

MIZORAM PUBLIC SERVICE COMMISSION

TECHNICAL COMPETITIVE EXAMINATIONS FOR RECRUITMENT TO LECTURER (OBSTETRIC & OBSTETRICAL NURSING/GYNAECOLOGICAL NURSING) UNDER HEALTH & FAMILY WELFARE DEPARTMENT, JANUARY, 2017.

OBSTETRIC/OBSTETRICAL/GYNAECOLOGICAL NURSING PAPER - I

Time Allowed : 2 hours

Full Marks : 200

All questions carry equal marks of 2 each.

Attempt all questions.

1. Which one of the following factors does NOT put a woman at increased risk of obstetric complications?
 - (a) Both extremes of maternal age
 - (b) One previous Caesarean section
 - (c) A history of subfertility, with use of fertility drugs or assisted conception
 - (d) Family history of diabetes in a second-degree relative
2. The statements below refer to booking visit investigations—which is true?
 - (a) An ultrasound scan between 11 and 13+6 weeks should be offered.
 - (b) Screening for infections implicated in preterm labour, e.g. Chlamydia and bacterial vaginosis, are offered routinely.
 - (c) Best screening for chromosomal abnormalities includes AFP, oestriol and β -hCG as part of the combined test.
 - (d) Blood grouping is not performed until 28 weeks.
3. The Physiological changes that occur during pregnancy is
 - (a) Increase of blood volume by 100%
 - (b) White blood cell
 - (c) Cardiac output 40% decrease
 - (d) Peripheral resistance 50% increase
4. Screening versus diagnostic tests: which of the following is true?
 - (a) A screening test is performed on women with a 'high risk' to confirm or refute the possibility of a disorder
 - (b) A diagnostic test is available for all and gives a measure of the risk of being affected by a particular disorder
 - (c) Specificity is the probability that a subject who is negative will not have the condition.
 - (d) Sensitivity is the proportion of subjects with the condition classified as screen positive for the condition.
5. Which of the following is the Structural abnormalities identifiable as part of antenatal care:
 - (a) Preconceptual folic acid supplementation for 3 months (0.4 mg/day) reduces the incidence of neural tube defects and should be taken by all women considering pregnancy.
 - (b) Diaphragmatic hernias rarely result in the fetus having pulmonary hypoplasia.
 - (c) Fetal hydrops is common
 - (d) Cardiac anomalies occur in 3% of pregnancies.

6. A number of terms relating to concerns regarding fetal well being is
 - (a) Intrauterine growth restriction (IUGR) can only be present if the fetus is small for dates
 - (b) Small for dates (small for gestational age, SGA)
 - (c) By definition, 10% of babies are below the tenth centile and 3% below the third, for a particular gestation.
 - (d) None of the above
7. Which statement is appropriate regarding Ultrasound monitoring of twin pregnancy:
 - (a) All twins should have serial ultrasound scans, as a minimum at 28, 32 and 36 weeks
 - (b) In twin–twin transfusion syndrome (TTTS) the ‘donor’ twin gets volume overload.
 - (c) In TTTS, the ‘recipient’ twin is volume depleted and develops anaemia, IUGR and oligohydramnios
 - (d) Chorionicity is most accurately ascertained at the anomaly scan
8. Physiological change in the puerperium: which one of the following is false?
 - (a) Within 10 days the uterus is no longer palpable abdominally.
 - (b) The internal os of the cervix is closed by 3 days
 - (c) Menstruation is usually delayed by lactation, but occurs at about 6 weeks if the woman is not lactating.
 - (d) Bleeding usually stops within 10 days
9. The changes that occur during physiology of lactation is
 - (a) Prolactin from the posterior pituitary gland stimulates milk secretion
 - (b) Rapid declines in oestrogen and progesterone levels occur after birth.
 - (c) Oxytocin from the anterior pituitary gland stimulates ejection in response to nipple sucking
 - (d) None of the above
10. Postnatal contraception is usually started within ?
 - (a) Contraception is usually started 1-2 weeks after delivery
 - (b) Contraception is usually started 3–4 weeks after delivery
 - (c) Contraception is usually started 4–6 weeks after delivery
 - (d) Contraception is usually started 7–8 weeks after delivery
11. Which of the statement is Maternal mortality:
 - (a) Maternal death is death of a woman during pregnancy or within 42 days of its cessation, from any cause related to or aggravated by pregnancy or its management, but not from accidental or incidental causes.
 - (b) Late maternal death is when a woman dies from similar causes, but specifically in the third trimester
 - (c) ‘Direct’ deaths result from obstetric complications
 - (d) ‘Incidental’ deaths are those that would have occurred irrespective of pregnancy
12. Consent and confidentiality: which three of the following are true?
 - (a) Minor risks need not be discussed. Major risks must be discussed even if they are rare
 - (b) The doctor has a moral, professional, contractual and legal duty to maintain patient confidentiality.
 - (c) Details can be disclosed to a close relative, without the patients consent.
 - (d) Confidentiality can be breached in exceptional circumstances where the health and safety of others would otherwise be at risk.

13. Which of the following is third generation intrauterine device
- (a) Cu-7 (b) CuT 200
(c) CuT 380A (d) progestasert
14. The protective effects of breast milk are known to be associated with
- (a) IgM antibodies (b) Lysozyme
(c) Mast cells (d) IgA antibodies
15. In a woman using an intrauterine contraceptive device (IUCD) an intrauterine pregnancy occurs and the IUCD threads are visible, what is the reason to recommend removal of the device
- (a) to prevent the risk of subsequent septic abortion and preterm labour
(b) to prevent congenital abnormality of the newborn
(c) to prevent postpartum haemorrhage
(d) to prevent perforation
16. Methods of prenatal testing for congenital abnormalities is :
- (a) Nuchal translucency (the space between skin and soft tissue overlying the cervical spine), measured between 11 and 13+6 weeks, is a screening test for chromosomal abnormalities such as trisomy 21
(b) When the fetus has an open neural tube defect (NTD), maternal serum AFP levels are usually raised. As such, this can be used as a diagnostic test for NTD.
(c) Amniocentesis is safer than CVS before 12 weeks
(d) None of the above
17. The following are the changes that occurs in the uterus during pregnancy except
- (a) uterine cavity enlarges by 500-1000 times
(b) body of the uterus enlarges more than the fundus
(c) utero-placental blood flow increases to about 500-600 ml/min
(d) during braxton Hicks contraction, there is stagnation of blood in the intervillous space
18. Number of antenatal visits during pregnancy should be minimum
- (a) 4 times (b) 8 times
(c) 12 times (d) 16 times
19. Gestational age is evaluated from
- (a) calculation from LMP (b) height of the uterus
(c) counting from the date of ovulation (d) counting from the date of fertilization
20. Absolute (positive) signs of pregnancy are
- (a) abdominal enlargemet (b) braxton Hicks contraction
(c) ballotement (d) audible FHS
21. The celient feature of Braxton Hicks contraction
- (a) regular & infrequent (b) regular & spasmodic
(c) irregular & painless (d) irregular & infrequent
22. Recommended approximate requirement of calcium for women weighing 50 kg during second half of pregnancy is
- (a) 400mg (b) 600mg
(c) 800mg (d) 1000mg

23. Induction of labour is less likely to be successful in all except
(a) Preterm pregnancy (b) Elderly primigravida
(c) Prolonged retention of IUD fetus (d) Bishop's score > 5
24. The process by which a viable product of conception is expelled by the mother is called
(a) labour (b) presentation
(c) attitude (d) denominator
25. The following are the physiologic changes during late pregnancy except
(a) blood volume is increased (b) cardiac output is increased
(c) arterial PO₂ is decreased (d) tidal volume is increased
26. The fully mature ovum measures about
(a) 120 microns (b) 130 microns
(c) 140 microns (d) 150 microns
27. Morula (12-16 cell stage) enters the uterine cavity on
(a) 2nd day (b) 3rd day
(c) 4th day (d) 5th day
28. Volume of blood in a mature placenta approximates
(a) 300ml (b) 500ml
(c) 700ml (d) 1000ml
29. The amniotic fluid is completely changed and replaced in every
(a) 2 hours (b) 3 hours
(c) 4 hours (d) 5 hours
30. The peak level of serum beta HCG in normal pregnancy is found between
(a) 7-7 weeks (b) 8-10 weeks
(c) 12-16 weeks (d) 37-40 weeks
31. Intrauterine pressure is highest in
(a) first stage of labour (b) second stage of labour
(c) third stage of labour (d) fourth stage of labour
32. Contraction stress test is used to detect
(a) hydramnios (b) fetal hypoxia
(c) placenta previa (d) head compression
33. Study of fetal parts in first trimester is best done with least radiation hazard
(a) X-ray (b) Pelvimetry
(c) C.Tscan (d) Ultrasound
34. Jacquemier's sign is
(a) bluish discolouration of vagina in early pregnancy
(b) softening of cervix
(c) regular painless contractions of gravid uterus
(d) nausea & vomiting in early pregnancy

35. The total calorie requirement during pregnancy is
(a) 2500kcal (b) 3000kcal
(c) 3500kcal (d) 4000kcal
36. The moment in pregnancy when the pregnant woman starts to feel or perceive fetal movements is called
(a) lightening (b) quickening
(c) flexion (d) attitude
37. The vaccines contraindicated during pregnancy
(a) rubella (b) measles
(c) mumps (d) all of the above
38. Causes of hydramnios are all except
(a) anecephaly (b) spina fida
(c) diabetes mellitus (d) hypothyroidism
39. Pregnancies should be strongly discontinued in a woman who has
(a) atrial septal defect (b) patent ductus arteriosus
(c) Eisenmenger syndrome (d) rheumatic mitral stenosis
40. Regarding fetal monitoring by cardiotocography
(a) a sinusoidal FHR pattern is almost always associated with fetal hypoxia
(b) fetuses with congenital abnormalities always exhibit abnormal FHR patterns
(c) deceleration in the second stage is always pathological
(d) decreased base line variability may be due to drugs .
41. The karyotype of a patient with androgen sensitivity syndrome is
(a) 46XX (b) 46XY
(c) 47XXY (d) 45XO
42. The best period of gestation to carry out chorion villous biopsy for prenatal diagnosis is
(a) 8-10 weeks (b) 10-12 weeks
(c) 12-14 weeks (d) 14-16 weeks
43. All are the high risk pregnancies associated with macrosomia except
(a) maternal obesity (b) prolonged pregnancy
(c) previous history of large infant (d) short stature
44. Which of the following is the investigation of choice in a pregnant lady at 18 weeks of gestation with past history of delivering baby with Down's syndrome ?
(a) triple screen test (b) amniocentesis
(c) chorionic villous biopsy (d) ultrasonography
45. The first stage of labour is said to be completed
(a) when the membrane ruptures (b) when the cervix fully dilated(10cm)
(c) when active phase of labour begins (d) with the appearance of bearing down efforts
46. The first step to be done when head of the baby is delivered
(a) clearing the air passage (b) placing the baby on a tray
(c) Apgar rating (d) clamping the umbilical cord

47. The average blood volume loss during normal delivery is approximately
(a) 700ml (b) 500ml
(c) 250ml (d) 100ml
48. When the maximum diameter of the head stretches the vulval outlet without any recession of the head even after the contraction is over is called
(a) quickening (b) crowning
(c) lightening (d) descending
49. The duration of second stage of labour in primigravida mother is
(a) 12-14 hours (b) 14-16 hours
(c) 16-18 hours (d) 18-20 hours
50. Delivery of the head controlled by one hand
(a) to maintain flexion (b) to prevent early extension of the head
(c) to prevent perineal and vulval tears (d) all the above
51. The biological half life of the drug oxytocin is
(a) 1-2 minutes (b) 3-4 minutes
(c) 5-6 minutes (d) 7-8 minutes
52. Administration of Intravenous ergometrine with the delivery of the anterior shoulder is contraindicated in all except
(a) Preterm delivery (b) Organic heart lesion
(c) Severe hypertension (d) Rh negative mother
53. The drug which doesn't cross the placenta to the fetus is
(a) Warfarin (b) Heparin
(c) Digoxin (d) Aspirin
54. Drugs contraindicate in breast feeding
(a) warfarin (b) metronidazole
(c) carbamazepine (d) none of the above
55. Initiation of breast feeding after delivery should be done within
(a) one hour (b) one & half hours
(c) two hours (d) two-three hours
56. The normal temperature and respiration of the newborn is
(a) 36.5 -37.5 degree celcius & 40-60breaths /min
(b) 38.5 -39.5 degree celcius & 60-80breaths /min
(c) 40.5 -42.5 degree celcius & 70-80breaths /min
(d) 44.5 -45.5 degree celcius & 80-900breaths /min
57. The frequency of breast feeding per 24 hours
(a) 8 times (b) 10 times
(c) 12 times (d) 14 times
58. Commonest causes of first trimester miscarriage is
(a) uterine malformation (b) fibriod
(c) cervical incompetence (d) chronic maternal illness

59. Elective time of circlage operation for mid-trimester recurrent abortion
- (a) around 8 weeks
 - (b) around 14 weeks
 - (c) around 20 weeks
 - (d) around 26 weeks
60. The best method of evacuation of a missed abortion in uterus of more than 12 weeks
- (a) oxytocin infusion
 - (b) intramuscular prostaglandins 15 methyl PGF₂α
 - (c) prostaglandin E1 vaginal misoprostol followed by evacuation of the uterus
 - (d) suction & evacuation
61. As regard to partograph all are correct except
- (a) detects dysfunctional labour early
 - (b) records events in pregnancy
 - (c) reduces caesarean section rate
 - (d) records uterine contraction
62. The most important factor in haemostasis following placenta separation
- (a) uterine contraction
 - (b) uterine retraction
 - (c) thrombosis
 - (d) myotamponade
63. Most common cause of first trimester abortion is
- (a) chromosomal abnormalities
 - (b) syphilis
 - (c) rhesus isoimmunization
 - (d) cervical incompetence
64. Vitamin K is prescribed for a neonate. A nurse prepares to administer the medication in which muscle site?
- (a) deltoid
 - (b) triceps
 - (c) biceps
 - (d) vastus lateralis
65. To help limit the development of hyperbilirubinemia in the neonate, the plan of care should include
- (a) monitoring the passage of each shift
 - (b) instituting phototherapy for 30 minutes every 6 hours
 - (c) substituting breastfeeding for formula during the 2nd day after birth
 - (d) supplementing breastfeeding with glucose water during the first 24 hours
66. A woman delivers a 3.250 g neonate at 42 weeks' gestation. Which physical finding is expected during an examination if this neonate?
- (a) abundant lanugo
 - (b) absence of sole crease
 - (c) breast bud of 1-2mm diameter
 - (d) leathery, cracked and wrinkled skin
67. The primary critical observation for apgar score is
- (a) heart rate
 - (b) respiratory rate
 - (c) presence of meconium
 - (d) evaluation of the moro reflex
68. When performing a newborn assessment, the nurse should measure the vital signs in the following sequence:
- (a) pulse, respiration, temperature
 - (b) temperature, pulse, respiration
 - (c) respiration, temperature, pulse
 - (d) respiration, pulse, temperature
69. The normal lochia discharge at the end of second week is called
- (a) lochia rubra
 - (b) lochia serosa
 - (c) lochia alba
 - (d) lochia mixed

70. Uterus after delivery at term normally weighs
(a) 200gms (b) 600gms
(c) 800gms (d) 1000gms
71. Breast milk secretion after child birth is due to
(a) withdrawal of estrogen and progesterone (b) production of prolactin
(c) excretion of oxytocin (d) all of the above
72. Suppression of lactation is best achieved by
(a) oestrogen (b) oestrogen + testosterone
(c) vit b6 (d) bromocriptine
73. The normal rate of involution of the uterus in 24 hours as per the height of uterus is
(a) 1.25cm (b) 2.25cm
(c) 3.25cm (d) 4.25cm
74. The causes of subinvolution of uterus are due to
(a) twins pregnancy (b) uterine sepsis
(c) retained products of conception (d) all of the above
75. The immediate complications that may arise in puerperium
(a) PPH (b) Thromboembolism
(c) Psychosis (d) Breast engorgement
76. Prolactin secretion is decreased by
(a) bromocriptine (b) hyperthyroidism
(c) prolactinoma (d) phenothiazine therapy
77. Vitamin K is prescribed for a neonate. A nurse prepares to administer the medication in which muscle site?
(a) deltoid (b) triceps
(c) biceps (d) vastus lateralis
78. The glomerular filtration in the postpartum period returns to normal by
(a) 6 weeks (b) 7 weeks
(c) 8 weeks (d) 9 weeks
79. The meantime for onset of menstrual cycle for first after postpartum is within
(a) 7 - 8 weeks (b) 9 - 10 weeks
(c) 11 - 12weeks (d) 13 - 14weeks
80. In the phases of physiological basis of lactation, synthesis and secretion from the breast alveoli is called
(a) mamogenesis (b) lactogenesis
(c) galactokinesis (d) galactopoiesis
81. Discharge of milk from the mammary glands depends on
(a) suckling (b) contractile mechanism
(c) both (a) & (b) (d) none of the above

82. Metoclopramide (10mg, thrice daily) increases milk volume (60-100%) by increasing the level
- (a) oxytocin (b) prolactin
(c) oestrogen (d) progesterone
83. All of the following appear to decrease hot flushes in menopausal women except
- (a) androgens (b) raloxifene
(c) isoflavones (d) tibolone
84. Indications for removal of IUCD are all except
- (a) flaring up of salpingitis (b) missing threads
(c) patient wants pregnancy (d) for spacing of birth
85. Pearl index is related with
- (a) degree of contracted pelvis (b) cervical scoring prior to induction
(c) assessment of high risk pregnancy (d) contraceptive effectiveness
86. Pregnancy failure rate per HWY in male condom when used correctly and consistently
- (a) 3 (b) 10
(c) 14 (d) 20
87. The direct obstetric cause of maternal death is
- (a) hypotension (b) abortion
(c) anaemia (d) convulsion
88. Leading cause of maternal mortality in our country is
- (a) thromboembolism (b) pre-eclampsia & eclampsia
(c) thrombophlebitis (d) mastitis
89. Which one is the bio-active IUCD
- (a) copperT (b) levonorgestrel combining IUCD
(c) progestasert (d) lippes loop
90. The most common cause of neonatal morbidity and mortality is
- (a) Toxaemia (b) Syphilis
(c) HIV (d) Abruptio placenta
91. Neonatal death rate is expressed as the number of deaths per :
- (a) 100 live births (b) 10,000 live births
(c) 1,000 live births (d) 1,000 births
92. This is the method of abortion most commonly used during the first trimester
- (a) Vacuum aspiration (b) Dilation and evacuation
(c) Dilation and curettage (d) Hysterectomy
93. Which of the following methods has been definitively proven to alone increase pregnancy-related mortality detection
- (a) Including a “pregnancy” check box on death certificates
(b) Extending the temporal definition from 42 days postpartum to one year postpartum
(c) Linking birth certificates to maternal death certificates
(d) Requiring hospital administrators to complete death certificates independent of physicians

94. The nurse has performed a nonstress test on a pregnant client and is reviewing the fetal monitor strip. The nurse interprets the test as reactive. How should the nurse document this finding?
- (a) Normal (b) Abnormal
(c) The need for further evaluation (d) That findings were difficult to interpret
95. Regarding maternal mortality data collection which statement is the correct one :
- (a) Clinical audit is considered easy to introduce into resource poor settings
(b) Near miss reviews are considered easy to introduce into resource poor settings
(c) Cost is the major determinant of which methodology is used for data collection
(d) All maternal deaths should be included regardless of methodology used
96. An increased risk for early pregnancy bleeding has been described in pregnancies occurring after IVF compared with spontaneous pregnancies:
- (a) The increased risk of early pregnancy bleeding among IVF pregnancies which go to delivery is a parallel phenomenon to an increased risk for spontaneous abortions after IVF
(b) Early pregnancy bleeding is a sign of an increased risk for later pregnancy and delivery complications
(c) A major cause of early pregnancy bleeding is maternal use of drugs which threaten embryonic survival
(d) The observed increased risk for early pregnancy bleeding could be an artefact because women pregnant after IVF may be more prone to seek medical help for such a bleeding than other women
97. Research on the effects of abortion have found:
- (a) severely negative psychological reactions in most women who have had abortions
(b) no long-term consequences for children whose mothers would have preferred to have an abortion.
(c) a common reaction of a feeling of helplessness in male “abortion veterans.”
(d) severe long-term physical problems, such as sterility, in most women who have had abortions.
98. The uterine tubes are paired structures, measuring about
- (a) 8 cm (b) 10 cm
(c) 12 cm (d) 14 cm
99. The normal length of the uterine cavity is usually
- (a) 6.5 - 7cm (b) 7.5 - 8cm
(c) 8.5 - 9cm (d) 9.5 - 10 cm
100. The term used to describe a systematic approach to maintain and improving the quality of patient care within a health system
- (a) clinical obfuscance (b) clinical governance
(c) clinical acumen (d) clinical negligence