





كلية معتمدة

Obstetrics and Gynecological Nursing Department Course Codes (301-Nursing) Reproductive Health Nursing

Final Exam for 3rd Year Students

Date: 27 / 5 /2019 Time allowed: 3 hours Total marks: 80

Important instruction for all students: please read carefully

Allocated time	3 hours
Total allocated marks	(80 marks)
Number of papers	9
Numbers of questions	(6 questions)
How to answer	Choose the correct answer for MCQ, true/ false,
	matching & write the answers for the questions
	below (situation, list & complete)
Attention	All questions are to be answered

ملحوظة هامة: امتحان الشفوى سوف يعقد في نفس اليوم عقب الانتهاء من الامتحان التحريري بالدور الثالث بقسم تمريض صحة المرآة و التوليد

I. Choose the best answer:

Marks (20)

- 1- Which of the following corresponding the ovaries in female to male?
 - a. Prostate
 - b. Tests
 - c. Penis
 - d. Ureter
- 2- On which of the following areas would the nurse expect to observe chloasma?
 - a. Breast, areola, and nipples
 - b. Chest, neck, arms, and legs
 - c. Abdomen, breast, and thighs
 - d. Cheeks, forehead, and nose
 - 3- Which of the following is a symptom of placenta preavia?
 - a. Bright red, painless vaginal bleeding
 - b. Quickening
 - c. Nausea and vomiting
 - d. Dizziness
- 4- All of the following maternal factors is highly associated with abruption placenta EXCEPT?
 - a. Preeclampsia
 - b. polyhydramnios
 - c. Smoking
 - d. Past cesarean births
- 5- The classic features of preeclampsia include?
 - a. Edema and headache
 - b. Hypertension and proteinuria

- c. Liver damage and spotting
- d. Hemolysis and RUQ pain

6- What medication is used as seizure prophylaxis during labor and postpartum?

- a. Magnesium sulfate
- b. Valproic Acid
- c. Phenobarbital
- d. Carbemazepine

7- In pregnancy with heart disease ,the risk of cardiac complications increase at ?

- a. 10-12 weeks
- b. 20-22 weeks
- c. 30-32 weeks
- d. 40-42 weeks
- 8- Risk factors of diabetes mellitus include all of the following **EXCEPT**?
 - a. Obesity
 - b. Polyhydrominos.
 - c. Mother over 45 years of age and less than 20 years
 - d. Primipara

9- Which of the following is an acquired cause of anemia during pregnancy **EXCEPT**?

- a- Folic acid deficiency
- b- Loss of blood from bleeding
- c- Abnormal structure of hemoglobin
- d- Poor intake of iron in diet

10- During delivery, what comes next after engagement, descent, and flexion?

- a. Internal rotation.
- b. Extension.
- c. External rotation.

d. Expulsion

11- The following are signs of placenta separation **EXCEPT**?

- a. Fundal height is raised
- b. Uterus becomes globular and ballotable
- c. Flattening of the suprapubic region
- d. Permanent lengthening of the cord.

12- The greater danger in breech presentation?

- a. Cord prolapse
- b. Precipitate labour
- c. Rupture of uterus
- d. Prolapse of foot

13- Which change can be seen in the puerperium?

- a. Maternal heart beat is increased 2 days after delivery
- b. Endometrium repair is resumed three weeks after delivery
- c. Uterus will return to non-pregnant state after 8 weeks
- d. Vaginal rugae appear after 3 months from delivery

14- From physiological method of family planning all the following EXCEPT?

- a. Lactation amenorrhea method
- b. Fertility awareness method
- c. Female condom
- d. Coital interruption method

15- Which of the following fever, foul lochial discharge and sub involution of the uterus are signs of?

- a- Puerperal psychosis
- b- Puerperal sepsis
- c- Postpartum hemorrhage
- d- hypertensive disorder

16- The mode of action of IUCD all the following EXCEPT?

- a. Act as mechanical barriers preventing ovum implantation in the indometrium
- b. Increase uterine and tubal motility
- c. It can initiate sterile inflammatory reaction

d. Decrease endometrial prostaglandin

17- Tubal causes of infertility?

- a. Luteal phase defect
- b. T.B. endometritis
- c. Salpingitis
- d. Irradiation

18- All the following method can be detect ovulation **EXCEPT**?

- a. Basal body temperature
- b. Hysterosalpingogram
- c. Premenstrual endometrial biopsy
- d. Study cervical mucus

19- Commonest cause of postpartum hemorrhage?

- a. A tonicity of the uterus
- b. Trauma to the genital tract
- c. Forceps delivery
- d. Blood coagulopathy

20- Which of the following signs will distinguish threatened abortion from imminent abortion?

- a. Severity of bleeding
- b. Presence of uterine contraction
- c. Nature and location of pain
- d. Dilation of the cervix

\underline{II} . Circle (T) if the statement is true, (F) if the statement is false $\underline{Marks~(15)}$

1-	The body or corpus makes up the upper one thirds of the	T	F
	uterus		
2-	The hormone responsible for the development of the ovum	T	F
	during the menstrual cycle is Luteinizing hormone		
	(LH)		
3-	Oogenesis is the creation of an ovum in the ovary	T	F
4-	Hegars sign meaning the uterine contraction felt during	T	F
	bimanual examination		
5-	A woman should be visit the antenatal clinic once every	T	F
	month in the first 7 months in normal pregnancy		
6-	Methotrexate is adrug given for women as treatment of	T	F
	ectopic pregnancy		
7-	Vaginal bleeding in molar pregnancy is prune juice	T	F
8-	Abruption placenta is bleeding from abnormally situated	T	F
	placenta.		
9-	Pre-eclampsia can cause disseminated intravascular	T	F
	coagulopathy (DIC)		
10-	Oxytocin is administered for cardiac women to short the	T	F
	second stage of labor.		
11-	Oral glucose tolerance test (GTT) is the standard test for	T	F
	diagnosis of diabetes mellitus.		
12-	Attitude is the relationship of the fetal parts to each other	T	F
13-	When the fetus is rapidly expelled and the duration of labor is	T	F
	less than 3 hours, it is called preterm labor		
14-	Primary infertility is the inability of a woman to conceive	T	F
<u></u>			

	who previously was able to do so		
15	Prolonged Labor can be defined as Prolongation of the	T	F
	process of labour than the normal standard limits		

III. Match of the following: Marks (10)

Column (A)	Column (B)
1- Meiosis	A Is the denominator of vertex
	presentation
2-Occiput	B- Two small glands which open on either
	side of the vaginal orifice
3- The isthmus	C- Is the process by which gametes are
	produced
4- Bartholin's glands	D- A narrow area between the cavity and the
	cervix, which is 7 mm long. It enlarges
	during pregnancy to form the lower uterine
	segment.
5- Contraction ring	E- Is a cephalic presentation in which the
	head is midway between flexion and
	extension
6- Brow presentation	F- It is a localized spasm of the circular
	muscle fibers of the uterus. It usually occurs
	around a groove in the fetal body e.g. neck.
	It not seen or felt abdominal
7- Quickening	G- Abortion together with sepsis
8- Threatened abortion	H- The period of about six weeks after
	childbirth during which the mother's

	reproductive organs return to their original		
	non-pregnant condition		
9 Puerperium	I Pregnancy may go to term		
10- Septic abortion	J- The first sensation of the fetal movement		

1	2	3	4	5	6	7	8	9	10
C	A	D	В	F	E	J	I	H	G

<u>V.</u>	Complete	the	following:
Marks (10)			

- 1. After implantation, the trophoblast and the lining mesoderm together form Chorion
- 2. Types of decidua basalis, capsularis & vera
 - 3-Types of breech presentation Frank breech ,Incomplete or footling breech , Complete breech , &Knee presentation
- 4- Factors affecting progress of labor: Passage, Passenger, Power, position&Psychological aspect
 - 5- parts of fallopian tube Interstitial portion, The isthmus, the ampulla, & The infundibulum
 - 6- Stages of eclamptic fits are premonitory stage, tonic stage , clonic stage and coma stage
 - 7- types of menopause Natural (spontaneous) menopause, Premature menopause, Delayed menopause, &Iatrogenic menopause
 - 8- Degrees of placenta previa: lateralis, marginalis centralis During labor the placenta previa centralis is divided into: Incomplete centralis & Complete centralis.

9- prolonged labor is The labor last for more than 24 hour in PG & 16 hour in MG or It is one in which regular uterine contraction with a dilation cervix has been present or 18 hours more or for 12 hours since admission

10- puerperal sepsis Its inflammatory process develops in the birth canal, as the result of bacterial invasion it occurs at any time during post partum period. Characteristics: * A temperature of > 100.4 of (38 oC) after 2 days .

*Occurs during 1st 10 days typically. *Effects can be mild or life threatening.

VI. List the following:

Marks

<u>(15)</u>

1- Characters of baby of diabetic mother:-

- 1. Oversized (4.5 kg) = macrosomia
- 2. Moon face
- 3. Baby length is more than usual
- 4. Coated with vernix caseosa
- 5. Large umbilical cord
- 6. Large placenta
- 7. Congenital anomalies may b present
- 8. Hypertrophy of islets of langerhans (pancreas)

2- Role of nurse in family planning methods

- 1 G: greet client
- 2-A: ask about family planning needs
- 3-T: tell client about different methods
- 4-H: help client to select
- 5-E: explain how to use the methods

6-R: return for follow up

3. Effects of heart disease on pregnancy for mother &fetus.

On mother risk of 1- Abortion.

2- Preterm labor.

On Fetal: 3-Fetus death.

4-Fetuses small for gestational age(IUGR).

5-Congenital heart disease in baby

4. Causes of ectopic pregnancy:

- An infection or inflammation of the tube may have partially or entirely blocked it.
- Pelvic inflammatory disease (PID) is the most common of these infections
- Endometriosis (when cells from the lining of the uterus detach and grow elsewhere in the body) or scar tissue from previous abdominal or fallopian surgeries can also cause blockages. More rarely, birth defects or abnormal growths can alter the shape of the tube and disrupt the egg's progress.

5- Risks of hormone replacement therapy?

- 1. Endometrial cancer
- 2. Breast cancer
- 3. Venous thromboembolic disease
- 4. Coronary heart disease and hypertension
- 5. Increased incidence of gallbladder disease
- 6. Increased risk of dementia and Alzheimer disease

VII.Answer the following situation:

Marks (10)

Mrs. Heba is 60 years old, She had five children, she comes into the antenatal clinic complain from feeling of pressure and heaviness in the vagina, low back pain, sensation and awareness of her cervix protrude from her vulva when straining. The Obstetricians diagnosed this case.

a. Determine the diagnosis of this case and define it?

Genital prolapse

Genital prolapse is defined as descent of one or more of the genital organs below their normal position

b. Which degree of this case?

Second degree: The cervix protrudes from the vulva on straining.

c. How to prevent this medical condition (diagnosis) for females during female life cycle?

. 1-Prophylactic treatment:

Prevention during the ante natal period: (from conception to until birth)

- 1. Education about importance of good ante natal care
- 2. Examination general, local and ultrasound and urine & blood analysis Good balanced diet hygiene- rest-sleep-immunization.
- 3. The importance of family planning after birth and exercise.
- 4. Avoid health hazards and treatment chronic anemia.

Prevention during labour

First stage

- 1. Avoid straining.
- 2. Bladder & rectum empty.

Second stage: - Avoid voluntary bearing down, Avoid forceps application or breech extraction before full cervical dilation.

Third stage: A void fundal pressure for delivery of the placenta.

Prevention during puerperium:

- 1. Frequent emptying of the bladder.
- 2. Kegel's exercises for the pelvic floor muscle.
- **3.** Ring pessary for 2 months of prolapse is diagnosed within 6w.

Prevention during hysterectomy:

By suturing the uterosacral & round ligaments t the vaginal vault.

Prevention during post natal period:

- 1. Emptying bladder & rectum frequently.
- 2. Early amputation after labor.
- 3. Kegel's exercise should be done.
- 4. Good balanced diet and good hygienic care.
- **5.** Proper family planning.

Prevention during menopasue

- 1. Estrogen replacement therapy.
- 2. Kegel's exercise.
- 3. Frequency emptying bladder.
- 4. Good management of infection.
- 5. Treatment chronic disease which causes \(\) intra abdominal pressure.
- 6. Good hygienic care & sleep & rest.
- 7. If hysterectomy is done the ligament of mackenrod's and uterosacral ligament muscles should be sutured in vaginal vault.

8. Avoid sleep in supine position while the bladder is full.

11-palliative treatment:

- 1. by wearing a pessary is indicated in the following conditions:
- 2. *light degrees of prolapse in young patient.
- **3-** Operation should be postponed until the woman has had a sufficient number of children as long as the symptoms are mild.
- **4-** The pessary is worn until the end of the fourth month when the size of the uterus will be sufficient to prevent its descent.

Good Luck

With Best Wishes

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