



امتحانات تمريض النسا الفرقة الثالثة ترم أول لعام 2017

تمريض نسا

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| Zagazig University/ College / Faculty of NURSING Band /NURS Department / Obstetrics &Gynecology Date / 1/1/2017 First Semester |   | Practical / Theoretical Exam Subject / Obstetrics &Gynecology Nursing Time /3 hours Total Marks /200 Number of questions / 3 Number of questions paper / <u>one</u> sided paper :10 |
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Answer all of the following questions:

First question: (Total Marks: 30)

True or false questions: (each point equal one mark)

- 1- () Constipation during pregnancy occurs due to decreased peristaltic activity of the gut by the action of estrogen and it is also displaced by the growing uterus.
- 2- () In concealed accidental hemorrhage, the blood that results from placental separation is retained inside the uterus.
- 3- () Pica means that the mother craves certain foods of unnatural substances such as coal and soil.
- 4- () The fundal height reaches the umbilicus at 16 weeks gestation.
- 5- () Pinard stethoscope is fitted into the fetal scalp for internal fetal heart rate monitoring.
- 6- () A sperm count of 10 million per ml would be considered normal.
- 7- () Tubal patency can be checked using ultrasound.
- 8- () Progesterone levels should be tested in the mid-luteal phase.
- 9- () Chlamydia and gonorrhoea can cause pelvic inflammatory disease.
- 10- () The most fertile days of a woman's cycle can vary from month to month.
- 11- () semen analysis more than 10% normal forms is considered normal.
- 12- () The commonest cause of an ovulatory subfertility is hyperprolactinaemia.
- 13- () Male subfertility due to oligospermia can be successfully treated with intracytoplasmic sperm injection (ICSI).
- 14- () The commonest cause of anovulatory subfertility is polycystic ovary syndrome.

- 15- () Progesterone levels should be tested in the mid-follicular phase.
- 16- () Vaginal examination is indicated when a woman has bleeding
- 17- () Episiotomy should be assessed for edema
- 18- () Effacement & dilatation of the cervix occur simultaneously in primi - para women
- 19- () Effacement occurs before dilatation of the cervix in primi -para women
- 20- () After full cervical dilatation ,the woman is asked to stop bearing down.
- 21- () The optimum lie of the fetus is the longitudinal lie.
- 22- () The fetal head has an occipital and two frontal bones
- 23- () -2 or -3 station respectively this mean engagement
- 24- () Bloody show is mucous stained with blood
- 25- () Episiotomy is the surgical enlargement of the vagina during birth
- 26- () Enlarged or bulging of fetal fontanel may indicate increased intracranial pressure
- 27- () In primipara engagement usually takes place 2-3 weeks before term due to the good tone of the abdominal & uterine muscles
- 28- () Presentation refers to the fetal part that enters the pelvis first
- 29- () Station is measured from the level of ischial spine in the maternal pelvis
- 30- () Uterine contractions are the primary power of labor during the first stage .

Second question: **(Total Marks : 100)**
Select the best answer: *(each point equal two mark)*

1. A 35-year-old woman is considered infertile after ____ of trying to conceive.
- 1 month
 - 2 months
 - 4 months
 - 6 months
2. If a couple is infertile, this means the couple...
- Will never be able to have children
 - Could not conceive after 12 months of unprotected sex
 - Should look into adoption
 - All of the above

3. _____ is a major factor for infertility in women.
- Age
 - Weight
 - Anovulation
 - All of the above
4. The most common symptom of a vaginal yeast infection is:
- Vaginal bleeding
 - Blisters
 - Fever
 - Itching
5. How can a vaginal yeast infection be prevented?
- Wearing cotton or silk panties
 - Wash, dry, and change panties often
 - Eat yogurt
 - All of the above
6. What is acidophilus?
- Helpful bacteria
 - A rare form of yeast
 - Harmful bacteria
 - An acidic yeast infection
7. Hospitalization for patient with PID.
- Pregnancy.
 - Temperature of more than 38°C.
 - Patient request
 - All of the above.
8. Predisposing factors for vaginal candidiasis include.
- Pregnancy.
 - Good immune status.
 - Glycosuria.
 - Chronic anaemia.
9. Trichomoniasis is characterized:
- Vaginal tenderness and pain.
 - Non-irritant discharge.
 - Patchy strawberry vaginitis.
 - Dysuria.
10. Luteal phase defects are ovulatory disorders that can be a cause of infertility. Which of the following studies performed in the second half of the menstrual cycle is helpful in making this diagnosis?
- Serum estradiol levels
 - Endometrial biopsy
 - Serum follicle-stimulating hormone (FSH) levels
 - Serum luteinizing hormone (LH) levels

11. In investigating a couple complaining of infertility, the assessment of ovulation is one of the more important investigations. Which of the following would indicate that the female partner is ovulating Except?
- The presence of normal regular menstrual cycles
 - The characteristics of the cervical mucus at mid-cycle
 - The 21 day progesterone test
 - FSH > 20 IU/L on three occasions
12. Which of the following statement regarding the menstrual cycle are correct?
- The luteal phase is associated with a large increase in plasma progesterone
 - Ovulation occurs after about 14 days
 - Ovulation occurs in response to a sudden increase in plasma LH
 - The luteal phase is associated with a large increase in plasma progesterone
13. Which of the following statement regarding hormonal control of the menstrual cycle are correct?
- If no egg is fertilized, progesterone levels fall and this is the trigger for menstruation.
 - In the absence of receptors for FSH and LH, preantral follicles undergo atresia
 - Progesterone promotes full development of the endometrium
 - If no egg is fertilized, progesterone levels fall and this is the trigger for menstruation.
14. Which of the following hormones are secreted by the corpus luteum? Please select all that apply.
- FSH.
 - Human chorionic gonadotrophin.
 - Progesterone.
 - Oestrogen.
15. During time of ovulation cervical discharge become
- Scanty , more viscid, positive fern test
 - More viscid, negative fern test
 - More profuse, less viscid, positive fern test**
 - Less profuse, less viscid, positive fern test
16. A mass formed of 16 cell is the stage of from fetal development
- Embryo
 - Morula
 - Zygote
 - Blastocyst
17. Insertion of the cord at placental margin called
- Battledore placenta
 - Placenta membranes
 - Vasa Previa
 - Velmentous insertion

18. Which type of placenta contain small accessory lobe distant from the main placenta.

- a. Placenta bilobata
- b. Placenta succenturiata
- c. Placenta membranes
- d. Battledore placenta

19. In pregnancy chadwick signs mean

- a. Bluish discoloration of vaginal mucosa
- b. Lower uterine segment softening
- c. Tenderness of breast
- d. Excessive vaginal discharge

20. In fetal circulation foramen oval

- a. Connected atrium with ventricle
- b. Connected aorta and atrium
- c. Bypass blood to liver
- d. Connected right atrium to left atrium

21. The uterus is partially or totally turned inside out is known as

- a. Uterine prolapsed
- b. Uterine rupture
- c. Uterine malformation
- d. Uterine inversion

22. Postpartum uterine contractile pain is greater with breastfeeding because suckling release

- a. Prostaglandin
- b. Progesterone
- c. Oxytocin
- d. Estrogen

23. The period of time from the end of delivery until the reproductive organ returned to pre-pregnancy condition

- a. Perineum
- b. Puerperium
- c. Menopause
- d. Para ovarium

24. Risk factors of postpartum infection include all of the following except

- a. Anemia
- b. Premature rupture of membrane
- c. Poor nutrition
- d. None of the above

25. The mean time to ovulation in non-lactation postpartum women is

- a. 4-6 weeks
- b. 6-8 weeks
- c. 8-10 week
- d. 10-12 weeks

26. During puerperium women should lie in.....position

- a. Dorsal recumbent
- b. Lithotomy position
- c. Prone position
- d. Lateral position

27. Blood loss during postpartum period can be controlled by

- a. Prostaglandin
- b. Oxytocin
- c. Uterine massage
- d. Early suckling of baby

28. Transient increase in temperature during postpartum may be due to the following causes except

- a. Constipation
- b. Ovulation
- c. Milk engorgement
- d. Nervous excitation

29. The product of conception prior to implantation is called

- a. Embryo
- b. Ovum
- c. Zygote
- d. Fetus

30. Hager signs of pregnancy is

- a. Breast tenderness
- b. Excessive cervical mucous
- c. Isthmus of the uterus soften
- d. Perception of fetal movement

31. The term ptyalism means:

- a. Blood stained mucus.
- b. Bluish discoloration of the vagina.
- c. Excessive salivation.
- d. Nausea and vomiting.

32. In shoulder presentation, the fetal head is palpated in:

- a. Fundal grip.
- b. Lateral grip.
- c. Pelvic grip.
- d. Pawlick grip.

33. The term striae gravidarum is used to describe:

- a. Excessive nausea and vomiting during pregnancy.
- b. Stretch marks that appear on both sides of the abdomen.
- c. Bulging of the bag of forewater.
- d. Relaxation of the smooth muscles of the back

34. The placenta is situated in the lower uterine segment and its edge doesn't reach the internal os in:

- a. Placenta previa lateralis.
- b. Placental abruption.
- c. Placental insufficiency.
- d. Revealed accidental hemorrhage.

35. In breech presentation and the fetal back is in the right side, FHR is auscultated:

- a. Below the umbilicus, on the right side.
- b. Below the umbilicus, on the left side.
- c. Above the umbilicus, on the left side.
- d. Above the umbilicus, on the right side.

36. What is the duration of the 1st stage of labor in multipara women ?

- a. 1-2 hours
- b. 3-4 hours
- c. 6-8 hours
- d. 16-20 hours

37. The 2nd stage of labor starts at the time:

- a. of rupture of fetal membranes
- b. of full effacement of the cervix
- c. when the fetal head passes through the pelvic brim
- d. when A, B and C all have occurred

38. The signs of complete placental separation include:

- a. the uterus becomes globular
- b. the umbilical cord is not retracted by pressure applied to the lower abdomen above the symphysis
- c. the umbilical cord is not retracted after bearing down
- d. all of the above suggest separation of the placenta

39. Which of the following cannot be determined by vaginal examination performed during labor?

- a. the degree of dilation and effacement of the cervix
- b. the integrity of fetal membranes
- c. neither the presenting part nor its position in the birth canal be determined
- d. the risk of fetal hypoxia

40. The optimal frequency of uterine contractions during the 1st stage of labor is:
- 3-4 contractions/ 10 minutes
 - 6-8 contractions/ 10 minutes
 - 10-12 contractions/ 10 minutes
 - 15-20 contractions/ 10 minutes
41. When does the 1st stage of labor start and end?
- from the time of full cervical effacement to the delivery of the fetus
 - from the delivery of the fetus to the expulsion of the placenta
 - from the start of uterine contractions to the full cervical dilatation and effacement of the cervix
 - this period corresponds to the first 2 hours following the delivery of the placenta
42. The only disadvantage of the midline episiotomy is:
- Less blood loss.
 - Reduced incidence of dyspareunia.
 - Incision may extend to anal sphincter.
 - Less pain in the postpartum period.
43. What is the reference point of a cephalic presentation when the head is fully flexed?
- occiput
 - mentum
 - frontal
 - Sagittal
44. Labor is said to be normal if all are present except:
- At term
 - Breech presentation
 - Spontaneous in onset
 - Healthy mother & neonate after delivery
45. The physician asks the nurse the frequency of a laboring client's contractions. The nurse assesses the client's contractions by timing from the beginning of one contraction:
- Until the time is completely over
 - To the end of a second contraction
 - To the beginning of the next contraction
 - Until the time that the uterus becomes very firm
46. What is the lie if the fetal and maternal axis cross at a 45-degree angle?
- Longitudinal.
 - Breech .
 - Oblique.
 - Transverse.
47. When should the fetal rate be auscultated during labor ?
- before a contraction.
 - during a contraction
 - Immediately after a contraction.
 - Any time.

48. During the third stage of labor, Which of the following is NOT a sign of placental separation ?

- a. Gush of blood.
- b. Uterus rises in the abdomen.
- c. Umbilical cord protrudes further out of the vagina.
- d. Uterus becomes flaccid.

49. The so-called "fourth stage" of labor, during which risk of postpartum hemorrhage greatest, lasts how long ?

- a. 15 minutes.
- b. one hour-2 hour.
- c. 3 hours.
- d. 4 hours.

50. Which most common type of female pelvis?

- a. Android.
- b. Anthropoid.
- c. Gynecoid.
- d. Platypelloid.

Third question:

(Total Marks: 70)

A. **Complete:** _____ *(each point equal one and half marks)*
(30 Marks)

1. _____ is a serious infection of the female reproductive system that can develop when certain STDs go untreated.
2. Prolapse of the upper part of the anterior vaginal wall with the base of the bladder _____
3. The pH of seminal fluid is more _____ than the pH of vaginal fluid .
4. The cervical mucus becomes thin and stretchy under the influence of _____
5. The gonadotrophins FSH and LH are secreted by the _____ lobe of the gland..
6. Overlapping of the fetal skull to facilitate its passage through the bony pelvis is _
_____.
7. Types of the fetal presentation include the following
 - a- _____
 - b- _____
 - c- _____
8. Varicosities during pregnancy is caused by
 - a-.....
 - b-.....
 - c-.....

9. Danger signals of pregnancy include

- a-.....
- b-.....
- c-.....
- d-.....
- e-.....

10. The relief measures of heart burn during pregnancy include

- a-.....
- b-.....
- c-.....

B. write short notes **(40 Marks)**

1- Factors affect labor progress (10 :Marks)

2- Precautions during wearing a pessary (10: Marks)

3- Dalia is pregnant for the first time. This is her first visit to the antenatal clinic. She is 8 weeks gestation and has no complaints. Her LMP is 3/7/2016.
(20: Marks)

a. Discuss with her the schedule of the antenatal visits till delivery. (10 :Marks)

b. Calculate EDD. (2 :Marks)

c. What are the investigations that should be done to her in the first and return visits. (8: Marks)

Good luck

Dr/ Hend salah eldin

