



P. K. DAS COLLEGE
of **NURSING**

PANAYUR (PO), VANIYAMKULAM, PALAKKAD - 679522



(Approved by Indian Nursing Council, Kerala Nurses & Midwives Council & Kerala Government
Affiliated to Kerala University of Health Sciences)

(FORMERLY NEHRU COLLEGE OF NURSING)

SAMPLE SESSIONAL EXAMINATION

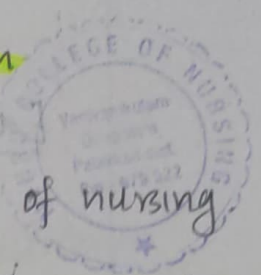
ANSWER SCRIPT

RE-TEST ANSWER SCRIPT

Name: Silpa m

Roll no: 48

Nehru college of nursing



MENTAL HEALTH NURSING

II - SESSIONAL EXAMINATION

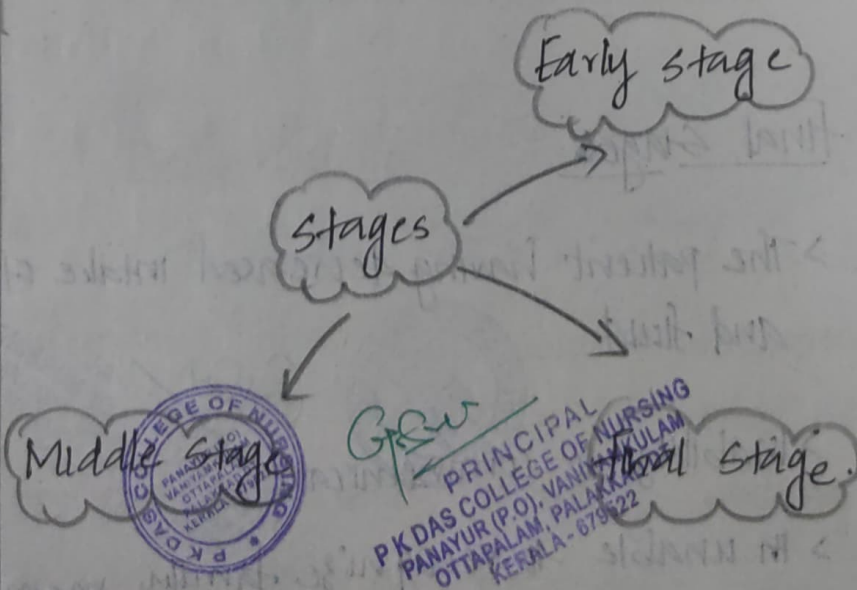
DEMENTIA

Definition

Dementia is the global impairment of memory, intellect, memory and personality without impairment in consciousness.

Stages of dementia

The dementia is of mainly two type alshimers dementia and vascular dementia. The dementia is the chronic brain disorder. The dementia that is having 3 important stages.



Early stage

The early stage that includes

- > Forgetfulness
- > Hesitancy in initiating actions
- > Decline interest in society
- > Poor role performance.

Middle stage

- > progressive loss of memory
- > Hesitancy in following instructions
- > Impaired role performance.
- > Anxiety
- > wandering
- > Irritability
- > poor personal hygiene.
- > Social isolation.

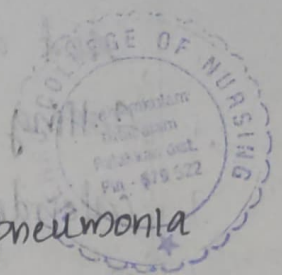
Final stages

- > The patient having decreased intake of food and fluid
- > Inability to communicate
- > Unable to recognize family members.



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- > urinary incontinence.
- > Fecal incontinence
- > Finally death is by aspiration pneumonia



Nursing management of patient with dementia

In a patient with dementia the nursing care should be mainly focused on

- Daily routine
- Nutrition and body weight
- Toilet habits and incontinence
- Accidents
- Mood and emotions
- Wandering
- Sleep disturbance
- Interpersonal communication.

1. Daily routine

The patient who is suffering from dementia & is they should maintain a daily routine. especially a time schedule for daily activities, including waking up, brushing, toileting, Breakfast



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And also in the hospital or in the home setting they should be provided with a calendar and also an clock. This will help them for getting orientation about time, place and person.

2. Nutrition and body weight

The patient with dementia have poor food intake for that we can provide food that should be in semi solid consistency. It also help to avoid the chance of getting aspiration.

3. Toilet habits and incontinence

The toilet habit of the patient is get changed the patient may have incontinence. First of all we want to provide education for the family regarding the urinary incontinence and also fecal incontinence or otherwise constipation, for a patient who is on bed for a prolonged period may experience constipation. For that semi solid and easily digestible foods should be provided for the patient.



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4. Accidents.

The patient with dementia have a great chance of having accidents. Through their disease condition, mainly due to the sundowner's syndrome. It mainly happening at night. not only that they have decreased coordination in walking and standing this may also create accidents.

5. Mood and emotions.

The patients had not have any normal mood and emotions. So we want to identify their mood and also always be with them.

6. Wandering

The patient may show wandering in unfamiliar situation, change in place. So always keep them away from this and always put an tag that for identification of patient with their details.



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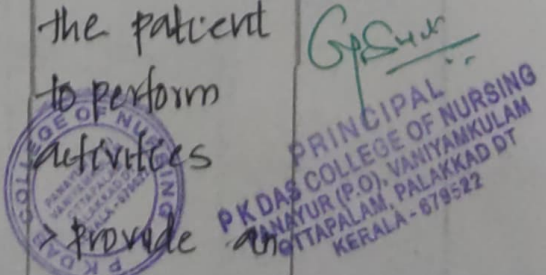
Nursing diagnosis

- > Risk for fall related to the disease condition
- > Altered role performance related to social isolation as evidenced by inability to perform activities.
- > ineffective coping
- > Disturbed sleeping pattern related to change in environment as evidenced by frequent yawning.
- > ineffective health maintenance related to poor intake of food and fluid as evidenced by BMI value.
- > Anxiety related to hospitalization as evidenced by facial expression.



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Assessment	Diagnosis	Goal	Planning	Implementation
<u>Objective data</u> As evidenced by presence of sundowner's Syndrome and also lack of coordination in walking	Risk for fall related to disease condition	The patient get reduce from the risk of fall	<ul style="list-style-type: none"> > Monitor the patients activity > Avoid unwanted object on the way of walking > Made the home arrangement suitable for patient > Assist the patient while walking. > Always don't allow the patient to go alone. 	

<u>Subjective data</u> Patient says that he can't do his job	Altered role performance related to social isolation	The patient will maintain his responsibilities and activities	<ul style="list-style-type: none"> > Instruct the patient about time of daily routine > Encourage the patient to perform activities > Provide suitable environment for activities 	
<u>Objective data</u> evidenced by inability to perform basic routines.	as evidenced by inability to perform activities.			

			> Assess the degree of activities that she/he can perform.
--	--	--	--

<p><u>Subjective data</u></p> <p>Patient says that he can't take food</p>	<p>Ineffective health maintenance related to poor intake of food as evidenced by BMI value</p>	<p>The patient maintain normal health status</p>	<p>> Assess the degree of malnutrition in the patient</p> <p>> Encourage the patient to take food.</p> <p>> Encourage the patient to take fluids.</p> <p>> Instruct to take food through orally</p> <p>> Adviced to take semi solid food for easy digestion and also for avoiding aspiration</p>
<p><u>Objective data</u></p> <p>as evidenced by BMI value.</p>			



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Conclusion

The dementia is a chronic brain organic brain disorder. Here the memory, intellect, personality of the individual get impaired by they are conscious. In this situation they need all type of care including food, toileting, sleep and also for a good interpersonal relationship.

SHORT ESSAY

2.

BEHAVIOURAL THERAPY.

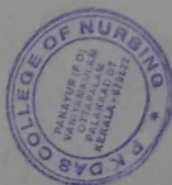
Behavioral therapy is an essential therapy that have greater influence in psychiatric disorder. A trained person will interact with the patient to know about their problems.

In behavioural therapy mainly two theories are mainly considered.

Classical conditioning by Ivan Pavlov
Operant conditioning by BF Skinner.

Principles of behavioral therapy

The behavioural therapy should having certain principles.



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All behaviors are learned.

Principles of behavioural therapy

Human beings are passive organism they can't be conditioned or shaped

The maladaptive behaviours can be changed and can be replaced by adaptive behaviors

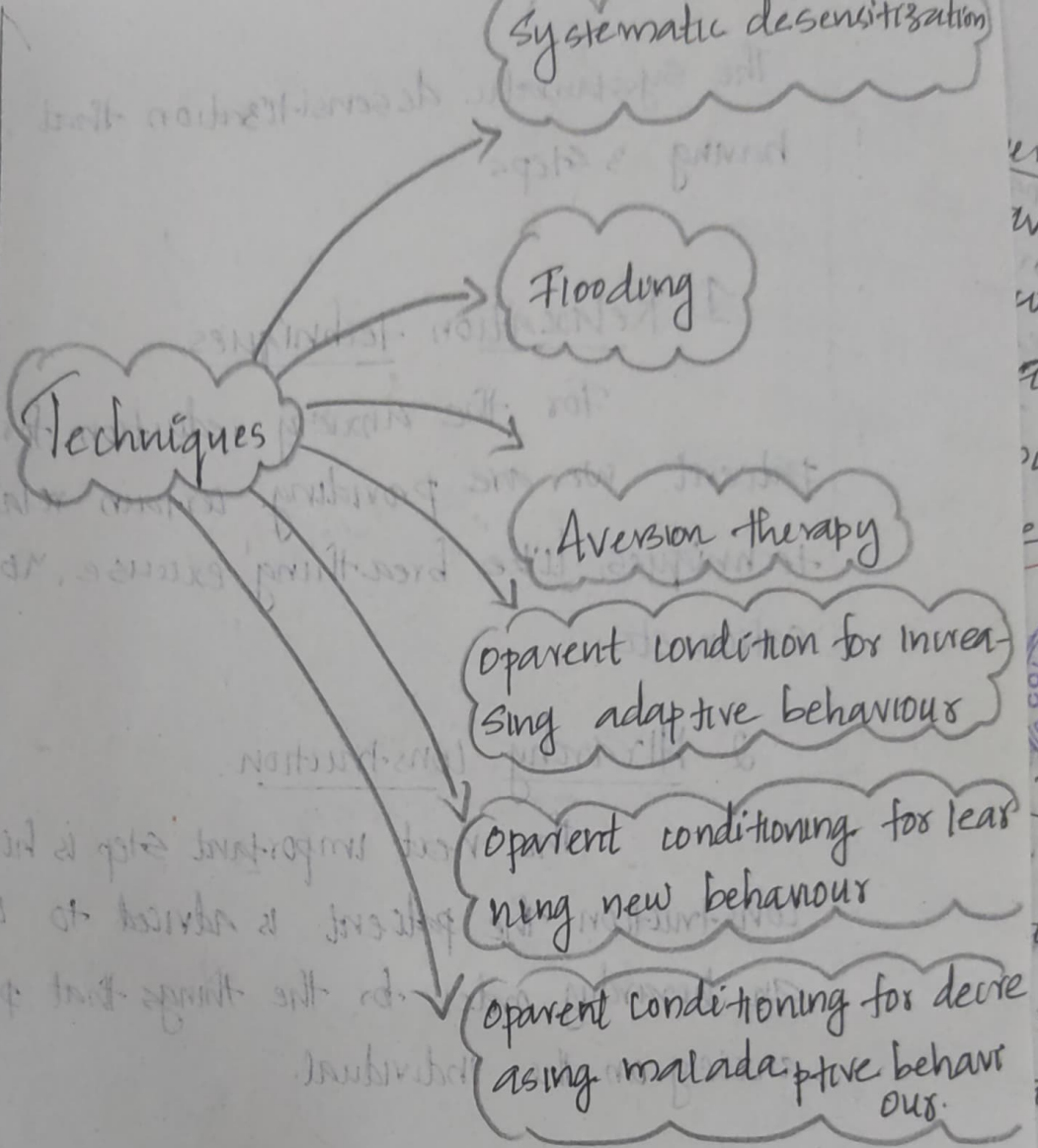
Techniques

For every therapy in psychiatry they are following certain techniques for their proper functioning.

Here in the behavioral therapy



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1 Systematic desensitization

The systematic desensitization means that bringing a stimuli that create an anxiety in an individual or they showing certain behavior in that stimuli and that stimuli are provoked and while initiation of anxiety in individual certain relaxation techniques are given to overcome it



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The systematic desensitization that is having 3 steps

1. Relaxation techniques

For the anxiety reduction for the patient we are providing certain relaxation techniques, like breathing exercise, yoga, meditation etc.

2. Hierarchy construction

The next important step is hierarchy construction. The patient is advised to construct an hierarchy order for the things that produce anxiety on the individual.

3. desensitization of ~~images~~ stimulus

In this we are showing certain stimulus in front of the patient that create anxiety in the individual while at that time of initiation we are advising to perform certain relaxation techniques.



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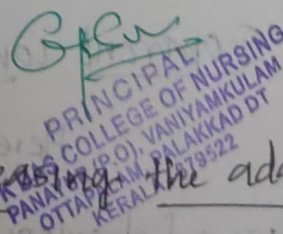
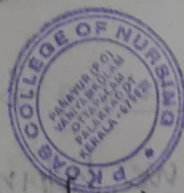
2. Flooding

The another important technique is ² flooding. In this technique the patient is exposed to an stimuli that is an ~~creal~~ an anxiety and phobia in the patient but the patient can't escape from that particular situation.

For example. If an a patient have fear on snake we are kept the patient in a room that containing snake; and there is no way for escape for patient. Through this method the anxiety can be reduced.

3. Aversion therapy

The aversion therapy means creating an association between ~~an~~ unpleasant and pleasant stimuli. In the absence of unpleasant stimuli the pleasant stimuli became unpleasant for the patient. and he will never project such behaviours.



4. oparent condition for increasing the adaptive behaviours

It is a important technique and also it is very effective. Here we are encouraging the patient to perform certain adaptive behaviours.

This is mainly including

→ positive reinforcement

→ token economy

Positive reinforcement

The positive reinforcement giving the patient a positive reward for performing adaptive behaviour this will encourage the patient to perform the same behaviour in the next time.

Token economy

This is also a type of positive reward, we are giving certain tokens for patient for performing adaptive behaviours and the increased no. of token in patient will provide them a gift or outing or any thing.

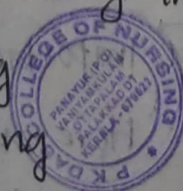
5. Operant conditioning for teaching new behaviors

Here we helping the patient to learn new behavior. This mainly including

⇒ Chaining

⇒ Modelling

⇒ Shaping



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(a) Modelling

Here we are showing an role model for the patient for developing a positive and adaptive behaviours.

(b) shaping

The shaping means we are shaping the behaviour. mainly include social skill developing etc..

(c) chaining

in chaining we help the patient by breaking the complex task into simple and thorough this they can easy handle with the task.

6. oparent condition for decreasing maladaptive behaviour

through this we are reducing maladaptive behaviours in individual. this mainly includes,

⇒ Ignoring

⇒ punishment

⇒ over correction.

⇒ Response token.



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(1) ignoring: This is nothing we are never minding the activities and behaviours of the patient

(2) punishment: This is nothing, we are punishing the patient for making or performing maladaptive behaviours.

(3) over correction:- If any one correction is made by the patient we giving over correction
eg: If an patient urinate in the floor he will get the punishment to clean all the wards.

(4) Response taken

When the patient show any maladaptive behaviour the token that was ~~at~~ already given to the individual is taken back.

Conclusion

The behavioural therapy have an great role in the psychiatry. It help the individual to change his or her attitude through engaging in the behavioural therapy.



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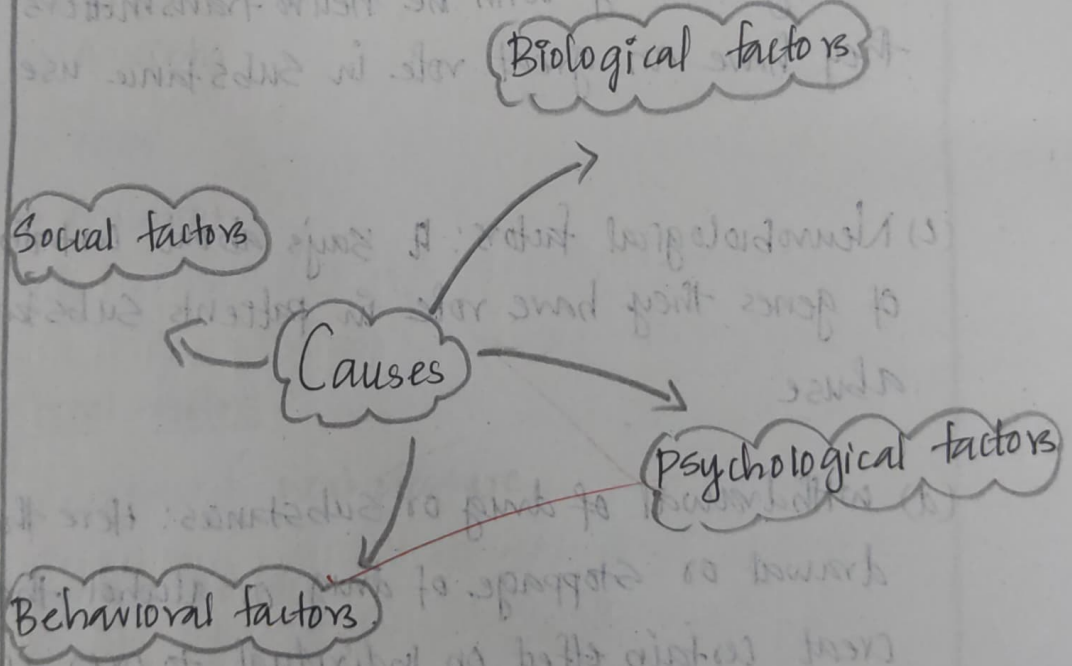


3. SUBSTANCE ABUSE

Substance abuse means the individual or patient uses any psychoactive or any others including drug, alcohol, or any others in very much amount.

CAUSES

The main cause of substance abuse,



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SUBSTANCE ABUSE

① Biological factors.

The biological factors that including

(a) Genetics: If an patient have an genetic history of substance abuse they have an tendency to use substances.

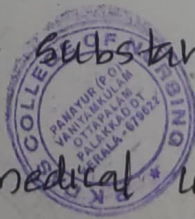
(b) Biochemical factors: The biochemical factors that mainly dealing with the neuro-transmitters. they have an great role in substance use.

(c) Neurobiological factors: It says about certain type of genes they have role in patients substance abuse.

(d) withdrawal of drug or substances: Here the withdrawal or stoppage of drug or alcohol that creat certain effect on individual to over come that consume the substances.

(e) certain underlying medical conditions

Due to certain medical condition the patient is taking substance: for eg: alcohol consumption for relieving pain like that any other substance should be used.



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Behavioral factors

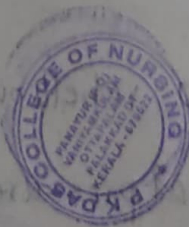
- > Peer pressure: Most of the patients begins their alcoholism or substance abuse mainly from peer pressure
- > Sensitivity.

Psychological factors

- > Depression
- > Inferiority complex.
- > Sexual immaturity
- > Anxiety
- > Fear
- > Agitation.
- > Hallucinations

Social factors

- > Increased work pressure
- > Family problems
- > Social insecurity.
- > Economical crisis
- > Social calamities
- > Broken family
- > loss of job.



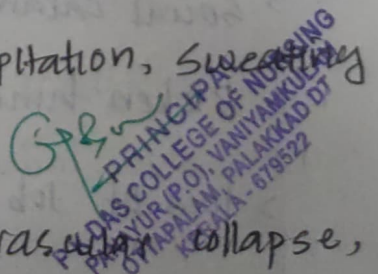
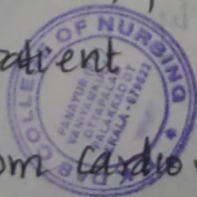
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These are the main causative factors of Substance abuse.

Delirium tremens.

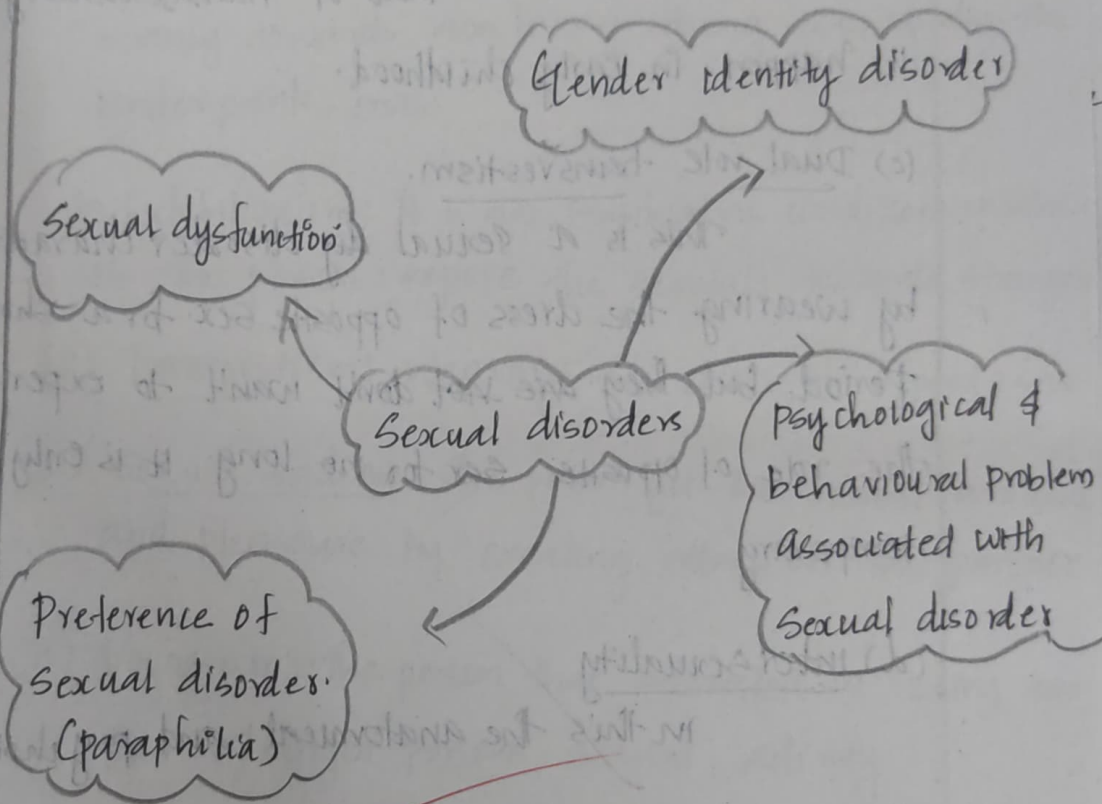
The delirium tremens is a withdrawal symptom associated with alcoholism. If the person who is an chronic alcoholic, when he stopped taking alcohol. The delirium tremens will take place within 2-4 days. It is an important withdrawal syndrome of alcoholism. This mainly including.

- > Tremendous movement of hand and extremities especially hand
- > Hallucination certain type of hallucinations will develop for the patient especially visual and auditory hallucination
- > patient may show confusion, fainting, dysnea and also show disorientation towards time, place, person.
- > Patient show rebellious behaviour towards others
- > Increased blood pressure, palpitation, Sweating can be seen for patient
- > death may result from Cardiovascular collapse, Hypertension etc.



5. SEXUAL DISORDERS.

The sexual disorders that we also have a important role in psychiatry. according to ICD classification mainly there is 4 classification.



Gender identity disorder

It is the disorder where there is a disturbance in femininity and masculinity.

This mainly including

- ① Transsexuality
- ② Gender identity disorder in childhood
- ③ dual-role transvestism.

(d) intersexuality.

(a) Transsexual

Here the individual who is having an anatomical structure of a sex but they are practicing the features of opposite sex.

(b) Gender identity disorder in childhood.

It is same as that of transsexual but it happen in early childhood.

(c) Dual role transvestism.

This is a sexual dy disorder characterised by wearing the dress of opposite sex for a short period, but they are not want to experience the role of opposite sex for no long. It is Only for temporary.

(d) intersexuality

In this the anatomical and psychological features are of a sex and the gender identification of the patient is difficult.

eg: Turner Syndrome.

Psychological and behavioral problem associated with sexual disorder



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(a) Homosexuality

This is, here the person have sexual intimacy towards the person of same sex
eg: Gay, lesbian.

Paraphilia

(a) Fetichism: Here the patient can have sexual intimacy towards non living thing especially the underwear, bras.

(b) Exhibitionism: It is an psychiatric condition in which the person expose the genitals towards strangers

(c) Transvestism: wearing the dress of opposite sex

(d) Sexual sadism: The person get the sexual arousal and pleasure by creating attack on the partner

(e) Voyeurism: The person that interested in seeing another stranger persons sexual activity.

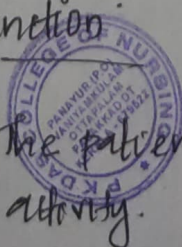
(f) pedophilia: Sexual arousal towards children

(g) Zoophilia: sexual arousal towards animals.

Sexual dysfunction

(a) Frigidity: The patient is unable to perform sexual activity.

(b) Impotence: The patient can't maintain the penile erection until the completion of sexual intercourse.



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(c) premature ejaculation: The ejaculation that happen without getting the sexual pleasure during sexual intercourse.

(d) non-organic vaginismus: The spasm of $\frac{1}{3}$ rd of vagina that will interfere with coitus.

(e) non-organic dyspareunia: pain during sexual intercourse.

Conclusion

The sexual disorders are very common in our society. Their early detect and prompt management is necessary for the patient and also for the family members.



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12. Type of Substances.

There are varieties of substances that are available in our society. The substances that we mentioning also include our medications also. The over usage or the misuse of medication that create substance abuse. The type of substance that available are.

- > alcohol
- > Cannabinoids
- > Marijuana
- > caffeine
- > MDMA
- > Cocaine
- > Morphine.
- > opioid.

These are the substance that available in our society now a days. The over use of these substance lead to the misuse of these substance. Causing substance abuse.

Explain
get 5 marks
each type of substance



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13. Side effect of atypical antipsychotics

The major side effect of atypical antipsychotic that include extrapyramidal symptoms, Autonomic symptoms

These mainly include

- > Acute dystonia
- > Akathisia
- > Frequent urination
- > Increased salivation.
- > Increased tear production
- > Confusion
- > Fainting
- > Head ache
- > Nausea
- > Vomiting

These are the major side effect that will happen while taking atypical antipsychotic drugs.

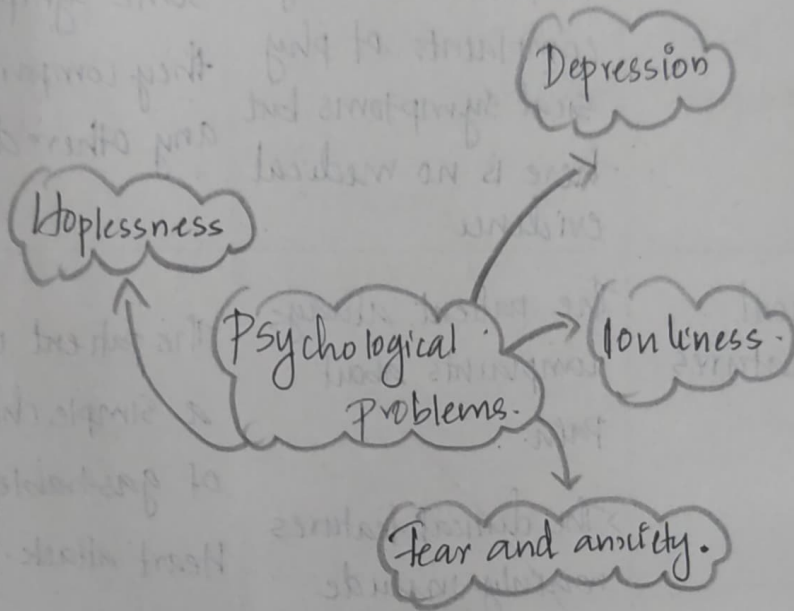


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14. Psychological changes of old age.

In the old age there are so many changes occurring not only physiologically but also psychologically.



Depression: depression is a major change in old age due to several external factors and also certain chemical reactions within the body. leads to depression.

Loneliness: The old age create loneliness in old age Peoples.

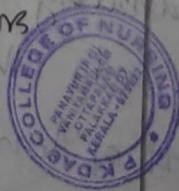
Fear and anxiety: Due to certain chemical changes within the body the old age people may experience certain kind of fear and anxiety.



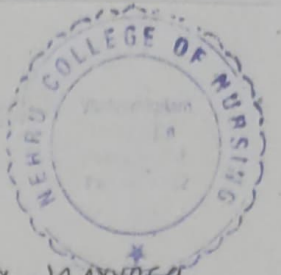
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9. Features	Somatization disorder	Hypochondriasis
Definition	Somatization disorder is a disorder that coming under somato form disorder. It is the disease where the patient always complaints of physical symptoms but there is no medical evidence.	Hypochondriasis is a condition that coming under somato form disorder. The patient is having some symptoms and they compared it with any other diseases.
Clinical features	The patient always complaints about Pain. > The clinical features mainly include 2 Gastrointestinal symptom, 1 reproductive or sexual and 1 neurological symptom.	The patient complaint a simple chest pain of gas-trouble with Heart attack.
Diagnostic measures	Behavioral therapy Counselling.	Behavioral therapy Counselling.
Intention/Purpose	To seek attention from others.	To Due to fear.



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10.

Features

Bulimia nervosa

Anorexia nervosa.

Definition.

Eating disorder characterized by binge eating

Eating disorder characterized by poor intake or no intake of food.

causes

Hypothalamic dysfunction
Family.

Social problem
Psychological problem.

Feature
(Body weight)

Patient having normal or ~~body weight~~ increased
~~15% less than~~ body weight
~~ideal weight~~

Patient having ~~normal~~ body weight ^{is 1% less than ideal} ~~as increased~~ weight
~~body weight~~

Binge eating

Present

Absent

Frequent vomiting

Present

Absent

Write 4 points each
4 marks to get



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4. Anxiety disorder

Anxiety disorder is an abnormal state mainly having physical and psychological symptoms of anxiety without having any organic brain disorder or psychiatric disorder.

Causes

- > childhood incidence
- > Fear toward object
- > Types of phobias
- > Family problems
- > Use of certain type of drugs
- > Certain life situations

Signs and symptoms

- > Sudden sweating
- > Fainting
- > dysnea
- > Head ache
- > shivering.
- > Forgetfulness
- > Fear



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Diagnostic finding

- > Mental status examination
- > cognitive and behavioural therapy.
- >

Treatment

- > ~~Psychotherapy~~
- > ~~Pharmaco-therapy~~
 - > Benzodiazepines.

7. Nursing management of patient with phobia.

Phobia is a psychiatric condition. The phobia may be some times induced by certain object, situation or any persons.

Management

- > always along with patient.
- > Provide instructions to solve their problems regarding phobia.
- > keep the patient away from the stimulus that create phobia in the patient.
- > provide the medications to patient as per physician's prescription.



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- > instruct the patient and family about the disease condition
- > understand the underlying causes of phobia
- > take complete childhood and personal history of the patient.

Conclusion

Phobia is an important psychiatric condition that mainly dealing with fear, palpitation. The early detection and prompt management of phobia should be done at correct time.

8. Occupational therapy

The occupational therapy have an great role in psychiatry. If a patient is admitted for a long term in an psychiatric hospital. They are given by certain works. or they are interested they are given with special training for it.

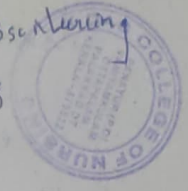


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12/3/24
Tuesday

Re-Test
Sessional Examination

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1st year Bsc Nursing
58



obstetrical and gynaecological nursing

50 1/2
75

3) Minor ailments of pregnancy

These are the minor disorders that is taking place during pregnancy

→ Gastrointestinal system

* Nausea and Vomiting

The mother will experience nausea and vomiting during the first trimester of pregnancy

Treatment

→ Taking Dry Biscuits etc in empty stomach

→ Constipation

The mother will experience constipation due to the decreased Gastrointestinal ~~metab~~ mobility

→ Heart burn

The mother will experience heart burn due to the relaxation of the gastric muscle and also the stomach is compressed



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Gram Positive bleeding

~~It is a common~~

The mother will have bleeding ~~into~~ from the gums especially during brushing, due to the increased vascularity.

→ Flabulence

It is due to the air intake during nausea and vomiting.

→ pica

desire to eat bizarre things eg: chalk, mud etc.

Musculoskeletal

Leg back ache

It is due to the position in the pregnancy ~~at~~ the center of gravity ~~of~~ the of weight will be of uterus and load in pregnancy.

leg cramps

It is due to the decreased calcium level and ~~also~~ increased serum phosphate levels.

Cardiovascular

Dizziness and fainting

It is due to fall in



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Blood pressure

→ Varicose veins

mainly in legs, anus, vulva region due to the decreased blood flow

→ ankle edema

it is due to the increased fluid volume and fluid retention.

→ Genitourinary

→ polyuria urgency

urgency to ~~urination~~ urination as the kidney function increases as well as the bladder gets compressed ^{by} ~~against~~ the uterus

→ Leucorrhoea

very non itchy vaginal discharge due to change in pH and flora

→ Integumentary

→ hyperpigmentation - darkening of areola

→ formation of secondary areola

→ chloasma - pigmentation of neck, face etc.

→ striae gravidarum → stretch marks seen on mainly abdomen, thigh etc



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→ linea nigra → the dark line along the midline of the abd. abdomen.

→ Vascular spiders → Red spots, dots on face.

→ Montgomery tubercles → small acne like papules seen on breast.

Nervous system

→ Carpel tunnel syndrome

→ Median nerve will get compressed due to the ~~increased~~ increased fluid retention.

→ insomnia

5
Additional diagnosis
disturbance in sleep due to the difficulties with pregnancy, hormonal changes, abnormal body posture etc.

(4) Fetal skull

Fetal skull is oval in shape. It has major changes than compared to other skeletal parts during delivery.



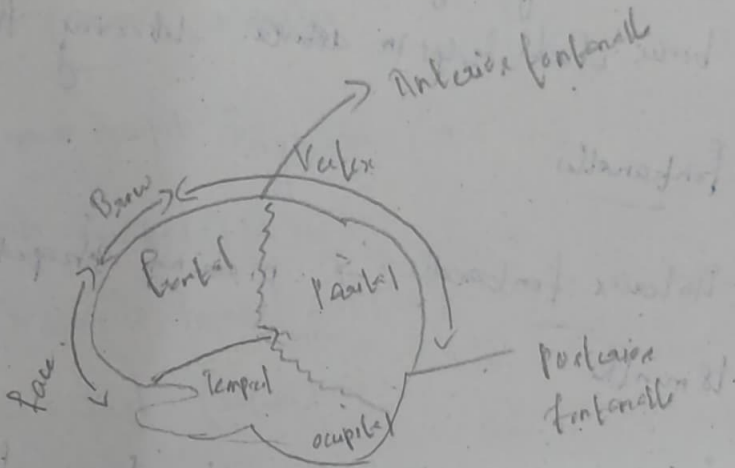
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Bones of Fetal skull

2



- 2 frontal bones
- 2 parietal bones
- 2 temporal bones
- 1 occipital bone



Parts

→ Face - it extends from the face to the brow

→ Brow → it extends from the brows to the vertex

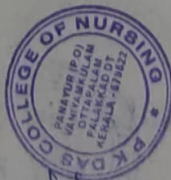
→ Vertex → it extends after the brow to the occiput

Sutures

Frontal suture → between the frontal bones

Sagittal suture → between the parietal bones

Coronal suture → between the frontal and parietal bones



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~~and~~ Lamoid suture - between the ~~hem~~ ~~parietal~~
parietal and occipital bones.

~~fontanelle~~

importance

it has a gliding movement, movement of bones over the
bones which helps in ~~decrea~~ delivering the head

fontanelles

- Anterior fontanelle \rightarrow diamond shaped closes at
18 months

- Posterior fontanelle \rightarrow triangular shape closes at
6 weeks

importance

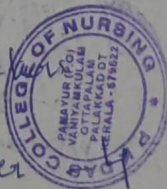
- \rightarrow enlarges in infection
- \rightarrow to ~~be~~ ~~to~~ ~~avoid~~ ~~dehydration~~ in babies
- \rightarrow to ~~avoid~~ ~~scalpel~~ ~~cut~~
- \rightarrow Transfusion purposes.

diameters

There are 2 diameters

Fig - Transverse diameter \rightarrow in ~~tumb~~

- Anteroposterior diameter - 6 in number



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4. Transverse diameter

→ Biparietal - (7.5 cm)

→ Biparietal - (8 cm)

→ Super sub parietal (8.5 cm)

→ Bitemporal (9 cm) (9.5 cm)

6. Anteroposterior diameter

→ Sub occipito bregmatic (9.5 cm)

→ Occipito frontal (10 cm)

→ Sub occipito frontal (11.5 cm)

→ Mento vertical (14 cm)

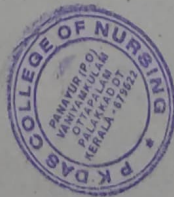
→ Sub mento vertical

→ Sub mento bregmatic (9.5 cm)

3
Write about
fontanelles

5. oxytocin

oxytocin is a drug with comes under the category oxytocics



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Name	Mode of Action	Indication	Dose/Route (Frequency)	Contraindication	side effect	Nurses Responsibility
oxytocin oxytocin Pitocin	It stimulates the uterine muscles ↓ (decreased potency)	→ Therapeutic induction Early pregnancy → induce abortion → Reduce bleeding Late pregnancy → induction of labour → expulsion of placenta expulsi ^o n of placenta → Diagnostic induction → oxytocin sensitivity test	the induction IV, 2-5 units started 0.5mg-1mg or in 500ml RL or NS. for → then drop rate is increased from 15 drops to 30 drops to 60 drops Continued for 15 minutes. Post ^{Early} pregnancy 2mg given	→ Cardiovascular disease stroke → Grand multipara → Abruptio placenta → history history of coarctation section → Hypersensitivity → Contracted pelvis	- Hypertension - fetal distress - uterine tetanic contraction → monitor the intake output chart for monitoring fluid intake to check for water intoxication → patient undergoe cardiac ^{local} Regional or General anaesthesia oxytocin is given more for hypertensive crisis	

3



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6)

Diagnosis of pregnancy can be made using the combination of 3 signs



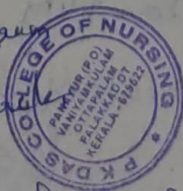
- Presumptive signs
- Probable signs
- Positive signs

Presumptive signs

These are the signs and symptoms which the woman experiences and diagnose the pregnancy.

- Amenorrhoea since 4 weeks of last menstruation
- Tingling, tenderness in the breast
- Nausea and vomiting
- increased salivation
- increased frequency of ~~to~~ micturition
- changes on the breast like engorgement of breast
- darkening of the nipple areola development of secondary areola
- secretion of colostrum
- Montgomery tubercles

Quickening → it is the first fetal movement that mother experiences around 20 weeks of gestation



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→ changes in skin such as chloasma, lineae nigrae, striae gravidarum etc.

Probable signs (examiner identifies)

→ enlargement of uterus

→ vaginal discharge and blue or purple discoloration due to increased vascularity

→ Cervical enlargement

→ Ballotment of fetus

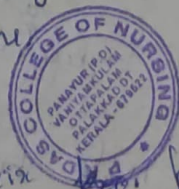
→ Hegar's sign → The lower abdomen feels soft and paper thin uterus is felt when the examiner does the bimanual examination and uterus felt forward seen in 6th-8th week

→ Chadwick's sign - vaginal blue discoloration of vagina due to increased vascularity

→ Ossander's sign → The pulsation felt in the lateral femoral during examination seen in 8th week

→ Palmar sign → Regular and rhythmic contractions of the uterus resembling the systolic and diastolic contractions

→ Goodell's sign → cervix becomes softer from the firmness of the non-pregnant state the tip of the nose softens to as soft as the lips



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Positive sign

- on ultrasound examination Fetus is seen in 6th week
 - Fetal skeletal formation on 10th week
 - Fetal heart rate heard on 6th week
 - Palpation of full body parts on later pregnancy
 - visualize the full fetus on 22nd week.
- 3/2

7) phases of menstrual cycle

Menstrual cycle is the process in which there is various changes taking place in female reproductive system. It is from the age of 12-15 called menarche to the age of 45-50 menopause. It is a 28 day cycle.

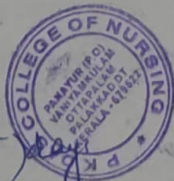
Phases

- Menstrual phase
- follicular phase
- ovulation phase
- luteal phase

Menstrual phase (1-5 days)

It starts from the 1st day to the 5th day
In this phase

- the bleeding starts through the vagina containing the shedding of uterine contents
- to some blood is bled out



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→ Abdominal cramps can occur in this stage

Follicular phase 1-13 days

in this phase starts from the first day to the 13th day.

→ pituitary gland secretes the hormones which stimulate the growth of egg in the ovary

→ once get well start to ~~mature~~^{grow} and ~~it~~ forms a sac around it called follicle

→ the egg is matured in the 13th day.

→ the hormones also stimulate in the formation of endometrial lining

Ovulation phase (14) day

this phase is in the 14th day of menstruation

→ ~~the~~ ~~the~~ ~~mature~~ egg

the pituitary gland secretes another hormone called Luteinizing hormone

→ the matured egg is transported to the fallopian tube by the finger like projections called cilia in fimbriae



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Theoretical phase (15-28)

31



This is the last phase in this phase

The egg ~~reaches~~ after reaching the fallopian tube stays there only for 24 hours

→ If no fertilization occurs & ~~egg~~ ~~sperm~~ only sperm can't reach the egg it gets ~~destroyed~~ destroyed and expelled out via menstrual cycle

→ The hormones ~~get~~ diminishes at the last of the cycle

→ Preparation for next cycle and it continues.

3m

8) Ergometrine

Ergometrine ~~is~~ comes under the

Ergometrine derivatives in oxytocics

eg: methergin

It is drug of choice for ~~control~~ ~~control~~ of induction
control of labour.



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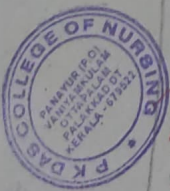
9)

characteristic	Androd pelvis	Gynaecoid pelvis
Brim	heart shaped	Round
Ischial spine	convergent	straight
sciatic notch	narrow	Round
fore pelvis	blunt	Generous
suprapubic angle	Less than 90°	90°
incidence	20%	50%

3

10)

unwed mother	single mother
<p>→ unwed mother is a woman becoming mother without getting married</p> <p>→ <u>Reasons</u></p> <ul style="list-style-type: none"> • teenage pregnancy • contraception failure <p>→ <u>Effects</u></p> <ul style="list-style-type: none"> • problems in society 	<p>→ single mother is a mother taking care of the child without the help of the other biological partner/father</p> <p>→ <u>Reasons</u></p> <ul style="list-style-type: none"> • death of the father • divorce • no acceptance from the father • economical problems



Gpsm

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- ~~read~~ • internal conflict
- depression
- anxiety

Rights

- custody of the child
- support the child

- less time of taking care of child
- decreased health of the child due to lack of monitoring.

Rights

- custody of ~~the child~~
- custody of the child
- protection of the child

11)

sutures	fontanelles
<p>→ these are the sutured part of the skull</p> <p>→ <u>Types</u></p> <ul style="list-style-type: none"> • frontal suture • coronal suture • sagittal suture • lambdoid suture <p>→ <u>importance</u></p> <p>has gliding movements and helps in the de delivery of head easily</p> <p>→ no closure</p>	<p>→ these are the spaces in the skull where the bones between are the sutures</p> <p><u>Types</u></p> <ul style="list-style-type: none"> - Anterior fontanelle → posterior fontanelle <p><u>importance</u></p> <ul style="list-style-type: none"> → bulges in infection - Assen for de degeneration <p>→ Anterior fontanelle closes by 18 weeks and posterior fontanelle by 6 weeks</p>

3/2



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2) Functions of pelvis

5



- It helps in giving shape to the body.
- It helps in ~~the~~ delivery of the baby.
- It forms the ~~base~~ & innominate hips bones consisting of ilium, ischium, pubis.
- It ~~helps in forming the pelvis~~
- It helps in giving the posture and for sitting.
- It helps for the articulation of the acetabulum of the femur.
- It supports the internal ~~to~~ organs especially the reproductive organs during pregnancy.
- It protects the internal organs.
- It helps for the attachment of the other structures and bones.
- As it becomes soft in pregnancy it makes the delivery of the baby easier.

Gpsw



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13) Adoption

It is a process of taking care of a child by a ~~not for~~ person who has no biological relationship with that child

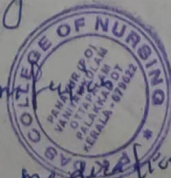
Indication

- infertile women
- death of children
- single parent
- fear of pregnancy

14) Importance of fontanelle.

It is important in knowing the health condition of the fetus

- to assess for any infection it enlarges with infection
- ~~it depresses with~~ to assess for dehydration it gets depressed
- for assessing occipital vein
- for exchange transfusion
- administration of medication



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→ well drawn of BF

→ important in delivering the head of the baby easily

Long essay

① a) Pregnancy is a state in which ~~the~~ there is a growth ~~inside the uterus~~ of a baby inside the uterus of the mother

changes in skin during pregnancy

→ chloasma - the darkening of the back of neck etc

→ stria gravidarum → stretchmarks formed mainly on abdomen, thigh etc.

→ linea nigra → dark line along the middle of the abdomen.

→ Montgomery tubercles → areola like projections seen in breast

→ darkening darkening of nipple, formation of secondary areola

→ darkening of the vagina etc.

→ Hyperpigmentation

→ Kamla spiders →



Green

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Expected date of delivery

LMP + 9 months + 7 days

13 + 9 months + 7 days

= June 20 ✓

Obstetric score

G₃P₁L₁A₁

G₃P₁L₁A₁

13-9-23
12-3-24

✓ Gestational age - 6 months

c) ~~avoid~~ exposures

a

g) ~~avoid~~ antenatal advice

during first trimester

→ avoid ~~all~~ exposure to radiation, tobacco, drugs, psychiatric substances.

→ advice to take folic acid to prevent the ~~a~~ defects.

→ advice to manage stress and refer inform

The physician if has any history of ~~low~~ hypertension, diabetes mellitus.

→ Advice about the physiological changes.



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2nd trimester

6



- Provide Advice to avoid stressful activities
- Inform about the minor ailments like nausea, constipation vomiting etc.
- advice to take dry biscuit etc. to avoid vomiting in the morning.

3rd trimester

- Advice about the antenatal exercises that helps the mother for easy delivery
- advice to ~~be~~ check for the fetal movement
- Advice the partner and family members to provide emotional support to the mother.
- Provide health education about, lactation, ~~later~~ Lactia, care of the baby.

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2) Antenatal care in various trimesters

1st trimester

- Advice the mother to take iron folic acid to prevent neural tube defect.
- Advice to ~~take the x-ray~~ Avoid the exposure with radiation, x-ray, tobacco, drugs, poisons etc. as it can affect the fetal growth.
- Advice to take more nutrients and vitamins for meeting the needs of the mother as well as the fetus.
- Advice to avoid stress and dangerous activity.
- Check for physiological conditions of the mother like hypertension, diabetes mellitus etc..
- Advice to go for regular ~~sex~~ ~~scanning~~ - scanning.
- ~~Advise~~ Health educate about the physiological changes that take place during pregnancy.
- Advice to ~~avoid~~ take dry foods to avoid Nausea vomiting.
- Advice to ~~can~~ avoid soft bristles to avoid gum bleeding.
- Advice to take more fluids.
- Advice about the tooth due to acidification of the saliva.
- Advice not to take any kind of drugs unless the doctor ask cause problems to the fetus.



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2nd trimester

→ Inform the mother about the changes occurring in the 2nd trimester of pregnancy.

→ ~~Advise~~

→ Advice to monitor the fetal movement

→ Advice to avoid unhealthy foods and drinks

→ Advice ~~to~~ not to miss the regular scanning.

→ Advice to continue to intake of folic acid

→ Advice about the exercises done for the

~~easy~~ easy delivery

→ Provide health education about the ~~best~~ antenatal diet

→ Advice to inform if any problems ~~are~~ occur

→ Advice the remedies for managing the minor ailments of pregnancy like

- using pillows for supporting
- elevation of leg in case of ankle edema

→ Advice to avoid stressful activities

→ Provide calcium supplements

and other supplements if necessary.



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3rd trimester

- Advise the mother regarding the ~~an~~ antenatal exercises
- Advise the mother to avoid dental consultation.
- Advise the mother to monitor or record the fetal movements.
- Provide back massage to relieve the back pain
- Advise the family members and partners to provide emotional support to the mother
- Advise about the complementary therapies like, music therapy, aromatherapy etc using birth balls
- Provide Antenatal counselling
- Provide information about
 - Lactation
 - taking care of child
 - Lochia
 - other physiological changes
- Provide information about the care to be done after the delivery
 - explain about the $\&$ care of the stitches, or episiotomy.



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