UNIVERSITY OF ESWATINI FACULTY OF HEALTH SCIENCES MAIN EXAMINATION, JUNE, 2021.

TITLE OF PAPER: NORMAL PREGNANCY AND ANTENATAL CARE

COURSE CODE:

MWF 407

DURATION:

Two (2) Hours

TOTAL MARKS:

75

INSTRUCTIONS:

1. THE PAPER CONSISTS OF THREE (3) QUESTIONS

2. ANSWER ALL QUESTIONS

3. START EACH QUESTION ON A FRESH PAGE

4. READ THE QUESTIONS CAREFULLY

5. ALL QUESTIONS CARRY EQUAL MARKS

6. FIGURES IN BRACKETS INDICATE MARKS

ALLOCATED TO A QUESTION OR PART OF A QUESTION

7. TOTAL NUMBER OF PAGES EIGHT (7).

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MAIN EXAMINATION, FEBRUARY, 2021.

MWF407: NORMAL PREGNANCY AND ANTENATAL CARE.

QUESTION 1

Answer all questions. Choose the most appropriate response e.g. 1.26 D. Each correct answer carries one (1) mark. **Total 25 marks.**

Questions 1.1 to 1.9 refer to antenatal care.

- 1.1 According to the World Health organization (2016) antenatal care (ANC) model, which of the following best describes the time/period the pregnant woman should report to the health facility for the initial antenatal contact (visit).
 - A. 8-14 weeks' gestation
 - B. By 12 weeks' gestation
 - C. By 14 weeks' gestation
 - D. By 16 weeks' gestation.
- 1.2 WHO antenatal care guidelines, recommend screening pregnant women for gender based violence/domestic abuse on every ANC contact. Which of the following best describes the need for this screening? Gender based violence,
 - A. Causes misunderstanding in the extended families.
 - B. Reduces the chances of the woman to get social support from other family members
 - C. Affects the physical, mental health and safety of both the mother and the fetus.
 - D. Contributes to high incidence of placenta praevia.
- 1.3 According to the WHO, (2016) recommendations on antenatal care guidelines, which of the following refers to one of the expectations of pregnant women?
 - A. Achieving positive motherhood (including maternal self-esteem, competence and autonomy).
 - B. Personal social support from midwives during pregnancy
 - C. Support from their spouses when attending antenatal clinics.
 - D. Availability at health facilities of all medications.

- 1.4 According to WHO, (2018) the following is true about prioritizing person centred health and well-being as it relates to providing quality care to pregnant women and ultimately to their neonates.
 - A. Providing care to women and their neonates during pregnancy
 - A Providing care to pregnant women without taking into consideration the men's views
 - B Providing respectful care that takes into account women's views.
 - C Providing care to families and communities.
 - D Providing antenatal care to women within communities as dictated by healthcare workers.
- 1.5 Which of the following is one of the indicators of fetal well-being?
 - A. Gestational age irrespective of the size of the fetus on abdominal palpation.
 - B. Maternal condition which is not stable throughout pregnancy.
 - C. Fetal heart rate which is regular and variable with a rate of 110-160 beats per minute.
 - D. Need for adequate maternal nutrition during pregnancy.

Pholile is 25 years old Gravida 1 Para 0, gestation 14 weeks, presents at Mbabane Public Health Unit for the first antenatal contact with the midwife. Questions 1.6-1.10 refers to this scenario.

- 1.6 The midwife will perform a comprehensive health assessment on Pholile. Which of the following is the main purpose of this comprehensive health assessment?
 - A. To provide comprehensive information on existing chronic conditions.
 - B. To guide maternal condition during pregnancy.
 - C. To provide baseline information about the condition of the fetus
 - D. To obtain baseline findings to inform monitoring of maternal and fetal condition during pregnancy.
- 1.7 The midwife will prescribe folic acid for Pholile to prevent which of the following conditions?
 - A. Fetal neural tube defects.
 - B. Iron deficiency anaemia.
 - C. Fetal neural defects and enhance absorption of iron.
 - D. Reduce incidence of physiological anaemia.

- 1.8 Pholile will be advised to take Ferrous Sulphate throughout her pregnancy to prevent which of the following conditions?
 - A. Physiological anaemia.
 - B. Pathological anaemia
 - C. Haemmorrhagic anaemia at the time of delivery
 - D. Iron deficiency anaemia.
- 1.9 Which of the following tests will the midwife perform on Pholile?
 - A FBC and Hb
 - B FBC and RPR
 - C FBC, RPR, and Rhesus factor
 - D FBC, RPR, Blood group and Rhesus factor.
- 1.10 According to WHO, (2016) antenatal model, at what gestational age should Pholile ideally the ultrasound scan for low risk pregnancies in resource limited settings?
 - A. 10-12 weeks
 - B. 12-14weeks
 - C. Before 24 weeks
 - D. Before the end of the first trimester.
- 1.11 In which trimester are measures to assess gestational age by ultrasound done/recommended?
 - A. First trimester or early in the second trimester.
 - B. Second trimester or early in the third trimester.
 - C. Early in the second trimester.
 - D. Late in the second trimester.
- 1.12 What is the WHO,2016, recommended total number of antenatal care contacts/ visits for low risk pregnancies?
 - A. Four contacts.
 - B. Four to six contacts.
 - C. An average of six contacts.
 - D. Eight contacts.

- 1.13 Which of the following is one of the rationales for pregnant women to access antenatal care for the first time by 12th week gestation.
 - A. To allow for the provision of optimum care to the woman and the developing fetus.
 - B. To allow for screening for HIV infection in the mother.
 - C. To screen for Pulmonary Tuberculosis.
 - D. To allow for early screening for deviations, education on keeping healthy and provision of optimum care.
- 1.14 Which one of the following is true about the true pelvis in a gynaecoid pelvis?
 - A. The true pelvis provides the space available for the fetus to pass through during childbirth.
 - B. The true pelvis is comprised of the brim and the outlet.
 - C. The promontory of the pelvis protrudes into the pelvic brim impeding engagement.
 - D. The cavity poses a challenge during the process for childbirth.
- 1.15 In what way does obtaining previous childbearing history (past obstetric history) help the midwife to provide midwifery care to pregnant women?
 - A. Provides a guide in exploring the possible outcomes of the current pregnancy and what care to provide.
 - B. Helps the midwife to identify the woman's preferred place of delivery.
 - C. Helps the midwife to establish a trusting relationship with the woman.
 - D. Guides the midwife in deciding on the type of pain relief to give during labour.
- 1.16 The following is one / some of the functions of the pelvic floor muscles.
 - A. Provides support to the process of daefacation.
 - B. Influences passive control of the descent of the presenting part during the process of birth.
 - C. Does not play an important role in obstetrics.
 - D. Allows for the exit of products of conception during an abortion only.
- 1.17 Which of the following is one of the functions of the nutritive chorionic villi as the important unit of the placenta?
 - A. Allows for excretion of the amniotic fluid.
 - B. Allows for the placenta to produce oestrogen and progesterone
 - C. Allows for provision of the nutrients to the fetus.
 - D. Prepares the body for the effect of placental hormones.

- 1.18 Which of the following structures in the fetal circulation allows most of the blood to bypass the fetal lungs?
 - A. The foramen ovale.
 - B. The ductus arteriosus
 - C. The umbilical cord.
 - D. The hypogastric arteries.
 - 1.19 Which of the following is considered one of the causes of oedema in low risk pregnancies?
 - A. Increased osmotic pressure.
 - B. Reduced clotting factors interfere with movement of water from plasma into the cells.
 - C. Haemodilution allows movement of water from plasma into the cells.
 - D. The decrease in serum colloid pressure by 10-15% allows movement of water from plasma into the cells.
- 1.20 The following is true about physiological oedema during pregnancy.
 - A. The oedema occurs in all pregnant women and extends to above the knees.
 - B. Occasionally the oedema is accompanied by related proteinuria.
 - C. The oedema is more marked in the evening and becomes worse at night.
 - D. The oedema occurs during the day and subsides overnight.
 - 1.21 Which of the following is associated with low BMI in pregnancy?
 - A. Prematurity
 - B. Gestational diabetes
 - C. Pregnancy Induced Hypertension
 - D. Macrosomia.
 - 1.22 Pregnant women are advised not to smoke in pregnancy as smoking is associated with one of the following:
 - A. Increased risk of miscarriage or intrauterine retardation.
 - B. Poor antenatal attendance.
 - C. Poor fetal health as the woman will not consume a balanced diet.
 - D. Increased risk of dependence on nicotine to meet fetal needs.
 - 1.23 Which of the following advice can the midwife give to the pregnant woman experiencing nausea and vomiting?
 - A. Eat a high protein, low fat and low carbohydrate diet.
 - B. Eat a non bland non spicy diet
 - C. Eat small spicy frequent meals with plenty of oral fluids.
 - D. Exclude other causes of nausea and vomiting.

- Which of the following is associated with alcohol intake above the recommended quantity in in pregnancy?
 - A. Congenital alcoholism
 - B. Twitching at the time of birth
 - C. Intrauterine growth retardation and resultant macrosomia
 - D. Behavioural and cognitive disorders later in life.
 - 1.25 The following is true about advice given to pregnant women as regards travel from 32 weeks' gestation.
 - A. Travel is usually not recommended prior to 32 weeks.
 - B. Long continuous journeys are not recommended from 32 weeks
 - C. Journeys with short breaks for very long distances are not recommended.
 - D. No travel is allowed after 32 weeks gestation.

[25 marks]

QUESTION 2

- 2.1 Outline <u>four (4)</u> aspects of women centered antenatal care as described in the WHO (2016) antenatal model. One mark for each correct point. (4 marks)
- 2.2 Explain the recommended aspects for antenatal care as presented in the WHO, 2016 antenatal care model under the following headings:
- 2.2.1 Maternal nutrition

(8 marks)

2.2.2 Maternal assessment

[10 marks]

2.2.3 Fetal assessment

(3 marks)

[25]

QUESTION 3

Mrs Dlamini is Gravida 1 Para 0, aged 25 years, presents at the Mbabane Public Health Unit for the 6th antenatal contact. Gestational age 38 weeks. Describe the care Mrs Dlamini will receive from the midwife during this contact. Give rationale for each point. One (1) mark for each correct point including rationale. (25 marks)