



Academic Year 2020/2021	Critical Maternity and Gynecology Nursing theory (Nur306)
Second Term Exam	Third year (Credit hours)
Date: 19 / 6 / 2021	Total Marks: 50 marks
Time allowed: 2hours	Dr./ Seham Shehata Ibrahim Dr. / Maha Ramadan Ali

Answer the following

I- Choose the correct answer: (25 Marks)

1- One of the possible causes of fetal macrosomia is:	
a. Obese mother	b. Gestational diabetes
c. pregnancy induced hypertension	d. Genetic factor
2- Which is a contraindication for oxytocin induction?	
a. Fetal heart rate of 148 beats per minute	b. Clear draining liquor
c. Vertex Presentation	d. Maternal distress
3- Upon assessment the nurse found the following: fundus at 2 finger breadths above the umbilicus, last menstrual period 5 months ago, and fetal heart beat 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
4- A 39-year-old at 37 weeks gestation is admitted to the hospital with complaints of painless vaginal bleeding. Which is most likely causing this problem?	
a. Placenta previa	b. Abruptio placentae
c. vasa previa	d. hemorrhoids
5- Some of the products are expelled, but the placenta remains attached. Heavy bleeding and cramping doesn't subside until entire placenta is removed.	
a. habitual	b. missed
c. Incomplete.	d. complete
6-The most common indication for elective cesarean section	
a. Dystocia	b. Mal presentation
c. Diabetes	d.non of the above
7- After the diagnosis of hydatidiform mole all patients should have which of the following	
a. pregnancy tests every 2 to3 months for one year	b. A pregnancy within 1 year
c. A hysterectomy	d. immediate complete evacuation of the uterus
8- Interruption of early pregnancy is necessary for preserving a mother's life with cardiac disorder in which of the following	
a. Mitral stenosis	b. Pulmonary hypertension
c. Mitral valve prolapse	c. Ventricular septal defect
9- Which of the following procedures would be most helpful in managing a pregnant diabetic?	
a. Glucose tolerance test	Hb A1c test
c. Non stress test	d. all of above



10- which of the following drugs are usually prescribed to stop uterine contraction in preterm labor	
a- Magnesium sulfate and terbutaline	b. Prostaglandin and oxytocin
c. Progesterone and estrogen	d. Dexamethasone and prostaglandin
11- Which of the following best describes preterm labor	
a. Labor that begins after 20weeks gestation and before 37weeks gestation	b. Labor that begins after 15weeks gestation and before 37weeks gestation
c. Labor that begins after 24weeks gestation and before 28 weeks gestation	d. Labor that begins after 28weeks gestation and before 40 weeks gestation
12- The most common organism nowadays can cause puerperal sepsis is?	
a. Staph aureus	b. Anaerobic streptococcus
c. Hemolytic streptococcus	d. E-coli
13- Induced abortion is best termed as?	
a. One which happens naturally.	b. One which is made to happen.
c. one which of care following infection	d One which is made by a doctor for medical reasons.
14-Which of the following statements is true about a hydatidiform molar pregnancy?	
a. An ultrasound usually reveals a mass resembling a "cluster of grapes"result due to elevated HCG (human chorionic gonadotropin) hormone	b. Ahydatidiform molar pregnancy is reported to cause malignancy in approximately 60% of cases.
A molar pregnancy is a type of ectopic pregnancy in need of dilation and curratage to prevent internal hemorrhaging or possible hysterectomy.	d. The cause of a molar pregnancy is due multiple ovum becoming fertized and coalescing to form a cluster of atypical cells containing a haploid number of chromosomes.
15- Complete centralize placenta previa can only be managed by?	
a. Caesarean section	b. Vaginal delivery.
c. Induction of labor.	d. Vacuum delivery.
16- Postpartum hemorrhage unresponsive to oxytocin and uterine massage is most likely due to?	
a. Vaginal laceration	b. Placenta accrete
c .Uterine atony	d. Ruptured uterus
17- Abortion is the termination of pregnancy before :	
a. 24 weeks gestation	b. 20 weeks gestation
c. 30 week gestation	d. 22 week gestation
18 – Retained placenta occur when:	
a. Part of placenta attaches to the uterine walls	b. the placenta fails to deliver after birth
b. The placenta attaches to the myometrium	d. None of the above
19- At what point does preeclampsia develop into eclampsia?	
a. At the progression into seizures	b .When there is evidence of vascular dysregulation
c.At the initiation of kidney failure	d. When blood pressure exceeds 160/95 mmH
20- The most common cause of early postpartum hemorrhage	
a. Uterine atony	b. Retained placental fragments
c. Perineal laceration	d. all of above
21- A client is admitted with of Bp 160/110, proteinuria, and sever pitting edema. which of the following would be most important to include in the clients plan of care	
a. Daily weights	b. Seizure precaution
c. Right lateral position	d. Stress reduction



22- A 37 week pregnant patient is admitted with severe preeclampsia. The patient begins to experiences a tonic-clonic seizure. Which of the following would the nurse AVOID during the seizure?*	
a. Placing the patient in a supine position	b.Holding down the patient's head to prevent injury
c. Staying with the patient and activating the emergency response team	d. Providing 8 to 10 L of oxygen
23- A labor and delivery nurse is assessing a newborn infant and notes that the infant appears to be jaundiced. What is a possible cause for this condition?	
a. The mother has exposed the infant to an active genital herpes outbreak.	b. The mother had gestational diabetes causing jaundice of the infant
c. The infant is experiencing fetal alcohol syndrome, as the mother admitted to utilizing drugs and alcohol throughout the pregnancy.	d. The mother's blood is Rh negative and gave birth to her second Rh positive child without receiving Rhogam during the pregnancy
24- an excessive amount of glucose in the maternal blood that is transported to the fetus through the placenta causes:	
a. Macrosomia of the fetus and possible damage to arterial walls	b. Hypoglycemia of the fetus and possible damage to arterial walls.
c. Macrosomia of the fetus and no possible damage to arterial walls	d. Hypoglycemia of the fetus and possible respiratory distress syndrome.
25- Which of the following is the most common etiologic factor for ectopic pregnancy?	
a. Genetically abnormal embryos	b. History of pelvic inflammatory disease (PID)
c. Prior abortion	d. Prior tubal surgery

IV – Give short account on the following: -

(20 marks)

- Complication of RH incompatibility (4 marks)
- Effect of pregnancy on diabetes (4 marks)
- Nursing management of placenta previa. (4 marks)
- Causes of puerperal sepsis (4 marks)
- Nursing diagnosis and intervention of secondary postpartum hemorrhage (4 marks)

V- Read this situation carefully and answer the following questions (5Marks)

Situation 1:

Hadeer delivered a healthy baby boy this morning at about 9 am. The birth weight was 4.5kgs, breastfeeding was initiated soon after delivery. After completion of the fourth stage, she started bleeding in the recovery room. and. Bb 80/60, pulse100 b/m, pallor change perianal every 2 hours

Questions

Q.1 What the diagnose for Hadeer?



Q.2 describes the possible common causes for this case?

Q.3 describes the complication for M. Hadeer

Good luck

Dr. / Seham Shehata

Dr. / Maha Ramadan Ali