

# **Lowdermilk: Maternity & Women's Health Care, 10th Edition**

## **Chapter 01: 21st Century Maternity and Women's Health Nursing**

### **Test Bank**

#### **MULTIPLE CHOICE**

1. To assess a mother's risk of having a low-birth-weight (LBW) infant, what is the most important factor for the nurse to consider?

- a. African-American race
- b. Cigarette smoking
- c. Poor nutritional status
- d. Limited maternal education

ANS: A

For African-American births, the incidence of LBW infants is twice that of Caucasian births. Race is a nonmodifiable risk factor.

Cigarette smoking is an important factor in potential infant mortality rates, but it is not the most important. Additionally, smoking is a modifiable risk factor.

Poor nutrition is an important factor in potential infant mortality rates, but it is not the most important. Additionally, nutritional status is a modifiable risk factor.

Maternal education is an important factor in potential infant mortality rates, but it is not the most important. Additionally, maternal education is a modifiable risk factor.

DIF: Cognitive Level: Comprehension REF: 5

OBJ: Client Needs: Health Promotion and Maintenance: Antepartum Care

TOP: Nursing Process: Assessment

2. What is the primary role of practicing nurses in the research process?

- a. Designing research studies
- b. Collecting data for other researchers
- c. Identifying researchable problems

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d. Seeking funding to support research studies

ANS: C

When problems are identified, research can be conducted properly. Research of health care issues leads to evidence-based practice guidelines.

Designing research studies is only one factor of the research process.

Data collection is one factor of research.

Financial support is necessary to conduct research, but it is not the primary role of the nurse in the research process.

DIF: Cognitive Level: Comprehension REF: 14

OBJ: Client Needs: Safe and Effective Care Environment

TOP: "Nursing Process: Diagnosis, Evaluation"

3. The nurse should be aware that a statistic widely used to compare the health status of different populations is the:

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- Incidence of specific infections, such as acquired immunodeficiency syndrome (AIDS) and
- a. tuberculosis
  - b. Infant mortality rate
  - c. Maternal morbidity rate
  - d. Incidence of low-birth-weight (LBW) infants
- 

ANS: B

City, county, and state health departments provide annual reports of births and deaths. Maternal and infant death rates are particularly important because they reflect health outcomes that may be preventable. Infant mortality continues to be a concern in all populations.

AIDS and tuberculosis may be the target of research studies; however, maternal and infant mortality rates are particularly important in the evaluation of the health of a population.

The number of maternal deaths in the United States is small; however, worldwide many women die each year from problems related to pregnancy and childbirth.

The incidence of LBW infants is monitored in order to determine risk factors such as racial disparity. It is not as widely used as infant mortality.

DIF: Cognitive Level: Knowledge REF: 5

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Assessment

4. Alternative and complementary therapies:

- 
- a. Replace conventional Western modalities of treatment
  - b. Are used by only a small number of American adults
  - c. Allow for more client autonomy
  - d. Focus primarily on the disease an individual is experiencing
- 

ANS: C

City, county, and state health departments provide annual reports of births and deaths. Maternal and infant death rates are particularly important because they reflect health outcomes that may be preventable. Infant mortality continues to be a concern in all populations.

Alternative and complementary therapies are part of an integrative approach to health care.

An increasing number of American adults are seeking alternative and complementary health care options.

Alternative healing modalities offer a holistic approach to health, focusing on the whole person and not just the disease.

DIF: Cognitive Level: Comprehension REF: 3

OBJ: Client Needs: Physiologic Integrity

TOP: Nursing Process: Planning

5. The nurses working at a newly established birthing center have begun to compare their performance in providing maternal-newborn care against clinical standards. This comparison process, designed to improve the quality of client care, is called:

- 
- a. Best practices network
  - b. Clinical benchmarking
  - c. Outcomes-oriented care
  - d. Evidence-based practice
-

ANS: C

Outcomes-oriented care measures effectiveness of interventions and quality of care against benchmarks or standards.

The term *best practice* refers to a program or service that has been recognized for excellence.

Clinical benchmarking is a process used to compare one's own performance against the performance of the best in an area of service.

The term *evidence-based practice* refers to the provision of care based on evidence gained through research and clinical trials.

DIF: Cognitive Level: Comprehension REF: 11

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Evaluation

6. Contemporary maternity nursing is exemplified by:

- a. The use of midwives for all vaginal deliveries
- b. Family-centered care
- c. Free-standing birth clinics
- d. Physician-driven care

ANS: B

Contemporary maternity nursing focuses on the family's needs and desires.

Midwives and physicians both perform vaginal deliveries.

Free-standing clinics are an example of alternative birth options.

Contemporary maternity nursing is driven by the relationship between nurses and their clients.

DIF: Cognitive Level: Comprehension REF: 8

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Planning

7. A 38-year-old Hispanic woman delivered a 9-lb, 6-oz baby girl vaginally after being in labor for 43 hours. The baby died 3 days later from sepsis. On what grounds could the woman have a legitimate legal case for negligence?

- a. She is Hispanic.
- b. She delivered a girl.
- c. If the standards of care were not met.
- d. She refused fetal monitoring.

ANS: C

Not meeting the standards of care is a legitimate factor for a case of negligence.

The client's race is not a factor for a case of negligence.

The infant's gender is not a factor for a case of negligence.

Although fetal monitoring is the standard of care, the client has the right to refuse treatment. This refusal is not a case for negligence, but informed consent should be properly obtained, and the client should sign an against medical advice form for refusal of any treatment that is within the standard of care.

DIF: Cognitive Level: Analysis REF: "11, 12"

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Implementation

8. The National Quality Forum has issued a list of "never events" pertaining specifically to maternal and child health. These include all *except*:

- a. Infant discharged to the wrong person
- b. Kernicterus associated with failure to identify and treat hyperbilirubinemia
- c. Artificial insemination with wrong donor sperm or egg
- d. Foreign object retained after surgery

ANS: D

Although a foreign object retained after surgery is a never event, this does not pertain specifically to obstetric clients. A client undergoing any type of surgery may be at risk for this event.

An infant discharged to the wrong person pertains specifically to postpartum care.

Death or serious disability as a result of kernicterus pertains to newborn assessment and care.

Artificial insemination affects families seeking care for infertility.

DIF: Cognitive Level: Knowledge REF: 4

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Implementation

9. An important development that concerns maternity nursing is integrative health care, which:

- 
- a. Seeks to provide the same health care for all racial and ethnic groups
  - b. Blends complementary and alternative therapies with conventional Western treatment
  - c. Focuses on the disease or condition rather than the client's background
  - d. Has been mandated by Congress
- 

ANS: B

Integrative health care tries to mix the old with the new at the discretion of the client and health care providers.

Integrative health care is a blending of new and traditional practices.

Integrative health care focuses on the whole person, not just the disease or condition.

U.S. law supports complementary and alternative therapies but does not mandate them.

DIF: Cognitive Level: Knowledge REF: 3

OBJ: Client Needs: Physiologic Integrity

TOP: Nursing Process: Planning

10. A nurse caring for a pregnant client should be aware that the U.S. birth rate shows what trend?

- 
- a. Births to unmarried women are more likely to have less favorable outcomes.
  - b. Birth rates for women 40 to 44 years of age are declining.
-

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c. Cigarette smoking among pregnant women continues to increase.

The rates of pregnancy and abortion among teens are lower in the United States than in any other industrialized country.

ANS: A

Low-birth-weight infants and preterm birth are more likely because of the large number of teenagers in the unmarried group.

Birth rates for women in their early 40s continue to increase.

Fewer pregnant women smoke.

Teen pregnancy and abortion rates are higher in the United States than in any other industrial country.

DIF: Cognitive Level: Comprehension REF: 5

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment

11. The high cost of health care in the United States is most likely a result of:

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a. Early postpartum discharge policies

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b. Midwifery care

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c. The involvement of nurses in the politics of cost containment

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d. An emphasis on the use of advanced technology in care

ANS: D

The use of advanced technology in care increases costs. Caring for the increased number of low-birth-weight infants in neonatal intensive care unit (NICU) settings contributes significantly to increased health care costs.

Early discharges reduce costs.

Midwifery care reduces costs.

Involvement of nurses should ameliorate costs.

DIF: Cognitive Level: Comprehension REF: 4

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Assessment

12. Maternity nursing care that is based on knowledge gained through research and clinical trials is:

- 
- a. Derived from the Nursing Intervention Classification
  - b. Known as evidence-based practice
  - c. At odds with the Cochrane School of traditional nursing
  - d. An outgrowth of telemedicine
- 

ANS: B

Evidence-based practice is based on knowledge gained from research and clinical trials.

The Nursing Intervention Classification is a method of standardizing language and categorizing care.

Dr. Cochrane systematically reviewed research trials and is part of the evidence-based practice movement.

Telemedicine uses communication technologies to support health care.

DIF: Cognitive Level: Comprehension REF: 9

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Diagnosis

13. The level of practice a reasonably prudent nurse provides is called:

- 
- a. The standard of care
  - b. Risk management
  - c. A sentinel event
  - d. Failure to rescue
- 

ANS: A

Guidelines for standards of care are published by various professional nursing organizations.



Risk management identifies risks and establishes preventive practices, but it does not define the standard of care.

Sentinel events are unexpected negative occurrences. They do not establish the standard of care.

Failure to rescue is an evaluative process for nursing, but it does not define the standard of care.

DIF: Cognitive Level: Knowledge REF: 12

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Implementation

14. During a prenatal intake interview, the client informs the nurse that she would prefer a midwife to provide both her care during pregnancy and deliver her infant. What information is most appropriate for the nurse to share with this client?

- 
- Midwifery care is only available to clients who are uninsured because their services are less
- a. expensive than an obstetrician. Costs are often lower than an obstetric provider.
  - b. The client will receive fewer interventions during the birth process.
  - c. She should be aware that midwives are not certified.
  - d. Her delivery can take place only at home or in a birth center.
- 

ANS: B

This client will be able to participate actively in all decisions related to the birth process and is likely to receive fewer interventions during the birth process.

Midwifery services are available to all low risk pregnant women, regardless of the type of insurance they have.

Midwifery care in all developed countries is strictly regulated by a governing body that ensures that core competencies are met. In the United States, this body is the American College of Nurse-Midwives (ACNM).

Midwives can provide care and delivery at home, in freestanding birth centers, and in community and teaching hospitals.

DIF: Cognitive Level: Comprehension REF: 8

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Planning

15. While obtaining a detailed history from a woman who has recently immigrated from Somalia, the nurse realizes that the client has undergone female genital mutilation. The nurse's best response to this client is:

- a. "This is a very abnormal practice and rarely seen in the United States."
- b. "Are you aware of who performed this so that it can be reported to the authorities?"
- c. "We will be able to fully restore your circumcision after delivery."
- d. "The extent of your circumcision will affect the potential for complications."

ANS: D

The extent of the circumcision is important. The client may experience pain, bleeding, scarring, or infection and may require surgery prior to childbirth.

Although this practice is not prevalent in the United States, it is very common in many African and Middle Eastern countries for religious reasons. Mentioning that the practice is abnormal and rarely seen in the United States is culturally insensitive.

The infibulation may have occurred during infancy or childhood. The client will have little to no recollection of the event. She would have considered this to be a normal milestone during her growth and development.

The International Council of Nurses has spoken out against this procedure as harmful to a woman's health.

DIF: Cognitive Level: Analysis REF: "8, 9"

OBJ: Client Needs: Psychosocial Integrity

TOP: Nursing Process: Assessment

16. In order to ensure client safety, the practicing nurse must have knowledge of The Joint Commission's current "Do Not Use" list of abbreviations. Which term is acceptable for use regarding medication administration?

- a. q.o.d. or Q.O.D
- b. MSO4 or MgSO4
- c. International Unit
- d. Lack of a leading zero

ANS: C

I.U. and i.u. are no longer acceptable because they could be misread as “I.V.” or the number 10.

Q.O.D. should be written out as “every other day.” The period after the “Q” could be mistaken for an “I” and the “o” could also be mistaken for an “i.”

It is too easy to confuse one medication for another. These medications are used for very different purposes and could put a client at risk for an adverse outcome. They should be written as *morphine sulfate* and *magnesium sulfate*.

The decimal point should never be missed before a number, to avoid confusion; i.e., 0.4 rather than .4. A leading zero is the preferred term.

DIF: Cognitive Level: Knowledge REF: 13

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Implementation

17. Maternity nurses can enhance communication among health care providers by utilizing the SBAR technique. This acronym stands for:

- 
- a. Situation, Background, Assessment, Recommendation
  - b. Situation, Baseline, Assessment, Recommendation
  - c. Subjective, Background, Analysis, Recommendation
  - d. Subjective, Background, Analysis, Review
- 

ANS: A

SBAR is an easy to remember, useful, concrete mechanism for communicating important information that requires a clinician’s immediate attention.

*Baseline* is not discussed as part of SBAR.

*Subjective* and *analysis* are not specific to the SBAR acronym.

*Subjective*, *analysis*, and *review* are not specific to the SBAR acronym.

DIF: Cognitive Level: Application REF: “13, 14”

OBJ: Client Needs: Safe and Effective Care Environment

TOP: Nursing Process: Implementation

## MULTIPLE RESPONSE

1. Examples of alternative healing modalities include (choose all that apply):

- a. Acupuncture
- b. Meditation
- c. Yoga
- d. Antibiotics
- e. Chelation therapy

ANS: A, B, C, E

Acupuncture, meditation, yoga, and chelation therapy are examples of alternative healing modalities.

Western medicine uses antibiotics. Macrobiotics are commonly used as an alternative therapy.

DIF: Cognitive Level: Comprehension REF: 3

OBJ: Client Needs: Physiologic Integrity

TOP: "Nursing Process: Planning, Intervention"

2. Which methods help alleviate the problems associated with access to health care for the maternity client? Choose all that apply.

- a. Provide transportation to prenatal visits.
- b. Provide child care so that a pregnant woman may keep prenatal visits.
- c. Increase the number of providers that will care for Medicaid clients.
- d. Provide low-cost or no-cost health care insurance.
- e. Provide job training.

ANS: A, B, C, D

Lack of transportation to visits, lack of child care, access to skilled obstetric providers, and lack of affordable health insurance are prohibitive factors associated with lack of prenatal care.

Although job training may result in employment and income, the likelihood of significant changes during the time frame of the pregnancy is remote.

DIF: Cognitive Level: Evaluation REF: 4

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Planning

**TRUE/FALSE**

1. Researchers have found that most client education materials used are written at too high a reading level for the average adult. Is this true or false?

ANS: T

As a result of the increasing multicultural U.S. population, there is an urgent need to address health literacy as a component of culturally and linguistically competent care. Health care providers contribute to health literacy by using simple common words, avoiding jargon, and developing appropriate written materials.

DIF: Cognitive Level: Evaluation REF: 5

OBJ: Client Needs: Health Promotion and Maintenance

TOP: Nursing Process: Planning