

المجلس التمريضي الأردني Jordanian Nursing Council

Jordanian Midwifery Licensure Exam JMLE (2021-2023) Exam Guide دلیل امتحان مزاولة مهنة القبالة القانونیة

1) Blueprint Matrix for Jordanian Midwifery Licensure Exam (JMLE)

	Domain	Number of
		Questions
1.	Professionalism: ethical & legal aspects, accountability, inter-professional aspects, and leadership.	5 Questions
2.	Well-Women care & sexuality	5 Questions
3.	Preconception	5 Questions
4.	Normal antenatal	15 Questions
5.	High-risk antenatal	15 Questions
6.	Normal childbirth	12 Questions
7.	High-risk childbirth	12 Questions
8.	Normal Postpartum care	5 Questions
9.	High-risk Postpartum care	4 Questions
10.	Family planning	7 Questions
11.	Neonate care	10 Questions
12.	General Adult	5 Questions
	Total	100 Questions
	Cut score	50 Questions

2) Guidelines for exam format

Contextual variables qualify the content domain by specifying the contexts of specialty in which the examination questions will be set.

- Age and Gender: the scope of practice is mainly <u>women</u> oriented, however addressing <u>couples and families</u>' needs across different age groups and gender is also considered.
- Client Culture: the exam is designed to include questions representing the variety of client's cultures encountered when providing midwifery care in Jordan.
- **Health Care Setting:** it is recognized that within the context of midwifery practice, the nurse and midwife may practice within <u>in-patient</u> as well <u>as primary health care settings.</u>
- Health Care Situation: it is recognized that within the context of midwifery care, the client may experience a range of <u>Normal to Abnormal</u>
 <u>care situations.</u>

3) Questions' sample:

I. Professional

When the midwife accepts a client's decision to refuse a pain-relieving intervention, the midwife is honouring the ethical principle of:

- A. Beneficence
- B. Honesty
- C. Autonomy
- D. Justice

II. Well-women care

The common risk for women as a result of menopause is:

- A. Osteoporosis
- B. Alteration in renal function
- C. Central nervous system atrophy
- D. Retinal problem

III. Preconception

The recommended folic-acid supplement for a woman with a past history of a baby with a neural tube defect is:

- A. 4 mg per day starting before conception
- B. 0.4 mg per day starting with a missed period
- C. 2 mg per day prior to conception
- D. 0.4 mg per day throughout pregnancy

IV. Normal Antenatal

The midwife is preparing to monitor the foetal heart rate (FHR). She knows that FHR can first to be heard with a Doppler Ultra Sonic Device at:

- A. Gestational week 5
- B. Gestational week 10
- C. Gestational week 16
- D. Gestational week 22

V. High-Risk Antenatal

The midwife is performing an assessment on a woman who is 28 weeks gestation and notes that the foetal heart rate is 185 Beat/min on the basis of these findings, what is the priority intervention?

- A. Document the findings
- B. Check mother's heart rate
- C. Notify the physician
- D. Tell woman the foetal heart rate is normal

VI. Normal childbirth

A midwife is assisting a woman in third stage of labour to deliver the placenta. Which observation would indicate that the placenta has separated from the uterine wall and is ready for delivery?

- A. The umbilical cord shortens in length
- B. A soft and boggy uterus
- C. Maternal complaints of severe uterine cramping
- D. Changes in the shape of the uterus

VII. High-Risk Childbirth

All the following actions are indicated for all women having high-risk births EXCEPT:

- A. Start an intravenous line in the woman as soon as admitted to the hospital.
- B. Use continuous fetal heart rate and uterine contraction monitoring.
- C. Use only epidural anesthesia
- D. Notify pediatric personnel of maternal/fetal condition as soon as the woman is admitted.

VIII. Normal Postpartum

A midwife is providing instructions to a woman after normal giving birth. The midwife instructs the mother that she should expect normal bowel elimination to return:

- A. One the day of the delivery
- B. Three days postpartum
- C. Seven days postpartum
- D. Within two weeks

IX. High-Risk Postpartum

A woman with gestational diabetes is poorly controlled throughout her pregnancy. She gave birth a baby boy at 38 G/W. Which of the following is prioritized intervention for the neonate during this first 24 hours?

- A. Administer insulin subcutaneously
- B. Administer bolus of Glucose intravenously
- C. Provide frequent early feedings with formula
- D. Avoid oral feeding

X. Family Planning

Which of the following is NOT potential side effect of Depo Provera Injection?

- A. Reduced fertility after stopping injection
- B. Weight changes
- C. Menstrual changes
- D. Numbness

XI. Neonate

A neonate has been diagnosed with caput succedaneum. Which statement is true?

- A. Usually resolves in 3-6 weeks
- B. Edematous area of the scalp
- C. Does not cross cranial suture line
- D. It involves of the tissue over the presenting part of the head

XII. General/Adult

When caring for a woman with viral Hepatitis, the most important precaution probably is:

- A. Hand washing
- B. Using disposable dishes
- C. Gowning and gloving

Getting injection of Immune Serum Globulin (ISG)