

**UNIVERSITY OF SWAZILAND**  
**FACULTY OF HEALTH SCIENCES**  
**DEPARTMENT OF MIDWIFERY SCIENCE**

**FINAL EXAMINATION: MAY 2016**

**COURSE TITLE: POSTPARTUM WITH COMPLICATIONS**

**COURSE CODE: MWF 406**

**TIME ALLOCATED: 2 HOURS**

**MARKS ALLOCATED: 75**

**INSTRUCTIONS:**

- 1. PLEASE ANSWER ALL QUESTIONS**
- 2. USE THE PROVIDED ANSWER BOOKLET FOR ALL YOUR ANSWERS**
- 3. START ALL QUESTIONS IN A NEW PAGE**
- 4. USE BULLETS FOR EACH POINT IN YOUR ANSWERS (DO NOT INVENT YOUR OWN NUMBERING)**
- 5. CHECK THAT YOUR QUESTION PAPER HAS 8 PRINTED PAGES**
- 6. DO NOT OPEN THE QUESTION PAPER UNTIL PERMISSION HAS BEEN GRANTED BY THE CHIEF INVIGILATOR**

### QUESTION 1: Multiple Choice Questions

For each of the following questions, write clearly the question number and letter that corresponds with the most appropriate answer e.g. 1. D. Each question has only one correct option as an answer.

- 1.1 The two most common life-threatening complications during the postnatal period in Swaziland are \_\_\_\_\_ and \_\_\_\_\_.
- A. postpartum depression and postpartum haemorrhage
  - B. puerperal sepsis and postpartum haemorrhage
  - C. convulsions and obstetric shock
  - D. puerperal sepsis and thromboembolism
- 1.2 All the following are risk factors for developing endometritis during the puerperium, **except**:
- A. Prolonged labour
  - B. Multiple vaginal examinations
  - C. Old age
  - D. Young age
- 1.3 Which one of the following statements is true about puerperal sepsis?
- A. Puerperal infection is more prevalent among women who have delivered vaginally compared to those who have delivered by caesarian section
  - B. There is no difference in the incidence and prevalence of puerperal infection by mode of delivery
  - C. Puerperal infection is more prevalent among women who have delivered caesarian section compared to those who have delivered vaginally
  - D. Puerperal infection is any infection of the genital tract in the first 2-10 days postpartum (including the first 24 hours), indicated by a temperature of at least 38°C or more for at least two days of the first 14 days post delivery
- 1.4 Which one of the following is **not** a complication of endometritis?
- A. Pelvic abscess
  - B. Septic pelvic thrombophlebitis
  - C. Peritonitis
  - D. Thromboembolism

- 1.5 Which of the following may occur as a result of unrelieved breast engorgement?
- A. Mastitis
  - B. Sore nipples
  - C. Breast abscess
  - D. All of the above
- 1.6 Which one of the following describes the correct management for TB in the postpartum for the infant whose mother has active TB?
- A. The infant should not be separated from its mother but contact should be limited until both the mother and infant are on appropriate therapy
  - B. Treatment for TB is generally considered a contra-indication as amounts of anti-TB drugs are excreted in breastmilk
  - C. Breastfeeding is unacceptable unless the mother has MDR disease or poor adherence to therapy.
  - D. The infant should be separated from its mother and contact should be minimal between the mother and the baby
- 1.7 Pyrexia in the puerperium may be due to all the following, **except**:
- A. Pyelonephritis
  - B. Mastitis
  - C. Pneumonia
  - D. Totally emptying the bladder when urinating
- 1.8 All the following are signs of uterine inversion, **except**:
- A. Sudden severe pain
  - B. The woman will complain of a bearing down contraction after delivery of the baby due to uterine stimulation by the low lying placenta
  - C. Palpable dimple or depression felt after delivery
  - D. A mass may be felt on vaginal examination
- 1.9 The prophylactic management of postpartum haemorrhage includes \_\_\_\_\_.
- A. Liberal use of oxytocic drugs during labour
  - B. Prescribing combined oral contraceptives
  - C. Active management of the 3<sup>rd</sup> stage of labour
  - D. Applying cord traction when delivering the placenta

- 1.10 On examination of a postnatal client, you observe the presence of offensive, scanty lochia, and fever. This client may be suffering from:
- A. Infected caesarean section wound
  - B. Cervical cancer
  - C. Puerperal sepsis
  - D. Uterine fibroids
- 1.11 Mrs. Zungu, a postpartum client, complains of sudden chest pain, dyspnea and coughing. She may be suffering from \_\_\_\_\_
- A. Pulmonary Embolism
  - B. Thrombophlebitis
  - C. Phlebothrombosis
  - D. Shock
- 1.12 Which of the following can predispose a woman to uterine inversion?
- A. Long cord
  - B. Primiparity
  - C. Liberal use of oxytocic drugs
  - D. Avoiding fundal fiddling
- 1.13 In which of the following conditions is disseminated intravascular coagulation (DIC) most likely to be present?
- A. Amniotic fluid embolism
  - B. Varicose veins
  - C. Uterine inversion
  - D. Cardiogenic shock
- 1.14 Which of the following statements about the management of a client with an inverted uterus is **incorrect**:
- A. Let the client lie on the back and elevate the foot of the back and her legs to allow the uterus to fall back into its place
  - B. Start an IV line with Ringers Lactate to maintain adequate circulation
  - C. Call the doctor who may order pethidine to relieve pain
  - D. Instruct the woman to avoid carrying heavy loads after discharge
- 1.15 All the following are risk factors for amniotic fluid embolism, **except**:
- A. Primiparity
  - B. Liberal use of oxytocic drugs
  - C. Fundal fiddling
  - D. Precipitate labour

- 1.16 Which one of the following statements is true about second degree inversion of the uterus?
- A. The uterus turns inside-out but does not protrude through the cervix
  - B. The uterus is visible outside of the vaginal wall and cervix
  - C. The uterus protrudes through the cervix, but is within the vaginal wall
  - D. The uterus hangs outside the vagina with placenta attached
- 1.17 Zinhle, a 25 year-old gravida 3, para 2, gave birth to a healthy baby 3 hours ago. While doing a postnatal check-up on her, you discover that she has a rapid and irregular heartbeat, with rapid shallow respirations. She also reports blurred vision. What would you suspect?
- A. Uterine inversion
  - B. Puerperal pyrexia
  - C. Shock
  - D. Amniotic fluid embolism
- 1.18 Which one of the following statements is true about deep vein thrombosis?
- A. Occurs in small veins of the leg which may carry a clot to the pulmonary system, thus causing pulmonary embolism
  - B. Usually occurs in large veins of the leg
  - C. Is usually present when a Homan's sign test is negative
  - D. Is a minor disorder of the puerperium
- 1.19 Which of the following instructions by the midwife to a client with deep vein thrombosis would be **incorrect**?
- A. "Avoid smoking"
  - B. "Restrict exercise"
  - C. "Avoid home remedies"
  - D. "See the doctor for prescription of combined oral contraceptives"
- 1.20 The correct prophylactic management of obstetric shock includes:
- A. Careful monitoring of maternal and foetal conditions during labour
  - B. Liberal use of oxytocic drugs during the 3<sup>rd</sup> stage of labour
  - C. Using septic technique and avoiding malpractice during labour
  - D. Both A and C

- 1.21 Which of the following statements about amniotic fluid embolism is **incorrect**?
- A. Is the passage of amniotic fluid into the foetal circulation through a laceration in the uterus
  - B. May be caused by sudden rupture of membranes
  - C. May be caused by any condition in which the uterine muscle is cut or tears easily
  - D. All of the above are correct
- 1.22 If bleeding continues after delivery of the placenta, the first thing the midwife should do is call for help and
- A. Start an IV line
  - B. Massage the uterus
  - C. Insert a urinary catheter
  - D. Check the placenta to make sure it is complete
- 1.23 Postpartum haemorrhage is traditionally defined as
- A. Vaginal bleeding of any amount after childbirth
  - B. Sudden bleeding after childbirth
  - C. Vaginal bleeding in excess of 300 mL after childbirth
  - D. Vaginal bleeding in excess of 500 mL after childbirth
- 1.24 Which of the following may occur as a result of an untreated genital fistula?
- A. Stress continence
  - B. The woman may be compelled to deliver all future babies by caesarian section
  - C. Light scarring of the vaginal and bladder walls
  - D. Instant maternal death
- 1.25 A woman who has experienced a miscarriage is **LESS** likely to suffer from:
- A. Guilt
  - B. Relief
  - C. Depression
  - D. Anxiety

[Total: 25 marks]

## QUESTION 2

- a) While collecting history and conducting a physical examination on a woman who has come for her 7 days postnatal visit, you conclude that she has a urinary tract infection. State 6 psychological factors that might influence micturition during the puerperium which may have predisposed the woman to develop a UTI [6]
- b) **Differentiate** between postnatal depression and puerperal psychosis. Tabulate your answer (mention 5 points on either side) [5]
- c) Sonto presents to the postnatal clinic with her baby before her 6 week postnatal visit is due, complaining that her breastmilk is not enough, hence she is afraid her baby is starving. Explain how would you manage her problem? [5]
- d) Women giving birth in developing countries like Swaziland are more likely to suffer from puerperal sepsis than their counterparts in developed countries. Explain the causes of puerperal sepsis in developing countries? [6]
- e) During one of the days of your practice as a student midwife, you happened to be assigned at the Mbabane Government Hospital maternity ward. On this day, you assist an adolescent mother to deliver vaginally; however, she delivers a macerated still born. Mention eight (8) things that you should **avoid** saying to the bereaved mother while comforting the bereaved her. [8]

[Total: 30 marks]

### QUESTION 3

Delisile comes for her 7 days postpartum visit, and you notice that she is limping. You ask her if she has hurt herself, of which she says she has not. She only mentions a sudden ache in one of calf muscles in her legs, which has restricted her movement in the last 2 days or so.

- a) What condition do you suspect Delisile is suffering from? [1]
- b) Explain how the following factors can predispose a woman to suffer from the condition identified in a) above:
  - i) Pregnancy [3]
  - ii) Mode of delivery [2]
  - iii) Drugs [1]
  - iv) Postpartum haemorrhage [1]
  - v) Life style habits [1]
  - vi) High parity [1]
  - vii) Prolonged lithotomy position [1]
  - viii) Sepsis [1]
- c) Explain how you would manage Delisile's condition, giving scientific rationales for your actions. [8]

**[Total: 20 marks]**