

**THE NATIONAL UNIVERSITY OF LESOTHO**

**BSC. NURSING AND MIDWIFERY EXAMINATION**

**NURS 519: LABOUR AND CHILD BIRTH**

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**JANUARY 2023**

**MARKS: 100**

**TIME: 3 HOURS**

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**INSTRUCTIONS:**

1. Answer **all** questions.
2. Write neatly and legibly.
3. Number your answers correctly.
4. Start a new question on a new page.
5. This paper consists of **nine (9)** pages including the cover page.
6. Figures in brackets indicate marks allocated.

**QUESTION 1.**

**Select the most appropriate answer for the following multiple choice questions.**

**Do not re-write the statements. E.g: 1.50.D**

- 1.1 Which of the following statements is true about restitution?
- A. Aids crowning.
  - B. Increases flexion of the head.
  - C. Reduces the incidence of shoulder dystocia.
  - D. Reduces internal rotation of the shoulders.
- 1.2 The weight of the uterus decrease to \_\_\_\_\_ grams immediately post Childbirth.
- A. 100.
  - B. 300.
  - C. 500.
  - D. 1000.
- 1.3 The placental site heals after 6 weeks by a process called:
- A. Autolysis.
  - B. Exfoliation.
  - C. Hydrolysis.
  - D. Ischaemia of the myometrium.
- 1.4 Which enzyme breaks the collagen fibers in the cervix?
- A. Amylase
  - B. catalase
  - C. Elastase
  - D. Hydrolase

- 1.5 The following are the composition of lochia serosa except:
- A. Epithelial cells.
  - B. Erythrocytes.
  - C. Serous exudate.
  - D. Shreds of degenerating decidua
- 1.6 Post childbirth, ovulation return is directly associated with high levels of:
- A. Oestrogen.
  - B. Relaxin.
  - C. Prolactin.
  - D. Progesterone.
- 1.7 Immediately after childbirth, Prolactin secretion \_\_\_\_\_ .
- A. Decreases.
  - B. Increases.
  - C. Is absent.
  - D. Remains constant.
- 1.8 Milk production is suppressed till puerperium by the high levels of :
- A. Oestrogen.
  - B. Relaxin.
  - C. Prolactin.
  - D. Progesterone.
- 1.9 For each 250ml blood loss, the haemoglobin drops by \_\_\_\_\_ g/dl.
- A. 1.
  - B. 2.
  - C. 3.
  - D. 4.

- 1.10 Failure of diuresis leads to:
- A. Brain damage.
  - B. Cardiac problems.
  - C. Hepatic problems.
  - D. Kidney failure.
- 1.11 Apgar score is done within the 1<sup>st</sup> minute after child birth to:
- A. Assess degree of asphyxia and determine need for immediate resuscitation.
  - B. Check the physical well-being of the neonate
  - C. Indicate the success of the infant's adaptation to extra uterine life.
  - D. Prevent both hypothermia and hypoglycaemia.
- 1.12 Apgar score is done at 5<sup>th</sup> minute after child birth to:
- A. Assess degree of asphyxia and determine need for immediate resuscitation.
  - B. Check the physical well-being of the neonate
  - C. Indicate the success of the infant's adaptation to extra uterine life.
  - D. Prevention both hypothermia and hypoglycaemia.
- 1.13 Pain during the first stage of labour is due to:
- A. Cervical dilatation.
  - B. Distention of the vagina and perineum.
  - C. Stretching of the lower uterine segment.
  - D. Uterine contractions.
- 1.14 The synthesis of prostaglandins E<sub>2</sub> and F is stimulated by which hormone?
- A. Adrenocorticotrophic hormone.
  - B. Corticotropin –Releasing Hormone.
  - C. Oestrogen.
  - D. Progesterone.

- 1.15 Moulding of grade 3+ is when the skull bones are:
- A. Touching each other.
  - B. Not touching.
  - C. Overlapping but can be separated with digital pressure.
  - D. Overlapping but cannot be separated with digital pressure.
- 1.16 Descent of the foetus into the lower uterine segment from 36<sup>th</sup> week of gestation:
- A. Brixton hicks.
  - B. Engagement.
  - C. Ferguson reflex.
  - D. Lightening.
- 1.17 Which of the following conditions is responsible for unstable lie during pregnancy and labour?
- A. Polydramnios.
  - B. Posterior position
  - C. Primigravida.
  - D. Small for gestational
- 1.18 The denominator in complete breech presentation is:
- A. Acromion process
  - B. Anus.
  - C. Buttocks
  - D. Sacrum.
- 1.19 Which of the following is a method of placental delivery?
- A. Controlled Cord Traction.
  - B. Manual aspiration.
  - C. Matthew's Duncan.
  - D. Schultze.

- 1.20 Intramuscular oxytocin is administered after:
- A. Birth of anterior shoulder.
  - B. Complete childbirth.
  - C. Exclusion of additional baby.
  - D. Expulsion of the placenta.

**Total marks = 20**

**QUESTION 2.**

- 2.1 Indicate whether the following statements are **TRUE** or **FALSE** with a rationale without re-writing the statements.

**E.g: TRUE. Newborns are identified at birth to avoid exchange of babies.**

- 2.1.1 Primigravidae have longer labour than multigravidae.
- 2.1.2 Postnatally, most women are immediately aware of a full bladder.
- 2.1.3 Constipation is common in women with sutured episiotomy postnatally.
- 2.1.4 Asthmatic patients are given Prostaglandin E<sub>2</sub> during induction.
- 2.1.5 During labour and postpartum period, white cell count is decreased.

**[10]**

**2.2 Differentiate by definition the following terms:**

- 2.2.1 Descent and Engagement.
- 2.2.2 Presentation and presenting part.
- 2.2.3 Cervical dilatation and effacement.
- 2.2.4 Fontanelle and suture.
- 2.2.5 Lanugo and vernix.

**[10]**

**Total marks = 20**

### QUESTION 3.

During admission into labour, Abdominal examination is one of the procedures performed. Study the figure 1 and answer questions 3.1 to 3.3.

**Figure 1.**



Right Leg

Left Leg

- 3.1 State the fetal position in figure 1 with justification. [4]
- 3.2 In this vertex presentation, with a well flexed head which two (2) diameters presents? [2]
- 3.3 During childbirth, which diameter will distend the vaginal orifice? [1]

**Contractions are also palpated during abdominal examination.**

- 3.4 Indicate how uterine contractions are described during labour. [6]
- 3.5 Describe any two (2) phases of a contraction. [2]

**Total marks = 15**

### QUESTION 4.

Describe any five (5) categories of disrespectful maternity care. [10]

**Total marks = 10**

### QUESTION 5.

Post-partum haemorrhage is one of the major leading causes of maternal mortality globally. It is categorized into two.

- 5.1 Distinguish by definition the two (2) categories of postpartum haemorrhage. [2]
- 5.2 Outline any two (2) contributing factors to post- partum haemorrhage. [2]
- 5.3 Describe the intranatal preventive measures for postpartum haemorrhage. Consider any **four (4)** points. [4]
- 5.4 Formulate one (1) **actual nursing diagnosis** for a client who had postpartum haemorrhage within a day post childbirth. Support the nursing diagnosis with four (4) nursing interventions. [7]

**Total marks = 15**

### QUESTION 6.

6.1 **Read the scenario below and respond to questions 6.1.1 to 6.1.3.**

Ms Thupa, Gravida 2, Para 1 was diagnosed with **POSTDATISM** and the plan is for her to be induced. **BISHOP SCORE** need to be done to determine whether her cervix is favourable for induction.

#### Vaginal examination findings:

Vagina was warm and moist, Cervix = soft, centrally located and 1.5cm long, Os = 4cm dilated, presenting part = vertex tipped at - 1. Fetal position = Unidentified, Membranes = Intact. Slight show seen on examination glove.



6.1.1 Copy and fill in the provided table based on the read scenario of Ms Thupa.

**(Place a tick on the right box)**

<b>FACTOR</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Cervical dilatation (1)</b>				
<b>Cervical effacement (2)</b>				
<b>Fetal station (1)</b>				
<b>Cervical consistency (1)</b>				
<b>Cervical position (2)</b>				

6.1.2 Provide the TOTAL SCORE: \_\_\_\_\_ **(1)**

6.1.3 What is the highest possible score? \_\_\_\_\_ **(1)**

6.1.4 Can Ms Thupa be induced? \_\_\_\_\_ **(1)**

6.2 Explain with a rationale **any five (5)** factors that retard uterine involution. **[10]**

**Total marks = 20**