse after delivery of the head  
(b) Impacted shoulders  
(c) Shoulders that are too large to be delivered  
(d) None of the definitions is correct.
1.17 Identify the recommended technique that should be used by midwives to relieve shoulder dystocia.

(a) Woods manoeuvre
(b) Rubin manoeuvre
(c) Mc Robert’s manoeuvre
(d) Zavaneli manoeuvre

1.18 Which one among the following is a serious sign for severe pre-eclampsia?

(a) Blood pressure of 130/90
(b) Albuminuria +++
(c) Ankle oedema
(d) All of the above signs

1.19 Which one among the listed is the main indirect cause of maternal mortality among Swazi women, as stated by the Ministry of Health Confidential Enquiry into maternal death report (2014)?

(a) Postpartum haemorrhage
(b) Grand-multiparity
(c) Poor use of family planning practices
(d) HIV infection

1.20 Shock and sudden onset of lower abdominal pain soon after childbirth is associated with which one of the following conditions?

(a) Postpartum haemorrhage
(b) Obstructed labour
(c) Acute inversion of the uterus
(d) Sudden relief of an over-distended uterus

1.21 One of the causes of neonatal mortality among neonates in Swaziland is:

(a) Post maturaity
(b) Asphyxia neonatorum
(c) Respiratory distress syndrome
(d) Cord infection

1.21 Babyolly is severely asphyxiated, which one among the following signs will she display?

(a) Muscle tone poor, respiratory effort poor, heart rate 100bpm, reflex grimace, colour central cyanosis
(b) Muscle placid, colour pale, heart rate 99bpm, no reflex response, no respiratory effort
(c) No muscle tone, colour pale, no respiratory effort, no heart rate, no reflex response
(d) Muscle tone poor, colour blue, respiratory effort minimal, heart rate 101bpm, grimace
1.23 Which one among the listed assessment method is used to evaluate the neonates’ condition at birth?
(a) Bishop score
(b) Durpoise scale
(c) Apgar score
(d) None of the above is a correct response

1.24 When a neonate is having a convulsion, which among the listed drugs is the essential drug to administer?
(a) Phenergan
(b) Diazepam
(c) Dextrose 10 %
(d) Cortisone

1.25 Which one among the listed is a danger sign for neonates which mothers should be aware of?
(a) Mental confusion
(b) Convulsion
(c) Physiologic jaundice
(d) All of the above
QUESTION 2

Mrs Guliwe is a 16 year old primigravida at 30 weeks gestation, who comes at Siphofaneni clinic for the initial antenatal care services. Her body weight is 90 Kg and her mother was diagnosed pre-eclampsia in her first pregnancy.

(a) Discuss predisposing factors to pre-eclampsia from the scenario presented (10 Marks)
(b) What is the emergency management of an eclamptic convulsion (15 marks)

TOTAL MARKS 25

QUESTION 3

A woman who gave birth at home i week ago is reporting to a rural clinic with a history of profuse bleeding from the genital track.

(a) What is the diagnosis for this client? (1 mark)
(b) What are the causes of the condition mentioned in A (9 marks)
(c) Discuss how you as a midwife will manage this client before referral to a high level maternity unit (15 marks)

TOTAL MARKS 25