Obstetric and gynecological nursing Department  
Courses codes (301-nursing)  
Reproductive Health Nursing  

Model answer for Final exam for 3rd year students

Date: 26/5/2013  Time allowed: 3 hour  Total marks: 80  

**Important Instructions For All Students: Please Read Carefully**

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<table>
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<tbody>
<tr>
<td>Allocated time</td>
<td>3 hours</td>
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<tr>
<td>Total allocated marks</td>
<td>(80 marks)</td>
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<tr>
<td>Number of papers</td>
<td>(18 papers)</td>
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<tr>
<td>Number of questions</td>
<td>(6 questions )</td>
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<td>How to answer</td>
<td>choose the correct answer for MCQ- matching true, false- &amp; write the answers for the questions below (specify the suitable word- incomplete-situation )</td>
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<td>Attention</td>
<td>All questions are to be answered</td>
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I- Choose the best answer: Marks (35)

* Maternal indication for induction of labor

A. Post-term pregnancy
B. Pre-term pregnancy
C. Major degree placenta praevia
D. Major degree of cephalo-pelvic disproportion

* Content of blood vessels in umbilical cord

A. Two arteries and one vein
B. One artery and one vein
C. Two veins and one artery
D. Two veins only

* Incomplete rupture uterus means

A. Peritoneum remains intact
B. Endometrium remains intact
C. Myometrium remains intact
D. All the three layers of the uterus are involved.

*Normal fetal heart rate ranged between

A. 100 - 120 b.m
B. 90 – 80 b.m
C. 180 – 200 b.m
D. 140 – 160 b.m
*Eating foods high in ...............makes iron absorption more efficient.

A. vitamin D  
B. vitamin C  
C. vitamin E  
D. vitamin B12

* The pregnant woman with class IV heart disease the symptoms are present at....................

A. labor  
B. rest  
C. Ordinary physical activity.  
D. Less than ordinary physical activity.

* Heba has been experiencing regular, coordinated contractions with cervical dilatation moving from 4 cm to 6 cm in the last half hour, and her membranes are still intact; Heba is in which stage of labor?

a- latent phase of the first stage of labor  
b- Active phase of the first stage of labor  
c- The third stage of labor  
d- The second stage of labor

* The female clitoris is homologous to which of the following male body parts:-

a- scrotum  
b- prostate  
c - Frenulum  
d- penis
* Which options describes the proper order of the cardinal movements of labor (mechanism of labour)?

   a- engagement, internal rotation, descent, flexion
   b- Engagement, external rotation, descent, extension
   c- Engagement, extension, internal rotation, flexion
   d- Engagement, flexion, internal rotation, extension, external rotation

* Engagement is best defined as which of the following

   a - when the presenting part goes through the pelvic inlet
   b - When the presenting part is level with the ischial spines
   c - When the greatest biparietal diameter of the fetal head passes the pelvic inlet

* Which of the following is a characteristic posture of pregnancy?

   a- kyphosis               b- hyperextension
   c- lordosis               d – scoliosis

* The hormone responsible for the maturation of the graafian follicle is:

   a- Follicle stimulating hormone               b- Progesterone
   c- Estrogen                               d- Luteinizing hormone
* During pregnancy maternal estrogen increases markedly. Most of this estrogen is produced by which of the following?

a - ovaries
b - adrenal
c - endometrium
d - fetus

* In vertex presentation, the position is determined by the relationship of what fetal part to mother’s pelvis?

a - mentum
b - sinciput
c - Sacrum
d - occiput

* The following are skin changes in pregnancy EXCEPT

a - Chloasma
b - Striae gravidarum
c - Linea negra
d - Chadwick's sign

*A 29-years-old woman (gravida2, para1) has a rapid labor. Within minutes of her admission, she is found to be completely dilated, with the vertex at 0 station, and she begins pushing. You are called by her nurse to evaluate her. Contraction are regular, every 2 to 3 minutes, and palpated
to be strong. Fetal heart tones are approximately 70 beats per minute. Cervical examination reveals the vertex to be right occipital posterior at 0 stations with no caput appreciated. Thick meconium is noted. What do you do initially?

A. instruct the patient to ambulate
B. turn the patient on her side and administer oxygen by face mask
C. begin amniinfusion and increase intravenous fluids
D. await vaginal delivery
E. give terbutaline to stop Contractions

*Which of the following is not a part of product of conception?

a. deciduas
b. amniotic fluid
c. fetus
d. Membranes, placenta

*The average length of the umbilical cord in human is:

a. 35 - 40 cm
b. 50- 55 cm
c.30- 35 cm
d. 40 -45 cm

*The time between the beginning of one uterine contractions to the end of the same contraction is:

a. intensity
b. interval
c. duration

d. frequency

*The main causes of constipation during pregnancy are

a) decrease physical exertion
b) changes in the diet
c) relaxation of the smooth muscle system
d) obstruction to the lower bowel by the presenting part of the fetus

*Preterm rupture of the membranes is most strictly defined as spontaneous rupture at any time prior to which of the following?

A. a stage of fetal viability
B. the second stage of labor
C. the 32\(^{nd}\) week of gestation
D. the onset of labor
E. the 37\(^{th}\) week of gestation

*Premature rupture of the membranes is most strictly defined as spontaneous rupture at the end of?

a. the second stage of labor
b. the 32\(^{nd}\) week of gestation
c. the third stage
d. first stage of labour

*From the following definitions, select the best description of preterm labor.

a- labor that begins after 28 weeks’ gestation and before 37 weeks’ gestation
b- labor that begins after 15 weeks’ gestation and before 37 weeks’ gestation

c- labor that begins after 24 weeks’ gestation and before 28 weeks’ gestation

d- labor that begins after 28 weeks’ gestation and before 40 weeks’ gestation

* **Following delivery of healthy baby, which one is first to be done:**

A- To place the baby on comfortable position .

B- To clear the air passage and maintain patent air way.

C- Eye care for newborn.

D- Clamping the umbilical cord.

* **Perception of fetal movement by multigravida pregnant women:**

A- 6-8 weeks

B- 16-18 weeks

C- 30 - 36 weeks

D- None of the above

* **The uterus is a hollow, muscular and ............

a) pear –shaped organ

b) orange –shaped organ

c) almond –shaped organ
*The pregnant uterus reach the umbilical level at

a. 9 weeks  
b. 10 weeks  
c. 24 weeks  
d. 36 weeks

*The pregnant women with her L.M.P. is (1) July 2012 the expected date of delivery is

a. 14 April 2012  
b. 8 April 2013  
c. 8 March 2013  
d. 7 May 2013

*Which of the following conditions necessitate follow up for one year Human chorionic gondatrophin hormone testing

A- client who had septic abortion  
B- client who had ectopic pregnancy  
C-client who had vesicular mole  
D-client who had premature cervical dilation

*During which of the following phase of the menstrual cycle is it ideal for implantation of a fertilized egg to occur?

a. Ischemic phase  
b. Menstrual phase
c. Proliferative phase  
d. Secretory phase  

* Which of the following methods would be avoided for a woman who is 38 years old, has 3 children and smokes a pack of cigarette per day?  

a. Oral contraceptives  
b. Cervical cap  
c. Diaphragm  
d. IUD (Intra-uterine device)  

* A woman using diaphragm for contraception should be instructed to leave it in place for at least how long after intercourse?  

a. 20 hour  
b. 6 hours  
c. 36 hours  
d. 28 hours  

* A couple with one child had been trying, without success for several years to have another child. Which of the following terms would describe the situation?  

a. Primary Infertility  
b. Secondary Infertility  
c. Irreversible infertility  
d. Sterility  

* Magnesium sulphate give to mother complain from  

a. Heart disease  
b. Eclampsia  
c. Renal failure  
d. Respiratory depress
*Which terminology should describe vaginal discharge on the first day after delivery*

a. Lochia alba    

b. Lochia serosa    

c. Lochia rubra    

d. All of them

11. Matching: (5 marks)

<table>
<thead>
<tr>
<th>Column (A)</th>
<th>Column (B)</th>
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<tbody>
<tr>
<td>1- Three part organ (basalis, capsularis, and vera) that is discard</td>
<td>a- Labor</td>
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<td>following the birth of a child</td>
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<td>2- Hormone responsible for a positive pregnancy test is</td>
<td>b- Decidua</td>
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<td>3- Contact between the blastocyst and the uterine endometrial occurring</td>
<td>c- Attitude</td>
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<td>about 4th day.</td>
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<td>4- Surrounded the umbilical cord vein and arteries</td>
<td>d- Abruptio placenta</td>
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<td>5- Implementation occurring outside the uterine cavity</td>
<td>e- Goodell's signs</td>
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<td>6- Placenta implemented in the lower uterine of the uterus</td>
<td>f- Wharton’s jelly</td>
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<td>7- Premature separation of placenta</td>
<td>g- Implementation</td>
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<td>8- The degree of flexion the fetus assumes or the relation of the fetal</td>
<td>h- Human chorionic gondatrophin</td>
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<td>parts to each other</td>
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<td>9- A series of events by which uterine contractions expel the fetus and</td>
<td>i- Placenta previa</td>
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<td>placenta from the woman’s body</td>
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<td>10- Softening of cervix related to increased vascularity</td>
<td>j- Ectopic pregnancy</td>
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<td>k- Chadwick’s signs</td>
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1- Follicle stimulating hormone

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<td>a</td>
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111. True or false (10 marks)

1- Lochia discharge is acidic in reaction  
   T - F

2- Chloasma is the blotchy, brownish, mask of pregnancy  
   T - F

3- The posterior vaginal wall is 10 cm  
   T - F

4- The endometrium is the outer layer  
   T - F

5- The ovaries are the organs of ovulation and the hormones oestrogen, progesterone & androgen.  
   T - F

6- The vaginal media is alkaline.  
   T - F

7- involution is return the uterus to pre pregnant condition  
   T - F

8- Lie is the relationship of long axis of the fetus to long axis of the mother.  
   T - F

9- The second stage is the stage of cervical dilatation  
   T - F

10- first stage is the stage of the delivery of the baby  
    T - F
IV. Specify and write the suitable word :- (5 marks)

1. Antidote to Magnesium sulphate Calcium glyconate
2. Ideal female bony pelvis is gynecoid pelvis
3. Sub involution: failure of the uterus to return to normal size after birth.
4. Multi para is the women who delivered more than one time
5. Cervical Effacement: is taking up of the cervix during first stage of labour.
6. Descend of one or more of the genital organs below their normal position
   Genital prolapse.
7. Tackycardia : increase of fetal heart rate more than baseline .
8. Bready cardia: decrease of fetal heart rate more than baseline .
9. Abortion is spontaneous termination of products of conceptus before viability of the fetus, before 24 weeks of pregnancy.
10. Pimi gravida : the women who pregnant for the first time.

V. Complete the following:- (15 marks)

1. Sites of ectopic pregnancy :-
   - Ovaries
   - Cervix
   - Tubes
   - Peritoneum
2. List at least four of characteristics of normal labour:

- single tone baby
- within vaginal canal
- without complications to fetus or mother
- Not exceeds 24 hours
- Spontaneous

3. Hormonal and natural Methods of induction of labor:

1-Hormonal

A. Oxytocin
B. Prostaglandins

2-Natural

B. Breast/nipple stimulation
C. Sexual intercourse
D. Membrane stripping
E. Amniotomy
F. Acupuncture/acupressure

4. Complications of diabetes mellitus:

On maternal

- Increased incidence of abortion
- Increased incidence of preeclampsia
- Increased incidence of prenatal mortality and morbidity
- Preterm labor
• Polyhydrominos
• Infection

On fetal and Neonatal
• Hypoglycemia or hyperglycemias
• Intrauterine growth restriction
• Intrauterine fetal death.
• Fetal congenital malformation
• Neonatal hyperbilirubinemia
• Macrosomia
• Prematurity and RDS

5. The following are sign of placenta separation during labour:

A- Fundal height is raised

B- Uterus becomes globular and ballotable

C- Flattening of the suprapubic region

D- Stopage pulsation of cord.

6. Types of post partum haemorrhage:

1. Primary p.p.hge. occur within 24 hours of puerperium


7. Types of abortion

• Threaten abortion
• Inevitable abortion
• Missed abortion
• Incomplete abortion
• Complete abortion
• Septic abortion

8. Types of prolapse:-

• Vaginal prolapse
• Uterine prolapsed

V1. 🎯 Situation :( 10 marks )

Case Study  Mrs samia pregnant?

Mrs samia is 39 years old and has been married for 15 years. She has one child who was born 10 years ago and she is hoping very much that at last she is pregnant again. she and her husband have not used contraception and she doesn’t think she has had any miscarriages in that time. She hasn’t had her monthly bleeding for the past nine weeks. When you ask her about any changes in her body since her last menstrual period, she says she hasn’t noticed anything, but she has been feeling nauseous when she first gets up in the morning and she is more tired than usual. Mrs samia tells you that her first baby was born after a labour of 30 hours and he weighed 4 kilograms. She also remembers that she was given iron tablets to take, but she doesn’t know why.

a. What are symptoms of pregnancy in Mrs samia’s case study?
• Amenorrhea, nausea, vomiting, frequency of micturation, breast change, positive pregnancy test.

b. list items of history taking that should be performed for this pregnant mother?

• Personal history, obstetric history, menstrual history, current pregnancy history, past and present medical history.

c. draw schedule to this pregnant mother to visit ante natal clinic through the current pregnancy?

• from first to 28 week every month, from 28 week to 36 week every two weeks, from 36 to full term every one week, or if there is any problem.

d. provide health education for this pregnant mother during pregnancy?

• Balanced died with green vegetables and increase milk intake, personal hygiene, breast care and exercise, enough sleep, frequency follow up,

With The Best Wishes

Dr. Soad abdelsalam
Team work :-

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