

Chapter 1

Client Needs: A-1

Cognitive Level: Knowledge

Integrated Process: Communication & documentation

Objective: 1

Page and Header: 4, Changing Concepts in Maternal-Child Health Care

1. What two major developments greatly influenced the way maternity care is practiced in the United States?
 - A) Technologic advances and the use of forceps by physicians
 - B) Development of anesthesia and acceptance of the germ theory
 - C) Advent of birthing centers and the development of maternity care
 - D) Development of pediatrics as a specialty and replacement of midwives as the primary attendants at births

Ans: B

Feedback:

The development of anesthesia allowed women a choice for pain management in childbirth; the germ theory advanced the progress of general health care and decreased infections in laboring women. Pediatrics did not replace midwives, maternity care continues to evolve, and birthing centers are still under development. Forceps are not considered an advance in maternity care.

Client Needs: A-2

Cognitive Level: Knowledge

Integrated Process: Nursing Process

Objective: 1

Page and Header: 5, Changing Concepts in Maternal Child Health Care

2. Which physician's use of antiseptic in surgery, which greatly improved the survival rate of his patients, led to general acceptance of the germ theory by physicians in Europe and the United States?
 - A) Oliver Wendell Holmes
 - B) Ignaz Philip Semmelweis
 - C) Joseph Lister
 - D) Alexander Gordon

Ans: C

Feedback:

Joseph Lister was a British surgeon who embraced Pasteur's theory of microorganisms as the cause of infection. Lister used carbolic acid as an antiseptic during surgery and improved the survival rates of his patients. Alexander Gordon proposed the theory of infection. Oliver Wendell Holmes and Ignaz Philip Semmelweis confirmed his theory.

Client Needs: A-1

Cognitive Level: Knowledge

Integrated Process: Nursing Process

Objective: 8

Page and Header: 14, Maternal-Child Health Today

3. The period surrounding birth, from conception through pregnancy and birth, is called:
- A) fetal
 - B) neonatal
 - C) perinatal
 - D) maternal

Ans: C

Feedback:

The perinatal period is the pregnancy period; fetal pertains only to the fetus; neonatal includes only the first 28 days of life; and maternal refers to the mother.

Client Needs: B

Cognitive Level: Comprehension

Integrated Process: Caring

Objective: 9

Page and Header: 9, Current Trends in Maternal-Child Health Care

4. Today it is possible to know many things about a child before the child is born. What test would you administer to reveal the gender of the fetus and certain abnormalities early in pregnancy?
- A) Ultrasound
 - B) Amniocentesis
 - C) Chorionic villus sampling
 - D) HGP

Ans: A

Feedback:

Ultrasound is a visual method for assessing the fetus in the uterus. Amniocentesis and chorionic villus sampling provide the entire genetic code of the fetus. HGP refers to the Human Genome Project which can provide information regarding gene mutations and variations.

Client Needs: A-1

Cognitive Level: Knowledge

Integrated Process: Nursing Process

Objective: 1

Page and Header: 5, Changing Concepts in Maternal Child Health Care

5. Which physician is recognized as the father of pediatrics?

- A) Arthur Jacobi
- B) Ren Spitz
- C) Joseph Brennaman
- D) John Bowlby

Ans: A

Feedback:

Arthur Jacobi, a Prussian-born physician, has been recognized as the father of pediatrics. Under his direction, several New York hospitals opened pediatric units. Ren Spitz defined the term anaclitic depression in reference to infants that are separated from their mothers. Joseph Brennaman made the initial connection between infant mortality and lack of stimulation. John Bowlby described the negative results of the separation of child and mother due to hospitalization.

Client Needs: B

Cognitive Level: Comprehension

Integrated Process: Communication & documentation

Objective: 4

Page and Header: 10, Current Trends in Maternal-Child Health Care

6. In an attempt to control Medicare costs, the government developed a system that predetermines rates to be paid to the health care provider. The rates are paid regardless of the costs that the health care provider actually incurs. What is this system called?

- A) Ambulatory payment classifications
- B) Cost sharing
- C) DRGs
- D) Prospective payment system

Ans: D

Feedback:

A prospective payment system predetermines rates to be paid to the health care provider for patients with diseases in certain classifications. These rates are paid regardless of the costs that the health care provider actually incurs. Ambulatory payment classifications and DRGs are forms of prospective payments. Cost sharing refers to the costs that the patient incurs when using his or her health insurance plan.

Client Needs: A-1

Cognitive Level: Knowledge

Integrated Process: Caring

Objective: 8

Page and Header: 6, Current Trends in Maternal-Child Health Care

7. Family-centered pediatric nursing is a new and broadened concept in the health care system of the United States. There is a new norm for postpartum care in which the mother and newborn remain together and receive care from one nurse. What is this new practice called?
- A) Regionalized care
 - B) Maternal-child care
 - C) Hospitalism
 - D) Couplet care

Ans: D

Feedback:

Couplet care is care in which the mother and child remain in the same room after labor/delivery through the postpartum period. This has become the standard of care. Regionalized care places the treatment centers in centralized locations and transfers the patient to the facility. Maternal child care refers to allowing the mother to be the primary provider of care. Hospitalism refers to the harmful effects of institutional care on infants

Client Needs: B

Cognitive Level: Comprehension

Integrated Process: Communication & documentation

Objective: 8

Page and Header: 6, Current Trends in Maternal-Child Health Care

8. Many experts suggest that parents read to their unborn children and play music to provide early stimulation. If a pregnant patient questions you about the likely effect of such activities on the fetus, what could you accurately tell her?
- A) Reading and playing music will develop the infant's musical skill.
 - B) The sound of her voice will comfort the infant.
 - C) The music and language will increase the child's creativity.
 - D) Reading to an unborn child has been shown to improve future language skills.

Ans: B

Feedback:

The fetus can hear while in utero, and playing music or reading to the infant can help connect the infant with the mother and father prior to delivery. There is no evidence of accelerated development in musical skill, language, or creativity in a child that listened to music in utero.

Client Needs: B
Cognitive Level: Knowledge
Integrated Process: Nursing Process
Objective: 5

Page and Header: 13, Payment for Health Services

9. Your patient is a 1-year-old girl from a low-income family presenting with a vitamin D deficiency and anemia. What assistance program do you recommend to the child's young mother?
- A) WIC
 - B) SCHIP
 - C) ECI
 - D) CHIP

Ans: A

Feedback:

WIC is the special supplemental nutrition program for women, infants, and children (WIC) and provides services to supply nutritional food to low-income women and their children. SCHIP or CHIP provides health insurance to newborns and children in low-income families who do not otherwise qualify for Medicaid and are uninsured. The Early Childhood Intervention (ECI) program, sponsored by Easter Seals, is available for the child with disabilities or developmental delays.

Client Needs: B
Cognitive Level: Knowledge
Integrated Process: Nursing Process
Objective: 2

Page and Header: 12, Payment for Health Services

10. Statistics show that more than 44 million people in the United States do not have health insurance. What percentage of this population are children?
- A) 4 percent
 - B) 10 percent
 - C) 25 percent
 - D) 50 percent

Ans: C

Feedback:

Of the 44 million people without insurance, 11 million, or 25% are children.

Client Needs: B

Cognitive Level: Comprehension

Integrated Process: Teaching & Learning

Objective: 5

Page and Header: 14, Maternal-Child Health Today

11. Which of the following is the best statistical indicator of the adequacy of prenatal care?
- A) Fertility rate
 - B) Maternal mortality rate
 - C) Infant mortality rate
 - D) Abortion rate

Ans: B

Feedback:

Maternal mortality rate is the best indicator of a country's level of prenatal care. Increases in prenatal care result in a decrease in maternal mortality. Fertility rate refers to the ratio of live births in an area to the population of that area, and abortion rate is unrelated to prenatal care. Infant mortality is a reflection of postnatal care.

Client Needs: B

Cognitive Level: Application

Integrated Process: Teaching & Learning

Objective: 5

Page and Header: 15, Maternal-Child Health Today

12. Mary Ann said that she learned in her Family Living course that more African-American infants than white infants die before they are 1 year old. In response to her questions about the reasons for this, the nurse accurately answers that the major reason for the high infant mortality rate is:
- A) Having formal education
 - B) Being unmarried
 - C) Income
 - D) Lack of prenatal care

Ans: D

Feedback:

A black woman is 3.5 times more likely to have complications or die during childbirth, a maternal mortality rate directly related to lack of prenatal care secondary to lack of access to services or insurance. Income as well as educational level may play a role in the availability of health care, but they are not directly responsible. Being unmarried has no bearing on infant mortality.

Client Needs: B
Cognitive Level: Knowledge
Integrated Process: Teaching & Learning
Objective: 2

Page and Header: 11, Current Trends in Maternal-Child Health Care

13. Self-care has become more popular in health care over the past 30 years. Self-care is described as:
- A) Passively accepting the advice of health care workers
 - B) Immediate compliance with the directions of health care providers
 - C) Gaining information about and taking an active role in wellness
 - D) Going to the drug store and buying medications as needed

Ans: C

Feedback:

Individuals are more likely now than at times in the past to seek information on health and to take an active role in management of their own health issues. This is the concept of self-care. Passively accepting advice from health care workers, or immediate compliance, was the mode in the early 1950's and 60's. With the advent of the internet, patients are taking a more active and informed role in their own care. The use of drugs in health care is beneficial, but only when used in the care of a physician.

Client Needs: B
Cognitive Level: Knowledge
Integrated Process: Communication & documentation
Objective: 2

Page and Header: 18, The Nurse's Changing Role in Maternal-Child Health Care

14. The physician most likely to provide care to a pregnant woman during her prenatal period and her labor/delivery is what type of physician?
- A) Perinatologist
 - B) Neonatologist
 - C) Family practitioner
 - D) Obstetrician

Ans: D

Feedback:

The obstetrician is the physician of choice for prenatal care through labor and delivery. Perinatologists may care for women who are high-risk pregnancy, and neonatologists provide care to infants. Family practitioner physicians may provide care but are less likely to attend in labor and delivery.

Client Needs: A-2

Cognitive Level: Comprehension

Integrated Process: Nursing Process

Objective: 2

Page and Header: 4, Changing Concepts in Maternal-Child Health Care

15. The most common infection for women after delivery in the 1700s was:
- A) Reproductive tract infection
 - B) Breast infection
 - C) Kidney infection
 - D) Urinary tract infection

Ans: A

Feedback:

Prior to the germ theory, women most often died of puerperal fever, an illness marked by high fever caused by infection of the reproductive tract after delivering infants. Women who delivered in hospitals were more likely to develop this infection than women who delivered at home. Breast infections occurred during breast feeding but were not usually fatal. There was no greater incidence of kidney or urinary tract infections.

Client Needs: D-1

Cognitive Level: Comprehension

Integrated Process: Caring

Objective: 2

Page and Header: 5, Changing Concepts in Maternal Child Health Care

16. The development of what medical treatment was most influential in moving birth from the home into the hospital?
- A) Infection control and germ theory
 - B) Planned cesarean birth
 - C) Instruments to assist in delivery of infants
 - D) Anesthesia and analgesic therapy

Ans: D

Feedback:

Movement from the home to the hospital for delivery of infants began with the use of medications to control pain during labor. This trend started with the wealthy and followed to include more of society. Cesarean births are a more recent development than is anesthesia. Infection control could be maintained at home so it was not a driving force. The use of instruments developed along with cesarean technology.

Client Needs: D-1

Cognitive Level: Application

Integrated Process: Caring

Objective: 2

Page and Header: 6, Changing Concepts in Maternal-Child Health Care

17. The findings by Marshall Klaus and John Kennell in the 1970s and 1980s assisted in the development of what changes in family care?
- A) Limited family visits for children in the hospital
 - B) Family-centered care of today
 - C) Rooming-in for maternity patients
 - D) Isolation of children with infections

Ans: B

Feedback:

Klaus and Kennell conducted studies and determined the optimal outcomes for children occurred when parents had more contact and interaction with the child in the hospital. Limiting visits has detrimental effects on infant development. Rooming in was not as well received, as patients were not comfortable with the loss of privacy. Isolation of children with infections is still a proper precaution.

Client Needs: A-1

Cognitive Level: Application

Integrated Process: Nursing Process

Objective: 3

Page and Header: 11, Current Trends in Maternal-Child Health Care

18. A systematic approach to identification of patient needs and management of patient care defines which practice model?
- A) Case management
 - B) The nursing process
 - C) A clinical pathway
 - D) A health maintenance organization

Ans: A

Feedback:

Managed care is a system that integrates management and coordination of care with financing in an attempt to improve cost-effectiveness, use, quality, and outcomes. The nursing process involves the practice of nursing; it is not a means of cost saving for the patient. The clinical pathway is a treatment regimen. HMO's are insurance organizations.

Client Needs: B

Cognitive Level: Application

Integrated Process: Teaching & learning

Objective: 2

Page and Header: 8, Current Trends in Maternal-Child Health Care

19. The primary focus of the Human Genome Project (HGP) is:

- A) Genetic testing in adults
- B) Detection of genetic mutations in children
- C) Identification of human genes and functions
- D) Treatment of gene mutations

Ans: C

Feedback:

The Human Genome Project was begun in 1990 and the primary purpose was to identify and label all human genes and their functions. Information from the HGP may eventually be used in genetic testing, the detection of mutations or variations in children, and gene therapy, but that is not yet possible.

Client Needs: B-2

Cognitive Level: Knowledge

Integrated Process: Teaching & learning

Objective: 5

Page and Header: 14, Maternal-Child Health Today

20. Which of the following statements correctly defines the term “perinatal death rate”?

- A) Number of deaths in utero of fetuses 500 g or more per 1,000 live births
- B) Number of deaths occurring in the first 28 days of life per 1,000 live births
- C) Number of deaths occurring at birth or in the first 12 months of life per 1,000 live births
- D) Number of deaths from the time the fetus reaches 500 g until 28 days after birth per 1,000 live births

Ans: D

Feedback:

The term “perinatal” refers to the time of birth as well as the period closely following it, or the time “around birth.” Neonatal mortality rate is the number of infant deaths during the first 28 days of life for every 1,000 live births. Infant mortality rate is the number of deaths during the first 12 months of life per 1,000 live births.

Client Needs: B

Cognitive Level: Application

Integrated Process: Nursing Process

Objective: 8

Page and Header: 18, The Nurse's Changing Role in Maternal-Child Health Care

21. You are discussing health care provider options with a patient. She indicates she felt her doctor was too busy for her during her last pregnancy and wants to know what her options are for receiving care during her pregnancy and for labor and delivery. Which of the following is the best option?
- A) Women's health nurse practitioner
 - B) Certified nurse midwife
 - C) Lay midwife
 - D) Clinical nurse specialist

Ans: B

Feedback:

A certified nurse midwife is a nurse with advanced practice training in the care of women, specific to pregnancy and delivery. A women's health NP would not be able to deliver the infant. A CNS is not able to be a health care provider, and the lay midwife is not an option for health care.

Client Needs: A-1

Cognitive Level: Comprehension

Integrated Process: Nursing Process

Objective: 10

Page and Header: 21, The Nursing Process

22. Identify the first step in the nursing process.
- A) Nursing diagnosis
 - B) Planning
 - C) Assessment
 - D) Evaluation

Ans: C

Feedback:

Assessment is the first step in the nursing process. The nurse must complete the assessment and gather information to advance the nursing process. Nursing diagnosis is based on actual or potential health problems that fall within the range of nursing practice. Evaluation measures the success or failure of the nursing plan of care. Planning is a stage of execution.

Client Needs: A-1

Cognitive Level: Application

Integrated Process: Nursing Process

Objective: 10

Page and Header: 21, The Nursing Process

23. When developing a wellness diagnosis, the nurse knows that the goal associated with this diagnosis is:
- A) Identification of acute health problems
 - B) Identification of potential problems
 - C) Identification of the potential for improvement in health
 - D) Identification of chronic health problems

Ans: C

Feedback:

Wellness diagnosis identifies the potential for a patient to move from one level of wellness to a higher level. The identification of potential, acute, and chronic health problems is part of the diagnostic process.

Client Needs: B

Cognitive Level: Application

Integrated Process: Nursing Process

Objective: 7

Page and Header: 10, Current Trends in Maternal-Child Health Care

24. The primary focus of health care education by nurses to clients is:
- A) Health promotion
 - B) Disease prevention
 - C) Acute disease treatment
 - D) Rehabilitation to pre-disease state

Ans: A

Feedback:

The current movement in health care is to focus on health promotion and thereby prevent future illness and diseases. Prevention, treatment, and rehabilitation are all processes of care. In health care today, the treatments are based on prevention in order to save time, money, and improve the quality of life.

Client Needs: A-1

Cognitive Level: Comprehension

Integrated Process: Caring

Objective: 1

Page and Header: 16, Maternal-Child Health Today

25. Morbidity rates among children are most highly associated with which cause?
- A) Firearms at home
 - B) School violence
 - C) Environmental factors
 - D) Suicide and homicide

Ans: C

Feedback:

The factors most commonly associated with child morbidity are environmental and socioeconomic problems. The more difficult the societal issues and the more marked the environmental poverty, the higher the illness rates and childhood morbidity.

Firearms, violence in schools, homicide, and suicide are all factors in morbidity, but they are not strictly related to children.