

## East Africa Preterm Birth Initiative

Simulation and Team Training Component

PRONTO International

Knowledge Assessment Answer Key

8. **Fundal height measurements can assist in the diagnosis of preterm gestation. Which of the following is TRUE about fundal height (FH) measurements?**
- Measuring from the symphysis pubis bone to umbilicus is the most accurate (1 cm=1 week of gestation)
  - All women measure exactly the same. For example, a fundal height of 34 centimeters can reliably predict that the foetus is exactly 34 weeks gestation
  - Measuring from the symphysis pubis bone to the top of the uterine fundus can estimate the weeks of gestation (1 cm approximately = 1 week of gestation) **(Correct Answer)**
  - None of the above
9. **Signs and symptoms of preterm labour (PTL) might include:**
- Foetal heart rate more than 160 BPM, fundal height less than 37 centimeters, and/or fewer than 6 contractions per hour
  - Decreased foetal movement, fundal height greater than 37 centimeters, tender abdomen with palpation, and/or lower back pain
  - Headache, visual changes, upper abdominal (epigastric) pain, and/or facial oedema
  - Lower back pain, vaginal discharge (blood, mucus, or liquid), loose bowel movements, and/or 6 or more uterine contractions/hour **(Correct Answer)**
10. **Why are antenatal corticoid steroids recommended when the mother is diagnosed with preterm labour?**
- To promote the ability of the preterm baby to breastfeed well after delivery, reducing risk of hypoglycaemia
  - To reduce the risk of low birth weight (LBW) in the preterm infant, which can improve survival
  - To promote maturity of foetal lungs, which can reduce the risk of respiratory complications in preterm babies **(Correct Answer)**
  - To support the preterm baby's immune system, which can reduce the risk of sepsis
11. **Tocolytic medications such as salbutamol or nifedipine are sometimes used for 24-48 hours in the management of preterm labour (PTL). Which of the following are indications for use of these medications?**
- To reduce contractions and rate of cervical dilation in order to allow antenatal steroids to have time to take effect, and/or to transport the woman to a higher level facility for delivery **(Correct Answer)**
  - To promote maturity of the foetal lungs to deliver a woman in a facility that does not have CPAP
  - To reduce the risk of PROM in order to delay the development of chorioamnionitis
  - All of the above
12. **Evidence-based practices for the birth of a preterm baby includes special attention to:**
- Maintaining warmth to avoid hypothermia
  - Delayed cord clamping when possible
  - Preparing for NNR with the proper type of bag/mask and oxygen delivery system in room
  - All of the above **(Correct Answer)**
14. **Which of the following is the correct treatment for a stable baby weighing 2kg aged 2 hours?**
- Start on IV fluids (10% dextrose) for 24 hours
  - Initiate Kangaroo Mother Care (KMC) to keep the baby warm **(Correct Answer)**
  - Bathe the baby to keep her clean and prevent infection
  - Supplement oxygen by nasal prongs
15. **CPAP is indicated in which of the following neonates?**
- Severe respiratory distress with occasional apnoea and cleft palate
  - Severe meconium aspiration syndrome with frequent apnoea

- c. Silverman- Anderson Score of >4 and APGAR score >4 at 5 minutes **(Correct Answer)**
- d. Spontaneous breathing in a preterm newborn with a respiratory rate of 65 bpm

**16. Which of the following is a required treatment of a stable 1.5kg newborn baby?**

- a. Vitamin K intramuscular injection, formula feeds like NAN, bath at 6 hours of age
- b. Antibiotic eye ointment, Vitamin K intramuscular injection, chlorhexidine for cord care **(Correct Answer)**
- c. Ampicillin twice a day, antibiotic eye ointment, chlorhexidine for cord care
- d. Bath at 6 hours of age, formula feeds like NAN, antibiotic eye ointment

**19. What is the best way to assess the pulse rate during resuscitation of a neonate?**

- a. Feel for the pulse at the base of the cord and count for a full minute
- b. Listen for the heart beat over the chest with a stethoscope and count for a full minute
- c. Feel for the pulse at the base of the cord and count for 6 seconds and multiply by 10 **(Correct Answer)**
- d. Feel for the pulse at the base of the cord and count for 5 full minutes

**20. How often should you reassess the baby's progress when resuscitating?**

- a. At 1 and 5 minutes of age
- b. Every 15 seconds
- c. Every 5 minutes
- d. Every 30-60 seconds **(Correct Answer)**

**21. Which of these statements is TRUE about neonatal resuscitation?**

- a. It is more important to reach for medications than to perform the first steps effectively
- b. Immediate resuscitation with air is just as effective as resuscitation with oxygen and may be beneficial **(Correct Answer)**
- c. Almost all term newborns will require drugs for resuscitation
- d. All neonates will require oxygen for resuscitation

**22. How do you know that air is filling the lungs when performing positive pressure ventilation?**

- a. You will hear a popping sound coming from the inflatable bag valve mask
- b. You will see the chest of the baby rise gently as you ventilate **(Correct Answer)**
- c. The baby will immediately begin to cry
- d. You will feel air gush out of the mask when ventilating

**23. How deep should you compress an infant's chest when performing chest compressions during NNR?**

- a. Only slightly in case you injure the baby
- b. To a half of the anterior posterior diameter of the chest
- c. To a third of the anterior posterior diameter of the chest **(Correct Answer)**
- d. None of the above

**24. What are the risk factors for maternal and/or neonatal sepsis?**

- a. Prolonged labor
- b. Prolonged rupture of membranes
- c. Pre-existing infections of the lower genital tract
- d. All of the above **(Correct Answer)**

**27. Which of the following are NOT a clinical sign or symptom of neonatal sepsis?**

- a. A well-flexed and active baby **(Correct Answer)**
- b. Diminished spontaneous activity
- c. Apnea
- d. Temperature instability (hypothermia or hyperthermia)

**28. Which of the following are included in the management of a neonate with sepsis?**

- a. Oxygen, corticosteroids (betamethasone or dexamethasone), antibiotics
- b. Antibiotics, oxygen, maintenance of temperature between 36.5 and 37.5oC **(Correct Answer)**

- c. Cold baths to control fever, oxygen, antibiotics
- d. All of the above

**29. Ann's baby has early onset neonatal sepsis with severe respiratory distress that developed 6 hours after delivery. What is the correct amount & type of IV fluids that should be administered? It's Day 1 of life.**

- a. 100mls/kg of Ringer's lactate
- b. 60mls/kg of Normal Saline
- c. 60mls/kg of 10% Dextrose **(Correct Answer)**
- d. 100mls/kg of 10% Dextrose

**36. When a pregnant woman at 32 weeks gestation has an eclamptic convulsion, which of the following should be included in the immediate clinical management?**

- a. Protect the woman from harm, administer magnesium sulphate, and make a plan for a safe delivery (either induction of labour or Caesarean) **(Correct Answer)**
- b. Admit the woman to the health facility and administer magnesium sulphate and diazepam for 5 weeks to bring the pregnancy to term before inducing labour
- c. Administer anti-hypertensive medication and give 1L of IV fluids quickly to improve urine output
- d. Perform an emergency Caesarean section for foetal distress, especially if the woman is convulsionsing

**43. A 'check back' is used during an emergency situation to ensure:**

- a. All team members are present and account for
- b. The patient's family receives adequate communication
- c. Both sender and receiver confirm the message **(Correct Answer)**
- d. Everyone knows there is an emergency

**44. A 'shared mental model' is important to team function because:**

- a. Everyone will have the same clinical knowledge and skill
- b. It allows for a common understanding of the environment and goals **(Correct Answer)**
- c. It identifies the person responsible for the patient outcome
- d. It promotes pass off of care to another provider

**45. Based on the two-challenge rule: If you express concern about an order twice and the leader does not response, you should:**

- a. Leave the situation immediately
- b. Take a vote among those present
- c. State you are concerned about patient safety and see a second opinion from a superior or colleague **(Correct Answer)**
- d. Do it anyways.

**46. SBAR is a technique for rapidly communicating critical patient information. SBAR stands for: Situation, Background, Assessment, and Recommendation. Select an example of a correct SBAR:**

- a. "The patient is bleeding!"
- b. "The patient is bleeding excessively. This is her seventh birth. She gave birth about five minutes ago, and I immediately applied 10 units of oxytocin IM but her uterus did not contract. I think she has uterine atony. Please apply 20 additional units of oxytocin IV.' **(Correct Answer)**
- c. "I have a g9 p8 patient who arrived about two hours ago with her husband and mother, their names are Peter and Mary. She has had 4 ANC visits, HIV negative, They traveled for about an hour to get here, and she was almost 8 cm dilated when she arrived. She was doing well and her baby was born very healthy; her placenta was complete. I applied 10 units of oxytocin IM. Please apply an additional 20 units of oxytocin IV, because now she is bleeding excessively."
- d. "The patient gave birth to her 7th child about five minutes ago. Now she is bleeding excessively. I applied 10 units of oxytocin IM but her uterus did not contract. I think she has uterine atony."

**47. All of the following are true about good communication EXCEPT:**

- a. Good communication can prevent mistakes in care that can harm patients

- b. Good communication means that the leader does not take advice from the team members (**Correct Answer**)
- c. Good communication helps everyone to have a shared mental model of the plan for care
- d. Good communication means that the team can adapt quickly to changing situations

