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Using Calculator (No)

University of
Palestine



Final Exam
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Total Grade:----/60

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Using Dictionary (No)

1- MCQ (one mark for each):

1- Which of the following amounts of blood loss following birth marks the criterion for describing postpartum hemorrhage?

- A. More than 200 ml
- B. More than 300 ml
- C. More than 400 ml
- D. More than 500 ml

2-Primary post-partum hemorrhage is associated with:

- A. Multiple pregnancies.
- B. Retained placenta.
- C. Polyhydramnios.
- D. All of the above.

3- Secondary Postpartum haemorrhage:

- A. Is bleeding in excess of 500 ml. in the first six weeks after delivery of the placenta
- B. Not recur subsequent pregnancies
- C. Is usually due to an underlying clotting defect
- D. Is always revealed

4- When the uterus is firm and contracted after delivery but there is vaginal bleeding, the nurse should suspect:

- A. Laceration of soft tissues of the cervix and vagina
- B. Uterine atony
- C. Uterine inversion
- D. Uterine hypercontractility

5- The most common cause of early pregnancy loss is:

- A. Chromosomal anomalies.
- B. Uterine anomalies.
- C. TORCH infection.
- D. Diabetes Mellitus

6- Which of the following signs will distinguish threatened abortion from inevitable abortion?

- A. Severity of bleeding
- B. Dilation of the cervix
- C. Nature and location of pain
- D. Presence of uterine contraction

7- A client 14 week's pregnant come to emergency room with signs of abortion, when taking history she say that this is her third recurrent abortion, the nurse will document these finding as:

- A. Threatened abortion
- B. Inevitable abortion
- C. habitual abortion
- D. Missed abortion

8- All are signs and symptoms of amniotic fluid embolism except:

- A. Dyspnea and cyanosis
- B. Cardiac arrest
- C. Convulsion
- D. Hypertension

9- The best treatment for a patient with uterine rupture is:

- A. Taking blood sample
- B. Preparing the patient to CS
- C. Induce labor by oxytocin
- D. Notify the doctor immediately

10- We can say that the labour is prolonged if it lasts:

- A. 12 hours
- B. 18 hours
- C. 24 hours
- D. 3 hours

11- All these are signs of obstructed labour except:

- A. No engagement despite of good contraction
- B. The cervix dilated rapidly
- C. Dehydration
- D. Retraction ring is seen

12- The most common complications for the prolonged labor are:

- A. Edema and laceration
- B. Uterine prolapse
- C. Fetous head compression and hypoxia
- D. All the above

13- The lochia on the first few days after delivery is characterized as:

- A. Whitish with some mucus
- B. Reddish with some mucus
- C. Pinkish with some blood clots
- D. Serous with some brown tinged mucus

14- Postpartum blues is said to be normal provided that the following characteristics are present. These are:

1. Within 3-10 days only
2. Woman exhibits the following symptoms- episodic tearfulness, fatigue, poor appetite
3. No treatment is needed.

- A. 1 and 2
- B. 2 only
- C. 2 and 3
- D. All of the above

15- Upon assessment the nurse found the following: fundus at 2 fingerbreadths above the umbilicus, last menstrual period (LMP) 5 months ago, fetal heart beat (FHB) not appreciated. Which of the following is the most possible diagnosis of this condition?

- A. Hydatidiform mole
- B. Missed abortion
- C. Pelvic inflammatory disease
- D. Ectopic pregnancy

16- Which of the following signs and symptoms will most likely make the nurse suspect that the patient is having hydatidiform mole?

- A. Bleeding
- B. Enlargement of the uterus than expected
- C. Absence of fetal parts
- D. All the above

17- The most common feature of Ectopic pregnancy is:

- A. Acute abdominal pain.
- B. Amenorrhea.
- C. Fainting attack.
- D. Vaginal bleeding.

18- Which of the following is described as abnormal implementation of a placenta during the second half of pregnancy, usually with hemorrhage?

- A. Placenta previa
- B. Ectopic pregnancy
- C. Incompetent cervix
- D. Abruptio placenta

19- Complications of abruptio placenta are except:

- A. DIC.
- B. Renal failure.
- C. Still birth.
- D. Congenital anomaly.

20- A pregnant lady came to emergency room on term with sever vaginal bleeding the action will be:

- A. The internal exam is done only at the delivery room under strict asepsis and readiness for any emergency.
- B. The preferred manner of delivering the baby is vaginal.
- C. An emergency delivery set for vaginal delivery must be made ready before examining the patient.
- D. Internal exam must be done following routine procedure.

21- In placenta praevia centralis, the placenta is found at the:

- A. Internal cervical os partly covering the opening
- B. External cervical os slightly covering the opening
- C. When the placenta is at the edge of the internal os.
- D. Lower portion of the uterus completely covering the cervix

22- Which of the following would the nurse assess in a client experiencing abruptio placenta?

- A. Bright red, painless vaginal bleeding
- B. Concealed or external dark red bleeding
- C. Palpable fetal outline
- D. Soft and non tender abdomen

23- A pregnant lady complaining of persistent vomiting and fatigue which affected her daily life, the true diagnosis will be:

- A. Ectopic pregnancy
- B. Hydatiform mole
- C. Hyperemesis gravidarum
- D. Abortion

24- When a pregnant woman goes into a convulsive seizure, the MOST immediate action of the nurse to ensure safety of the patient is:

- A. Apply restraint so that the patient will not fall out of bed
- B. Put a mouth gag so that the patient will not bite her tongue and the tongue will not fall back
- C. Position the mother on her side to allow the secretions to drain from her mouth and prevent aspiration
- D. Check if the woman is also having a precipitate labor

25- Which of the following would the nurse identify as a sign of PIH?

- A. Edema of the feet and ankles
- B. Vomiting early at morning
- C. Weight gain of 1 lb/week
- D. Early morning headache

26- The development of pre eclampsia in pre existing hypertension is increase in systole and diastole by:

- A. 20mmhg systole / 15 mm hg diastole
- B. 40mmhg systole / 10 mm hg diastole
- C. 30mmhg systole / 15 mm hg diastole
- D. 10mmhg systole / 5 mm hg diastole

27- The cardinal signs of pre- eclampsia are:

- A. Edema, nausea and hyper tension
- B. Hypertension, proteinurea and edema
- C. Hypertension, edema and pallor
- D. Proteinurea, tachycardia and edema

28- The major complication of eclampsia is:

- A. Convulsions, coma and Cerebral haemorrhage.
- B. Renal failure, Heart failure, and Liver failure.
- C. Disseminated intravascular coagulation, and Abruptio placenta.
- D. All the above.

29- Eclampsia is least likely to occur at:-

- A. Ante partum.
- B. After 48 hours post partum.
- C. Immediately post Partum.
- D. Intra partum.

30- The main reason for an expected increased need for iron in pregnancy is:

- A. The mother may have physiologic anemia due to the increased need for red blood cell mass and increase blood volume.
- B. The mother may suffer anemia because of poor appetite.
- C. The fetus has an increased need for RBC which the mother must supply.
- D. The mother may have a problem of digestion because of pica.

31- Which of the following is the most likely effect on the fetus if the woman is severely anemic during pregnancy?

- A. Large for gestational age (LGA) fetus
- B. Hemorrhage
- C. Intrauterine growth retardation (IUGR)
- D. Erythroblastosis fetalis

32- A gravida-cardiac mother is advised to observe bed rest primarily to

- A. Allow the fetus to achieve normal intrauterine growth
- B. Minimize oxygen consumption which can aggravate the condition of the compromised heart of the mother
- C. Prevent perinatal infection
- D. Reduce incidence of premature labor

33- All of the following are complication of cardiac disease for pregnant women except:

- A. Bacterial endocarditis
- B. Thrombo- emboli
- C. Cyanosis and Heart failure
- C. Postmaturity

34- The neonate of a mother with diabetes mellitus is prone to developing hypoglycemia because:

- A. The pancreas is immature and unable to secrete the needed insulin.
- B. There is rapid diminution of glucose level in the baby's circulating blood and his pancreas is normally secreting insulin.
- C. The baby is reacting to the insulin given to the mother.
- D. His kidneys are immature leading to a high tolerance for glucose.

35- Which of the following does NOT occur as a complication of diabetes mellitus in the pregnant patient?

- A. Increased risk of oligohydramnios
- B. Greater risk of fetal death in the third trimester
- C. Retinopathy and retinal detachment
- D. Increased risk of macrocosmic baby

36- Which of the following best describes preterm labor?

- A. Labor that begins after 24 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

37- To prevent preterm labor from progressing, drugs are usually prescribed to stop the labor. The drugs commonly given are:

- A. Magnesium sulfate and Terbutaline
- B. Prostaglandin and oxytocin
- C. Progesterone and estrogen
- D. Dexamethasone and prostaglandin

38- Which of the following is the nurse's initial action when umbilical cord prolapsed occurs?

- A. Begin monitoring maternal vital signs and FHR
- B. Place the client in a knee-chest position in bed
- C. Notify the physician and prepare the client for delivery
- D. Apply a sterile warm saline dressing to the exposed cord.

39- A patient who has had one previous Caesarean Section and is in labour:

- A. Should be delivered by Caesarean section immediately.
- B. Should not have an epidural anaesthetic.
- C. Should not be prescribed intravenous syntocinon to augment labour.
- D. Should have continuous mother and fetal monitoring.

40- When uterine rupture occurs, which of the following would be the priority?

- A. Limiting hypovolemic shock
- B. Obtaining blood specimens
- C. Put the mother in complete bed rest
- D. Inserting a urinary catheter

2- Match the following (one mark for each):

| | | |
|-----|-----------------------------|--|
| () | Postpartum | 1- Is metabolic disorder of carbohydrate during pregnancy. |
| () | Gestational diabetes | 2- The period following delivery of the baby and placenta to about 6-8 weeks. |
| () | Placenta previa | 3- Is an abnormal increase amount of amniotic fluid more than 1500 ml. |
| () | Therapeutic abortion | 4- is the presence of placental tissue over or adjacent to the cervical os. |
| () | Polyhydramnios | 5- termination of pregnancy related to medical reasons. |
| () | Induction of labor | 6- Is an operation done to deliver the women through the abdominal cavity. |
| () | Prolonged pregnancy | 7- Is the complete or partial separation of a normally situated placenta from its uterine site after the 28 th week of gestation until the 2 nd stage of labour? |
| () | Caesarean section | 8- Is the initiation of labour by artificial means, for medical reasons. |
| () | Abruptio placenta | 9- Or post term pregnancy which continuo for over than 42 weeks. |
| () | Cord prolapse | 10- The cord lies in front of the presenting part and the membranes are ruptured |

3- Answer the following questions (4 marks each):

1- What is the management of amniotic fluid embolism?

2- Mention causes of uterine rupture?

3- What is the clinical picture of placenta previa?

4- Mention 4 complications for polyhydramnios:

5- What is the nursing care after CS?

End of Questions
Good Luck