

# BASIC EMERGENCY OBSTETRIC AND NEWBORN CARE IN CRISIS SETTINGS: SELECT SIGNAL FUNCTIONS

## PRE-COURSE KNOWLEDGE ASSESSMENT

Date: \_\_\_\_\_ Name / Number of Trainee (ID): \_\_\_\_\_

Professional cadre: \_\_\_\_\_ Number of years provider has been in service: \_\_\_\_\_

Gender:  Female  Male  Other/prefer not to say

**Please answer the following questions. Please read the questions carefully and provide what you think to be the most true and honest answer.**

1. Interventions that have proven most successful in reducing maternal mortality include:
  - a. Use of risk approach to determine which women need specialised care
  - b. The use of a skilled birth attendant who has access to emergency care
  - c. Providing universal antenatal care
  - d. Increasing the number of caesarean sections
2. Maternal and newborn mortality in humanitarian settings is usually lower than global average.
  - a. True
  - b. False
3. All women can make informed choices about the services they receive, and the reasons for interventions or outcomes should be clearly explained.
  - a. True
  - b. False
4. Women do not have a right to have a companion with them during labor and childbirth
  - a. True
  - b. False
5. Women and newborns have the right to remain together at all times even if the newborn is small or premature
  - a. True
  - b. False

### Emergency Obstetric and Newborn Care

6. Which of the following lists contain the three MAIN causes of bleeding after birth?
  - a. Soft uterus, a retained placenta, and perineal tearing
  - b. Soft uterus, malaria, and dehydration
  - c. Retained placenta, malaria, and perineal tearing
  - d. Soft uterus, twins, and perineal tearing
7. Which of the following lists contain the three parts of Active Management of the Third Stage of Labor?
  - a. Give uterotonic, manually remove the placenta, and check for tears
  - b. Cut the cord, wait for the placenta to deliver, and give uterotonic
  - c. Give uterotonic, provide controlled cord traction, and check tone of the uterus
  - d. Wait for the placenta to deliver, check for tears, and check the tone of the uterus

8. Which uterotonic medication does not have any temperature requirements for storage?
  - a. Misoprostol
  - b. Oxytocin
  - c. Ergometrine
  
9. If you have not been trained to suture, and if the mother is bleeding from tears that you can see, which of the following actions is MOST correct?
  - a. Fill the mother's vagina with clean gauze
  - b. Use clean technique to apply steady pressure with clean gauze
  - c. Massage her uterus to stop the bleeding
  - d. Leave the tear as it will heal itself
  
10. Criteria for diagnosing pre-eclampsia include which of the following? Select all that apply.
  - a. Gestational age less than 20 weeks
  - b. Blood pressure greater than 140/90 mmHG on two occasions four hours apart
  - c. Blood pressure greater than 160/100 mmHG on one occasion
  - d. 1+ proteinuria
  - e. Ankle oedema
  
11. Magnesium sulfate 50% solution must be diluted to a 20% solution prior to IV administration.
  - a. True
  - b. False
  
12. What is the correct loading dose of magnesium sulfate?
  - a. 2 g of 20% solution IV slowly over 20 minutes AND 5 g of 50% solution IM into each buttock
  - b. 2 g of 50% solution IV slowly over 10 minutes
  - c. 4 g of 20% solution IV slowly over 5 minutes AND 5 g of 50% solution IM into each buttock
  - d. 4 g of 50% solution IV slowly over 10 minutes
  
13. If a woman with severe pre-eclampsia does not have convulsions, when should birth take place?
  - a. Within 24 hours of the onset of symptoms
  - b. Within 24 hours of admission to hospital
  - c. Within 12 hours of the onset of symptoms
  - d. At 40 weeks' gestation
  
14. Which of the following are signs of puerperal sepsis?
  - a. Temperature 37C, tender uterus, lower abdominal pain
  - b. Temperature 39C, tender uterus, chills
  - c. Temperature 37C, vaginal bleeding, abdominal cramping
  - d. Temperature 38C, vaginal bleeding, soft uterus
  
15. Factors that may predispose to intrapartum and postpartum infection:
  - a. Prolonged labour and prolonged rupture of membranes
  - b. Frequent vaginal exams during labour and Cesarean section
  - c. A and B
  - d. Prescribing antibiotics in labour
  
16. What is the preferred route of administration for antibiotics in the case of severe puerperal sepsis?
  - a. Oral
  - b. Intramuscular (IM)
  - c. Intravenous (IV)

17. If a patient is showing signs of hypovolemic shock, including rapid pulse and pallor, then it is best to administer intravenous fluids at a \_\_\_\_\_ rate.
- a. Slow
  - b. Moderate
  - c. Rapid
18. Routine care for a healthy baby at birth includes:
- a. Drying, removing the wet cloth and bathing the baby
  - b. Drying, removing wet cloth and positioning skin to skin
  - c. Weighing, bathing and putting clean clothes on baby
  - d. Drying baby and covering with wet cloth
19. A newborn who is born through meconium-stained amniotic fluid who starts breathing on their own needs routine suction.
- a. True
  - b. False
20. A baby's chest is not moving with bag and mask ventilation. What should you do?
- a. Stop ventilation
  - b. Reapply mask to get better seal
  - c. Slap the baby's back
  - d. Give medicine to the baby