

ORAL QUIZ FOR MIDWIVES

1. What should you do when a patient asks you to wait on her?

Get her full name and address with full details of how to reach her home; as much information as possible about when she menstruated last; when she first felt the movements of the baby; how many pregnancies she has had; the outcome of each pregnancy; and history of former deliveries and illnesses. Give her the instruction sheets for prenatal care and preparation for delivery. Explain that you are going to report the case to the county nurse and that she will be able to assist in any way that she can to see that she has the proper medical care during her pregnancy and adequate care at delivery and during the lying in period. Also tell her for what the newspapers are used and that you will be glad to show her how to make delivery pad, bed pad, vulva pads, etc.

Read over the instructions with her and emphasize the fact that she should have medical attention all during pregnancy and if none of the danger signals appear and she does not have baby before nine months are up that the midwife can deliver her.

2. What do you tell them about getting ready for confinement?

That she has the greatest responsibility because she has to prepare her family, her house, and herself for this event. She should prepare her family by sharing this nine months experience. Next to the mother the father has the greatest responsibility. He is to learn a father's part in bringing a new life into the world. He may demonstrate to the others how thoughtful and considerate they should and can be toward the mother. Saving money: for the best medical supervision, adequate food, clothes and equipment for making both pregnancy and confinement as comfortable and safe as possible. Children should be told as much as their interest, curiosity and maturity can appreciate. True facts and not myths or falsehoods should be given.

Emphasize that nine months is a long time and that she can make plans at first by the month, then by the week and later by the day so that every detail will be worked out. Money to pay physician or midwife, equipment for herself and baby, and some reliable person to care for her at delivery and the family including herself and the baby until she is able to resume that responsibility.

3. What do you do when you are called on a case: (a) emergency, (b) case for which you have been engaged?

(a) Emergency - This is a type of case that the midwife does not have to accept. Normal childbirth at full term to a healthy woman is a natural process and is safe for a midwife to handle but there are so many things that can make childbirth abnormal; premature infant, sick, or deformed mother. You should get as nearly as possible the facts before you consider going to a case that you have not been engaged for. If you do go, take your bag fully equipped and in addition a roll of newspapers and some clean rags.

(b) A case for which you have been engaged - Check up on what you know about the case. Has she been to a physician, is she well, has she gone eight and one-half or nine months in her pregnancy, have you reported her to the county nurse, what do you know about her preparation in the home? Take your bag fully equipped.

4. What is the best disinfectant?

For cleansing, soap and clean warm water along with air and sunshine.

5. What are the duties of the midwife in labor?

During first stage, to observe at all times for any abnormal condition of the woman and to prepare the mother, the house and herself to receive the baby and care for the mother in a safe, clean way. During second stage, to reassure the mother and to keep her in a safe position and clean; to explain how the mother can help herself, and to keep herself clean and to keep her hands on the presenting part of the baby. During third stage, to reassure the mother and to be clean and careful in receiving the placenta and to be sure that all has been expelled.

6. What are the duties of a midwife after the baby is born: (a) mother and (b) baby?

(a) After the third stage has been completed the midwife is to watch closely for evidence of bleeding of mother or exhaustion, convulsions, headaches, or any abnormal change. She must clean up the bed and care for the mother in a clean way being careful not to tire her nor move her too much. She should give her a cup of tea or coffee and let her rest.

(b) Baby - As soon as it cries and the cord is properly tied, cut and dressed it is put in a clean blanket in a warm bed lying on his side with his head a little lower than his feet. After the mother is cleaned up the midwife gets everything ready for newborn care, then washes her hands and puts two drops of silver nitrate into each of the baby's eyes before she cleanses and dresses him. After she is through with the care of the mother and baby she makes out a birth certificate in full with ink on the forms furnished her and gives it to the registrar in the beat in which the birth occurs.

7. Explain how you are sure that you use clean scissors to cut the baby's cord?

By boiling the scissors that have been thoroughly cleansed for ten minutes in clean water in a vessel with a lid. Pour off the water leaving the scissors covered in the basin until you are ready to use them. Remove the lid and be careful not to touch the cutting part of the scissors with your hand as you pick them up by the handle and not to let the cutting part touch anything else as you use them to cut the cord. Put them back in the clean vessel without touching the cutting edge, so that you can use them to cut the ties from the cord after you have tied it well.

8. What is: (a) clean water, (b) clean basin, (c) clean rag, (d) clean sheet, (e) clean dress, (f) clean spoon, (g) clean pitcher, (h) clean cup, (i) clean towel?

(a) Clean water is water that has been boiled for at least ten minutes and has not been soiled by having fingers or anything that has not been boiled put into it before it is used. If the water has trash in it, it should be strained before it is boiled.

- (b) Clean basin is a basin that has been scrubbed and cleaned well, then water placed in it (using another cleansed basin for a cover) and placed on the stove to boil for ten minutes.
- (c) Clean rag is a rag that has been washed, boiled, dried in the sun, ironed and folded away and not touched or used until it is unfolded to use at this time or washed and boiled for ten minutes and kept in that basin and water and not touched with anything until it is used.
- (d) Clean sheet is a sheet that has been washed, boiled, and dried in the sun, ironed and folded away and has not been unfolded or handled since it was put away.
- (e) Clean dress is a dress that has been washed, preferably boiled, dried and ironed and has not been handled or worn since it was placed away in a clean manner.
- (f) Clean spoon is a spoon that has been cleansed well, boiled and the bowl of which has not touched anything, since it was boiled. Should be left in clean covered container until used.
- (g) Clean pitcher is a pitcher that has been scrubbed clean, and has been placed in a clean vessel of water to boil for ten minutes. A clean rag should be placed over the mouth of the pitcher after it has boiled and been removed from the vessel being careful that nothing touches the mouth or inside of the pitcher.
- (h) Clean cup is a cup that has been thoroughly cleansed and put in a clean basin of clean water to boil for ten minutes. When you remove it you must be careful that nothing touches the edge or inside of the cup.
- (i) Clean towel is a towel that has been washed, boiled, dried and ironed and folded away and has not been used or handled since it has been placed away clean.

9. What is the best place for the delivery of the mother?

The bed that has been carefully prepared for comfort, cleanliness and firmness.

10. What is the safest position for the delivery of the mother?

On her back on the bed with her knees drawn up.

11. Why does the board of health have you get certain supplies?

Every person who works has to have certain tools. In order for you to have adequate and safe tools to use in your midwifery work the board of health has studied and selected the necessary things for you to use safely.

12. What should every midwife have ready for her use at all times?

Required midwife equipment complete and clean.

13. What do you put in the baby's eyes?

Silver nitrate 1% solution. Two drops into each eye.

14. What do you put on the stub dressing?

Nothing. Clean dry gauze is put on with no grease nor powder.

15. When the cord dressing comes off what do you do for the navel?

If it is moist, bath it with clean water, pat it dry with a clean rag or cotton until it dries up and is smooth and puckered.

16. Why do you put a binder on the mother?

Some women enjoy the abdominal binder during pregnancy and feel that it makes them more comfortable after the baby comes.

17. How are you sure that the vulva pads are clean?

If Kotex is used be careful that it is opened according to directions and that after it is opened that the box is wrapped in a clean towel or rag and that the Kotex is removed at the time it is to be used by clean hands and that the hands touch the end outside fold so as not to soil the part that goes next to the mother's vulva. If rags are used be sure that they are clean and that they are folded, sewed to hold them together, ironed to cleanse them and folded to protect them and wrapped in a clean wrapping paper separately.

18. How long do you wait before you put the baby to breast?

After you have cleaned room, make birth certificate, washed your hands well after you have made the mother comfortable by changing her vulva pads and observed the amount and character of lochia, you arrange the breast tray and demonstrate how to put the baby to breast by cleansing nipples and putting the baby to breast and timing its nursing period. Five minutes until the third day and ten to fifteen minutes at three or four hour periods thereafter. It is well to have baby nurse within six hours after it is born and at regular periods.

19. What do you wash nipples with?

Clean water using cotton swab or clean rag.

20. How often should a baby nurse the (a) first day, (b) second day, (c) third day?

First and second days every six hours.

Third day every three or four hours following regular schedule: 6, 10 A.M., 2, 6, 10 P.M., or 6, 9 A.M., 12 M., 3, 6, 10 P.M.

21. If the afterbirth does not deliver what should you do?

You may wait one hour after the birth of the baby before you become disturbed. Explain to the mother that she may push only when the uterus is hard. When this fails you are to send for a physician telling him what has happened.

22. What do you do if the mother bleeds before the baby is born?

Put her to bed and have her lie on her back with legs straight and together and send for a physician telling what you have observed.

23. What do you do if the mother bleeds after the baby is born?

Have mother lie on back with legs together and raise the foot of the bed, so that her head is lower than her body. Rub the hand gently over the abdomen when you feel the uterus get firm, rub it and hold it between your fingers, being careful that you do not push down toward the opening of the birth canal but down toward the backbone. Call a physician telling him what you have observed.

24. What do you do if the mother does not pass her water in twelve hours?

Give plenty of fluids, have her get on bed pan, pour clean warm water over the vulva or let her listen to running water. When this fails, send for physician telling him what you have observed.

25. What do you do if the baby does not pass his water in twelve hours?

Give him lots of water. Call a physician.

26. How do you tell when a woman is in labor?

By observing to see if her uterus gets firm while she is having pain and relaxes when the pain ends, the pains are at regular intervals and begin in the back and come around to the abdomen, that the pains progressively get stronger and closer together, that mucus streaked with blood comes away from the birth canal, or that the waters rupture.

27. How can you tell if the baby is coming right?

By looking at the mother's abdomen and the birth canal. If the baby is coming head first and is not too large for the pelvis or the pelvis is not too small or an abnormal shape, the head will "become engaged", that is; it will fit in behind the "cross bone" and will soon cause the vagina to open and the perinaeum to bulge while she is having a pain.

28. After a woman is in labor, how long do you wait for her to deliver?

Not longer than twelve hours.

29. What do you do if she complains of feeling weak?

Look to see if she is bleeding from the birth canal. Give her a drink of tea or coffee. Some women feel faint and nauseated at the end of the first stage of labor. This will often be followed by hot flushed face and perspiration. At this time you get the mother on the bed so that you may observe what is happening, when she begins to "push". If she continues to feel weak in either case, you want to send for a physician, telling him what you have observed.

30. Why do you need a clean blanket or rag to wrap the baby in?

It must be soft and warm in order to keep from chilling the baby and it must be clean so as to protect the baby from infection.

31. Why do you give the baby boiled water to drink soon after it is born?

Before you leave the house show the person who is to care for the mother and baby how to give it warm clean water to drink. This supplies the baby with water so that its kidneys, bowels and skin will begin to function.

32. How do you clean a baby's mouth?

By giving it clean warm water to drink.

33. What caution should you use in wiping the baby's nose, mouth, and eyes soon after it is born?

In wiping its nose or mouth you merely want to pinch it gently with cotton covered fingers.

In wiping the eyes you wipe each eye using separate pieces of cotton with a gentle downward stroke that will wipe off the upper lid, never wipe the eye cross ways.

34. Why should you keep everything out of the birth canal before and after the baby is born?

Nature has a way of cleaning the birth canal by excretion of a secretion that cleanses the birth canal from the inside out. In putting anything into the birth canal you carry germs from the outside into the birth canal that may cause great damage.

35. What would you do if your patient had convulsions?

Send for a physician telling him what you have observed. While you are waiting for the physician to come try to keep the patient warm and quiet and take a teaspoon and wrap clean cloth tightly around the handle until it makes a firm pad so that you may put it between her teeth to prevent patient biting her lips or chewing her tongue.

36. How often should the patient's vulva pads be changed?

Every time she passes her water or has a bowel movement.

37. Tell how you would wipe a woman after her bowels have moved?

Use clean rags or cotton that have been boiled for ten minutes and have not been exposed to dirt in any way. Be careful to wipe from the front to the back.

38. Tell how you would be sure that the baby got clean water to drink?

Strain it through a clean cloth if it contains any trash or sediment and boil it for at least ten minutes in a clean vessel. Have a clean bottle with a

clean stopper or cover ready to pour it into and to close it up until it is ready for use. Either use a clean nipple and bottle or a clean cup and a clean spoon to feed water to the baby.

39. What kind of cases are you to deliver by yourself?

Well women who are having normal labor with full term baby.

40. What do you do with the afterbirth?

Some people are superstitious about burning the afterbirth, but this is the best disposal of it. It requires much heat to thoroughly destroy it. If you have to bury it be sure that you do a good job of getting it out of the way.

41. Whose business is it to report the baby's birth?

It is the duty of the person who attends the delivery. When both the midwife and physician are present it should be decided who is to report the birth. Some physicians prefer that the midwife sign the certificate if she is the one present when the baby is born.

42. Why should you use ink?

This is a permanent record and unfading black ink is required to keep it legible.

43. Who takes care of the baby after you leave?

The patient should have made arrangements for some one to be responsible for her and the baby. If no such arrangements have been made it is up to the husband or family to provide for this care. It may be the husband, mother-in-law, older daughter, etc.

44. Do you tell them what to do while you are gone?

You should leave standing orders from the county board of health and be sure that the person responsible understands what to do.

45. Why should you not deliver a patient on the floor?

It is impossible to keep the patient, the baby or yourself clean and is difficult to control and protect the mother.

46. How do you clean the baby after it is born?

Use clean warm oil or grease to clean the vernix caseosa from all parts of the body. If blood has been smeared on the baby's body you may use clean cotton or rag wet in clean water to gently wipe the blood off.

47. Do you always grease the baby after it is born?

You should use grease, first to cleanse the baby because it dissolves the vernix.

48. Do you wash the baby the first day?

Only when the physician orders it.

49. What should you watch about the mother and the baby the first twenty-four hours?

To see that the baby breaths, is kept warm and clean and that the cord does not bleed and that his kidneys act.

To see that the mother does not bleed too much, that her kidneys act and that she is clean and comfortable.

50. Why should the baby be in a bed to itself?

The newborn infant should sleep the most of its early life. It should be in a bed to itself so that it will be disturbed only when it is fed or bathed. There is great danger of the baby being smothered, catching cold, or forming the habit of crying by sleeping in the bed with its mother. Sleeping to itself gives the baby the best chance for normal physical and mental growth. A box, basket, dresser drawer or suit case may be used for the baby to sleep in until a bed can be procured.