



جامعة بورسعيد  
كلية التمريض

Academic Year 2021/2022	Obstetrics and Gynecology Nursing ( cod Nur304)
Final Exam	Third year (Credit hours)
Date: 11 / 1 /2022	Total Marks: 100 Marks
Time allowed: 3hours	Dr: Nagat salma - Dr: Manar Fathy -Dr/ Nour Elhoda

I- Choose the best correct answer: (30 Marks)

1- Which of the following represents the correct order of events during the menstrual cycle?

- a- FSH rise, ovulation, LH surge, luteal phase, menstruation
- b- Luteal phase, menstruation, FSH rise, ovulation, follicular phase.
- c- Follicular phase, luteal phase, FSH rise, ovulation, menstruation
- d- Menstruation, FSH rise, LH surge, ovulation, luteal phase.

2- When performing a pelvic examination, the nurse observes a red swollen area on the right side of the vaginal orifice. The nurse would document this as enlargement of which of the following?

- a- Clitoris.
- b- Parotid gland
- c-Skenes gland.
- d- Bartholins gland

3-The female organ that is structurally comparable with the male penis is the:

- a- Hymen.
- b- Uterus.
- c- Vestibule.
- d- Clitoris.

4- Which hormone is the corpus luteum responsible for producing?

- a- Estrogen.
- b- Progesterone
- C- Follicle-stimulating hormone.
- d- Luteinizing hormone.

5- During the follicular phase, the dominant follicle arises in response to which of the following?

- a- LH.
- b- HCG
- c- FSH.
- d- Androgens .

6- Where are luteinizing hormone (LH) and follicle stimulating hormone (FSH) produced?

- a- Hypothalamus.
- b- Anterior pituitary.
- c- Posterior pituitary.
- d- Adrenal glands.

**7- 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.

**8- During the 7th & 8th month of pregnancy, a primigravida should visit the antenatal.**

- a- One Week.
- b- Two weeks
- c- Three Weeks.
- d- Four weeks.

**9- Which of the following would the nurse identify as a probable sign of pregnancy?**

- a- Nausea and vomiting
- b- quickening .
- c- Skin pigmentation changes.
- d- All the above.

**10- Which one of the following is the primary source of progesterone in the later stages of pregnancy?**

- a- Fetus
- b- Corpus luteum
- c- Placenta
- d- Endometrium

**11- When preparing to listen to the fetal heart rate at 12 weeks' gestation, the nurse would use which of the following?**

- a- Stethoscope placed midline at the umbilicus.
- b- Doppler placed midline at the suprapubic region
- c- Fetoscope placed midway between the umbilicus and the xiphoid.
- d- External electronic fetal monitor placed at the umbilicus.

**12- How many calories should a woman eat each day during pregnancy?**

- a- Less than 200 kCal
- b- An additional 200 kCal in the third trimester onl
- c- An additional 200 kCal throughout pregnancy
- d- No change from pre-pregnant levels

**13- What the EDD for women her LMP started on January 14 and ended on January 20. Using Nageles rule?**

- a- Sep-27
- b- Oct-21
- c- Dec-27
- d- Nov-07

**14-The average length of the umbilical cord in human is**

- a- 35 -40 cm.
- b- 50-55 cm
- c- 30 -35 cm
- d- 40 -45 cm.

**15-Which of the following statements best describes hyperemesis gravidarum?**

- a- A condition in pregnancy lasting the entire length of the pregnancy
- b- Mild nausea sometimes accompanied by vomiting
- c- Sever **nauseas and** vomiting
- d- All of these answer

**16- The time between the beginning of one uterine contractions to the end of the same contraction is called ?**

- a- Intensity
- b- Interval
- c- **Duration.**
- d- Frequency.

**17- During which of the following stages of labor would the nurse assess “crowning ”?**

- a. First stage
- b. **Second** stage
- c-Thirdstage
- d- Fourth stage.

**18- Region bounded by the anterior fontanelle, the posterior fontanelle and the parietal eminences**

- a- Mentum
- b- Occiput
- c- **Vertex**
- d- synciput

**19- During stage 3 of labor, the nurse notes a gush of blood and that the uterus changes shape from an oval shape to globular shape. This indicates?**

- a- Postpartum hemorrhage
- b- Imminent delivery of the baby
- c- **Signs of placental** separation
- d- Answers B and C

**20 - The primary power involved in labor and delivery is:**

- a- Bearing down ability of mother
- b- Cervical effacement and dilatation.
- c- **Uterine contraction.**
- d- Valsalva technique.

**21- The structure in the fetus that carries oxygenated blood from the umbilical vein to the inferior venacava is the:**

- a- Ductus arteriosus
- b- **Ductus venosus**
- c-Foramen ovale
- d. Pulmonary artery

**22- Early ambulation after delivery is encouraged to prevent-**

- a- Normal lochial drainage.
- b- Involution of uterus
- c- Reduction of edema.
- d- **Deep vein thrombosis**

**23-when preparing a woman who is 2 days postpartum for discharge, recommendations for which of the following contraceptive methods would be avoided?**

- a- Diaphragm
- b- Female condom
- c- **Oral** contraceptives
- d- Rhythm method

**24- Before assessing the postpartum client's uterus for firmness and position in relation to the umbilicus and midline, which of the following should the nurse do first?**

- a- Assess the vital signs
- b- Administer analgesia
- c- Ambulate her in the hall
- d- **Assist her to urinate**

**25- 11-A postpartum client has a temperature of 38.6°C, with a uterus that is tender when palpated, remains unusually large, and not descending as normally expected. Which of the following should the nurse assess Next?**

- a- **Lochia**
- b- Breasts
- c-Incision
- d- Urine

**26- For the client who is using oral contraceptives, the nurse informs the client about the need to take the pill at the same time each day to accomplish which of the following?**

- a-Decrease the incidence of nausea
- b- **Maintain** hormonal levels
- c- Reduce side effects
- d- Prevent drug interactions

**27- Which of the following is a natural defense mechanism against ascent of infection to genital tract**

- a- Decidua.
- b- Thin vaginal epithelium
- c-Periodic **endometrial shedding** during menstruation
- d.vaginal ph higher than 4.5.

**28- For which of the following clients would the nurse expect that an intrauterine device would not be recommended?**

- a- Woman over age 35  
c- Promiscuous young adult  
b- Nulliparous woman  
d- Postpartum client

**29-Oral contraceptive pills are of different types. Which type is most appropriate for mothers who are breastfeeding?**

- a-Estrogen only  
c- Mixed type- estrogen and progesterone  
b -Progesterone only  
d- 21-day pills mixed type

**30- A woman is considered to be menopause if she has experienced cessation of her menses for a period of:**

- a- 6 months  
c- 18 months  
b- 12 months  
d- 24 months

**II – Answer the following questions: -**

**(45 Marks)**

**1- What are the nursing care of monilial Vaginitis (10\_Marks)**

- Relieve symptoms
- Heal lesions
- Reduce frequency of recurrent episodes
- Reduce viral transmission
- Patient support and counseling

**Oral Antiviral Therapy**

**2-Enemorate the hormonal contraceptive methods and list the indication and contra indication of one type? (10 marks)**

**hormonal contraception**

**Hormonal contraceptive entails combined types “estrogen and progesterone “ , OR progesterone only types.**

oral contraceptives

Oral contraceptives may be combined OR progesterone only .

(1) combined oral contraceptive

**The most widely used type and contain both estrogen and progesterone contraception emergency**

- If you have had unprotected sex in the previous 7 days and you have missed two or more pills (i.e. more than 48 hours late) in the first week of a pack, you may need emergency contraception

**: advantages of COCs**

- . Easy , cheap , available method
- . Relatively safer than other method of contraception
- . % Highly effective : success rate up to 99
- . Reversible , Rapid return of fertility

**indication of COCs**

- . Contraception .
- . Endometriosis .
- . Pre-Menstrual syndrome .
- . Hirsutism .

**Functional ovarian cyst**

- . Not affecting sexual intercourse
- use is controlled by the woman : Not needing Medical supervision

**: indication of POPs**

- . Contraception in lactating mother .
- . Contraception in mother > 35 yrs .
- . When COCs is contraindicated .

**: Contraindications of POPs □**

**Pregnancy OR History of Ectopic Pregnancy .**

- . Un explained vaginal bleeding OR Breast cancer .
- . Gall bladder disease , active viral hepatitis , liver cirrhosis, liver tumor .
- 4. Receiving antibiotics or anti- epileptic.

**3- Designed nursing care plane for women with gestational diabetes (10 marks)**

**5- what are causes of infertility (15 Mark).**

**Causes of male infertility**

- Abnormal spermatogenesis
- Abnormal pathway
- Coital erroes
- Inability of the sperm to fertilize the ovum
- Congenital:undescended testes
- Infection :mumps ,TB,measles
- Vascular:varicocele

- Affect sperm motility
- Trauma in tests
- Neoplasma
- Occupation and hot climate
- Endocrine pituitary disturbances and tumors

Some men experience ejaculation problems that can make it difficult for them to ejaculate. Other ejaculation problems include retrograde ejaculation - where semen is ejaculated into bladder premature ejaculation - where ejaculation occurs too quickly

### **Female Factor**

- 1-Ovarian factors
- 2. Cervical factor.
- 3. Uterine factors
- 4. Tubal factor.
- (Premature ovarian failure - where a woman's ovaries stop working before she is 40 years of age.
- Polycystic ovary syndrome (PCOS) - a condition that makes it more difficult for ovaries to produce an egg.
- Thyroid problems - both an overactive thyroid gland (hyperthyroidism) and an underactive thyroid gland (hypothyroidism) can prevent ovulation.
- some chronic conditions, such as cancer, or AIDS, can prevent ovaries from releasing eggs.
- Cushing's syndrome - a rare hormonal disease that can prevent ovaries from releasing an egg.
- **Pelvic surgery**
- Pelvic surgery can sometimes cause damage and scarring to the fallopian tubes.
- **Cervical surgery**

- Cervical surgery can sometimes cause scarring, or shorten the cervix (the neck of the womb).
- **Cervical mucous defect**
- When you are ovulating, the mucus in your cervix becomes thinner so that sperm can swim through it more easily. If there is a problem with your mucous, it can make it harder to conceive

**111- Read this situation carefully and answer the following questions**

**(25 Marks)**

A 27-year-old female who is pregnant in 40 weeks and 2 days, attendant the obstetrics ward at 11 Pm with contractions occurring once every 10 minutes. The patient is checked in, vital signs are normal, fetal heart tones are normal. at 4 am the patient reports she is feeling contractions every 2 minutes now and she thinks her water may have broken.

Q1- How can the nurse find out if the patient's water has broken?(5marks)

Check for fluid exiting the vagina, use a Nitrazine test to evaluate if it is amniotic fluid or urine or vaginal discharge. if the membranes have ruptured the color should be Blue/purple

Q2- Explain the nursing intervention of this woman? (10marks)

**Observation:-**

- **Close and frequent observation is very important for both the woman and fetus.**
- **The F.H.R. should be checked after 2-3 contractions. If fetal distress is suspected, check it after each contraction.**
- **The maternal pulse should be taken every 10 minutes.**

**The strength and frequency of the contractions**



- Primigravida is transferred to the delivery room when the cervix is fully dilated and the presenting part is seen (head is seen from the perineum) .
- Multipara is transferred when the cervix is 7 - 8 cm (3-4 fingers).
- The woman lies on the delivery table in one of the following position:
- Dorsal or Lithotomy position:

the woman lies on her back and puts her legs up into the stirrups or leg hold .

- **Preparation of the delivery room:**
- Delivery room should always be ready for the conduct of labor , delivery trolley and emergency drug should be ready.
- The delivery room should be warm enough for the infant.
- All equipment needed for labor and infant's care is present .
- Enough privacy should be provided.
- Strict aseptic technique should be maintained.

.Place the woman on the delivery table and put her legs in the holders

The legs and thighs should be dressed with sterile leggings, Sterile towels should be laid over the abdomen and under buttocks leaving only the .vulva and perineum exposed

Empty the bladder, Swab external genitalia

- The attendant should put on a cap and mask, wash and scrub hands and put on a sterile gown and gloves.

Q3- List signs and symptoms of 2<sup>nd</sup> stage of labor? (5 marks)

- **uterine contraction**

Become stronger, last stronger and more frequent, together with full cervical dilatation and effacement , ( Contractions will last about 45-90 seconds with a 3-5 minute rest in between )

- **Bearing down or push**

She will have a strong natural urge to push , this will result in contractions of the abdominal muscles and diaphragm .

- **Rupture of bag of water**

The membrane should have ruptured by the end of the first stage..

- **Displacement of the pelvic floor**

The bladder is drawn where there is less risk of its being injured by the descending head , and more space is available in the pelvis for the passage of the fetus .

- **Cramps** in the legs due to pressure of the descended presenting part on the sacral nerves.

Q4- List signs of separation of placenta? (5 marks)

The uterus becomes globular in shape and firmer.

b. The uterus rises in the abdomen.

c. The umbilical cord descends three (3) inches or more further out of the vagina.

d. Sudden gush of blood.

e. Loss of pulsation of cord

GOOD LUCK

**Dr: Nagat salma**

**Dr: Manar Fathy**

**Dr/ Nour Elhoda**

