### 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

THIS PAPER SHOULD <u>NOT</u> BE OPENED UNTIL PERMISSION IS GRANTED BY THE INVIGILATOR

# **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 abruption
  - (c) Placenta velamentous
  - (d) Placenta accrete
- 1.4 Which one among the following conditions is associated with uterine apoplexy?
  - (a) Placenta praevia
  - (b) Placenta percreta
  - (c) Placenta abruption
  - (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 abruption
  - (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 anterio 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 Ml 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) Nifedipan
  - (b) Phenobarbitone
  - (c) Hydrallazine
  - (d) Magnesium sulphate
- 1.15 A Bandls' 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) Zavanelli 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 dearth 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 maturity
  - (b) Asphyxia neonatorum
  - (c) Respiratory distress syndrome
  - (d) Cord infection
- 1.21Baby Dolly 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) Durboice scale
  - (c) Apgar score
  - (d) None of the above is a correct response
- 1.24When 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 1 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**