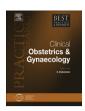


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## Ending Preventable Maternal and Newborn Deaths — Multiple Choice Questions for Vol. 36

- 1. Commonly used approaches to measure perinatal depression in large research studies in LMICs include which of the following?
  - a) Edinburgh Postnatal Depression Scale
  - b) Patient Health Questionnaire
  - c) Psychiatrists' diagnosis
  - d) General Health Questionnaire
  - e) Depression Scale for Low Income Women
- 2. Risk factors for perinatal depression in low- and middle-income settings include which of the following?
  - a) There are no known risk factors
  - b) Exposure to intimate partner violence
  - c) High family income
  - d) Previous history of depression
  - e) Poor family relationships
- 3. There is research suggesting that the following is/are associated with perinatal depression?
  - a) Infant low birthweight
  - b) Preterm infant birth
  - c) Decrease in breastfeeding initiation
  - d) Child stunting
  - e) Practices and behaviors compromising child development
- 4. The following statement(s) is/are true regarding interventions to reduce perinatal depression?
  - a) Employing non-specialist health workers is considered a feasible strategy to address maternal depression
  - b) Cognitive behavioral therapy is not effective at reducing maternal depression
  - c) Health promotion is as effective as psychological intervention
  - d) Involving other family members is a key a feature of effective interventions
  - e) Interventions cannot target upstream factors such as empowerment
- 5. Regarding global mortality rates related only to labour and delivery which of the following is/are true?
  - a) There are over one million maternal deaths annually
  - b) The most frequent clinical cause of maternal death is obstetric haemorrhage
  - c) Annual numbers of maternal deaths increased between 1990 and 2010
  - d) The most frequent cause of stillbirth is traumatic breech birth
  - e) In Africa, annual numbers of neonatal deaths increased between 2000 and 2010

- 6. Caesarean delivery has the potential to save lives but safety remains an issue. Ways to achieve this include which of the following?
  - a) Reducing the caesarean section rate to about 5% in low-resource settings
  - b) General rather than spinal anaesthesia is the technique of choice
  - c) Non-physician providers such as clinical officers or surgical technicians can undertake these procedures
  - d) Antibiotic prophylaxis must be routinely given at all caesarean sections, irrespective of whether they are emergency and elective procedures
  - e) latrogenic fistula following caesarean section is a random event that may occur even after procedures undertaken by experienced surgeons
- 7. Principles of high dependency unit (HDU) care for very sick obstetric patients include which of the following:
  - a) This model of care is appropriate for patients requiring ventilation or inotropic support
  - b) Newborn babies should not be allowed into the unit
  - c) Key minimum equipment for an effective HDU include pulse oximetry, a sphygmomanometer, access to oxygen and ability to measure urine output
  - d) Patient flow should be managed so that discharge from the HDU is to home rather than to a postnatal ward
  - e) This model of care cannot be feasibly offered in low-resource settings
- 8. In best practice resuscitation of term newborns who have a bradycardia or are not breathing normally at birth which of the following is/are true?
  - a) Start positive pressure ventilation using 100% oxygen
  - b) Give chest compressions using the two-thumb method rather than the two-finger method
  - c) Give chest compressions at a ratio of 15 compressions to 2 ventilations
  - d) Use the umbilical vein for giving fluid and medication if needed
  - e) Discontinue life-saving efforts if there is no detectable heart rate after 10 minutes of resuscitation
- 9. In limited resource settings WHO recommendations for prevention of MTCT of HIV include which of the following?
  - a) Maternal treatment with a single dose of nevirapine at the time of labour
  - b) Caesarean section for all women with HIV/AIDS
  - c) Initiation of lifelong ART in pregnant and breastfeeding women
  - d) Avoidance of breastfeeding
  - e) Neonatal treatment with single dose of nevirapine within 24 hours of birth
- 10. Which of the following is/are true statements concerning malaria prevention?
  - a) Insecticide-treated bednets (ITNs) have been associated with a decrease in low birth weight, stillbirth and spontaneous abortion in malaria-endemic countries
  - b) IPT can suppress or clear existing asymptomatic infections, and provide prophylaxis against new infections (T)
  - c) IPT should be given once each trimester
  - d) HIV+ve women taking co-trimoxazole should also receive IPT for malaria prevention
  - e) Artemisinin-based combination therapies (ACT) should be used in the first trimester for IPT
- 11. Which of the following statements is/are true regarding congenital syphilis?
  - a) The risk of congenital syphilis is greatest earlier in gestation
  - b) Severity of fetal infections is greatest later in gestation
  - c) Congenital syphilis can be prevented if maternal syphilis is diagnosed before the third trimester and effective treatment given at least 30 days before delivery
  - d) Congenital syphilis is associated with increased risk of stillbirth and preterm delivery, but does not usually increase risk of long-term sequelae if the baby survives
  - e) Long term sequelae in the infant/child include deafness, blindness, and seizures

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