

<p>DO YOU KNOW?</p> <p>Q. What is a maternal death?</p> <p>A. A maternal death is the death of a woman</p> <ul style="list-style-type: none"> • while pregnant or within 42 days of termination of pregnancy, • irrespective of the duration and the site of the pregnancy, • from any cause related to or aggravated by the pregnancy or its management, • but not from accidental or incidental causes. <p>5 points</p>	<p>DO YOU KNOW?</p> <p>Q. What is the name of the common indicator for measuring maternal mortality?</p> <p>A. Maternal Mortality Ratio (MMR)</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. How is Maternal Mortality Ratio calculated?</p> <p>A. Number of maternal deaths during a given time period per 100 000 live births during the same time-period.</p> <p>3 points</p>	<p>DO YOU KNOW?</p> <p>Q. What is India's MMR according to the latest statistics?</p> <p>A. 212 (SRS 2009)</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. A woman dies in the third month of pregnancy because of a ruptured ectopic pregnancy. This is</p> <ol style="list-style-type: none"> a maternal death a pregnancy related death None of the above <p>A. Maternal death – the definition states “irrespective of site of pregnancy”</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. A woman died 2 weeks after delivery of sepsis. This is a</p> <ol style="list-style-type: none"> a maternal death a pregnancy related death None of the above <p>A. Maternal death – the definition states “while pregnant or within 42 days of termination of pregnancy”</p> <p>2 points</p>

<p>DO YOU KNOW?</p> <p>Q. What is a pregnancy related death?</p> <p>A. The death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the cause of death.</p> <p>5 points</p>	<p>DO YOU KNOW?</p> <p>Q. A woman dies in the 7th month of her pregnancy because of a road accident. Is this</p> <ol style="list-style-type: none"> 1. a maternal death 2. a pregnancy related death 3. None of the above <p>A. A Pregnancy related death. A maternal death is defined as “from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes.”</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. Name the 5 most important direct causes of maternal mortality in India.</p> <p>A.</p> <ol style="list-style-type: none"> 1. Haemorrhage 2. Sepsis 3. Unsafe abortion 4. Hypertensive disorders including eclampsia 5. Obstructed labour <p>5 points</p>	<p>DO YOU KNOW?</p> <p>Q. What is the most common direct cause of maternal mortality in India?</p> <p>A. Haemorrhage</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. A woman, during the 8th month of her first pregnancy, develops convulsions. Her BP is found to be very high. What is the name of the condition she has?</p> <p>A. Eclampsia</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. A woman who delivered 4 days ago develops high fever with foul smelling vaginal discharge. What is the name of the condition she has.</p> <p>A. Postpartum or puerperal sepsis or infection</p> <p>2 points</p>

<p>DO YOU KNOW?</p> <p>Q. What is Phase 1 delay in the 3 delays model?</p> <p>A. Delay in decision to seek care</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. Name any 3 common causes of Phase 1 delay.</p> <p>A.</p> <ul style="list-style-type: none"> • Economic status • Educational status • Women's status • Illness characteristics. <p>3 points</p>
<p>DO YOU KNOW?</p> <p>Q. What is Phase 2 delay in the 3 delays model?</p> <p>A. Delay in reaching the medical facility</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. Name any 3 common causes of Phase 2 delay.</p> <p>A. Distance, roads, transport, costs</p> <p>3 points</p>
<p>DO YOU KNOW?</p> <p>Q. What is Phase 3 delay in the 3 delays model</p> <p>A. Delay in receiving adequate treatment</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. Name any 3 common causes of Phase 3 delay.</p> <p>A. Availability of</p> <ul style="list-style-type: none"> • Skilled staff, • Drugs • Sterile equipment • Surgical facilities and • Blood for transfusion <p>3 points</p>

<p>DO YOU KNOW?</p> <p>Q. Name any 3 social determinants of maternal health</p> <p>A.</p> <ul style="list-style-type: none"> • Place of residence • Caste • Class – Poverty • Education • Women's status • Nutrition – Anaemia <p>3 points</p>	<p>DO YOU KNOW?</p> <p>Q. According to accepted definitions worldwide, a TBA is a skilled birth attendant. True or False</p> <p>A. False</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. A delivery in a PHC conducted by an ANM is considered a delivery by a skilled birth attendant. True/False</p> <p>A. True</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. A delivery in a private hospital conducted by a gynaecologist is considered a delivery by a skilled birth attendant. True/False</p> <p>A. True</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. Name any 3 components of Basic EmOC.</p> <p>A.</p> <ol style="list-style-type: none"> 1) Administer parenteral antibiotics 2) Administer parenteral oxytocic drugs 3) Administer parenteral anticonvulsants for preeclampsia and eclampsia 4) Perform manual removal of placenta 5) Perform manual removal of retained products (e.g., manual vacuum aspiration) 6) Perform assisted vaginal delivery <p>3 points</p>	<p>DO YOU KNOW?</p> <p>Q. What are the two critical components of Comprehensive EmOC.</p> <p>A. Perform surgery (eg caesarean section), Perform blood transfusion</p> <p>2 points</p>

<p>DO YOU KNOW?</p> <p>Q. A 24 hour PHC is supposed to offer what level of care?</p> <ol style="list-style-type: none"> 1. Skilled birth attendance alone 2. BEmOC 3. CEmOC <p>A. BEmOC</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. An FRU is supposed to offer what level of care?</p> <ol style="list-style-type: none"> 1. Skilled birth attendance alone 2. BEmOC 3. CEmOC <p>A. CEmOC</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. Most maternal deaths take place</p> <ol style="list-style-type: none"> a) During the first 7 months of pregnancy b) During the last month of pregnancy c) During delivery d) During the first 48 hours after delivery <p>A. d) During the first 48 hours after delivery</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. Unsafe abortions contribute to ---- % of maternal deaths in India.</p> <p>A.8%</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. What is a perinatal death?</p> <p>A. A stillbirth or death of a newborn in the first one week of life</p> <p>3 points</p>	<p>DO YOU KNOW?</p> <p>Q. What are the common causes of postpartum haemorrhage?</p> <p>A.</p> <ol style="list-style-type: none"> 1. Atonic uterus (Uterus fails to contract after delivery) 2. Cervical or vaginal tears 3. Retained placenta <p>3 points</p>

<p>DO YOU KNOW?</p> <p>Q. What is the name of the intervention used to reduce postpartum haemorrhage?</p> <p>A. Active Management of Third Stage of Labour (AMTSL)</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. What is eclampsia?</p> <p>A. Convulsions occurring in a woman with pre eclampsia (Increased blood pressure, protein in the urine and swelling of hands, feet and face)</p> <p>3 points</p>
<p>DO YOU KNOW?</p> <p>Q. What is the name of the drug used to treat eclampsia?</p> <p>A. Magnesium sulphate</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. What is the name of the graph used during labour to detect obstructed labour early?</p> <p>A. partograph</p> <p>2 points</p>
<p>DO YOU KNOW?</p> <p>Q. Name any two drugs used to improve uterine contractions to treat postpartum haemorrhage.</p> <p>A. Oxytocin, Methergine, Misoprostol</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. What are the two modern methods of abortion?</p> <p>A. Medical abortion, Manual Vacuum Aspiration</p> <p>2 points</p>

<p>DO YOU KNOW?</p> <p>Q. In India, abortion is legalized under which Act?</p> <ol style="list-style-type: none"> 1. MTP Act 2. PCPNDT Act 3. PWDVA Act <p>A. MTP Act</p> <p>2 points</p>	<p>DO YOU KNOW?</p> <p>Q. 99% of all maternal deaths take place in developed countries. True/False</p> <p>A. False. In developing countries.</p>
<p>CHANCE CARD</p> <p>The ANM in this village checks the BP of the pregnant woman during every antenatal checkup in order to diagnose pre eclampsia early.</p> <p>Bonus 3 points</p>	<p>CHANCE CARD</p> <p>This ASHA visits every woman 3 times after delivery to provide postpartum care.</p> <p>Bonus 3 points</p>
<p>CHANCE CARD</p> <p>All ANMs in this district have undergone training to be skilled birth attendants.</p> <p>Bonus 5 points</p>	<p>CHANCE CARD</p> <p>This FRU has a blood storage unit to provide blood transfusion when necessary.</p> <p>Bonus 5 points</p>

<p>CHANCE CARD</p> <p>This ANM has given her contact details to all pregnant women in her village so they can contact her in an emergency</p> <p>Bonus 3 points</p>	<p>CHANCE CARD</p> <p>The nurse from the PHC accompanied the woman who was bleeding after delivery to the District Hospital during referral and saved her life.</p> <p>Bonus 5 points</p>
<p>CHANCE CARD</p> <p>The Medical Officer in the PHC informed the District Hospital over phone when referring a woman with PPH in order to prepare them for her arrival.</p> <p>Bonus 3 points</p>	<p>CHANCE CARD</p> <p>This district provides free ambulance services for all pregnant women.</p> <p>Bonus 3 points</p>
<p>CHANCE CARD</p> <p>Maternal Death Reviews take place regularly in this district and corrective action is taken based on this.</p> <p>Bonus 5 points</p>	<p>CHANCE CARD</p> <p>ASHAs and ANMs report every maternal death from this district as they are convinced maternal death reviews will result in corrective action for improvement in the health system.</p> <p>Bonus 5 points</p>

<p>CHANCE CARD</p> <p>The Medical Officer in this PHC provides safe abortion services through MVA after undergoing training.</p> <p>Bonus 3 points</p>	<p>CHANCE CARD</p> <p>This woman was scolded and beaten by the nurse during delivery.</p> <p>Delete 3 points</p>
<p>CHANCE CARD</p> <p>The Village Health and Sanitation Committees in this district discuss issues related to maternal health and plan accordingly.</p> <p>Bonus 5 points</p>	<p>CHANCE CARD</p> <p>The ANM refused to see this woman during delivery as she could not pay her Rs 300.</p> <p>Delete 3 points</p>
<p>CHANCE CARD</p> <p>This BPL family was asked to buy medicines and gloves from outside for the delivery of their daughter in the PHC.</p> <p>Delete 3 points</p>	<p>CHANCE CARD</p> <p>This woman was discharged 2 hours after delivery as there were not enough beds in the PHC.</p> <p>Delete 3 points</p>

<p>CHANCE CARD</p> <p>The doctor was not available in the PHC when this woman developed PPH as she was busy in her private practice.</p> <p>Delete 5 points</p>	<p>CHANCE CARD</p> <p>This ANM performs routine hemoglobin tests for all pregnant women in her community to detect anaemia.</p> <p>Bonus 3 points</p>
<p>CHANCE CARD</p> <p>When the woman with eclampsia came to the PHC, the ANM on duty administered loading dose of Magnesium sulphate before referring her.</p> <p>Bonus 5 points</p>	<p>CHANCE CARD</p> <p>This district has trained PHC medical officers in performing caesarean sections to overcome shortage of gynaecologists.</p> <p>Bonus 5 points</p>
<p>CHANCE CARD</p> <p>This woman with eclampsia had to wait 2 hours in the District Hospital before being seen as the doctors and nurses were having lunch.</p> <p>Delete 5 points</p>	<p>CHANCE CARD</p> <p>This woman with PPH could not be treated at the FRU as there was no blood transfusion facilities available.</p> <p>Delete 5 points</p>