

ATI – Form C

1. A nurse is caring for a client who is 2 weeks postpartum following a cesarean birth. Which of the following clinical findings should the nurse identify as an indication of postpartum infection? **ATI PAGE 143**

- a. Persistent abdominal striae
- b. Unilateral breast pain**
- c. WBC count 12,000/mm³
- d. Lochia alba

2. A nurse is assessing a client who has preeclampsia during a prenatal visit. Which of the following should the nurse report to the provider?

- a. Blood glucose 110 mg/dL
- b. Urine protein of 3+**
- c. Hemoglobin 13 g/dL
- d. Deep tendon reflexes of 2+

3. A nurse is providing teaching about the expected effects of magnesium sulfate to a client who is at 28 weeks of gestation and has preeclampsia. Which of the following responses by the nurse is appropriate?

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- a. This medication prevents seizures**
- b. This medication stabilizes the fetal heart rate
- c. This medication increases cardiac output
- d. This medication improves tissue perfusion

4. A nurse is teaching a prenatal class regarding false labor. Which of the following information should the nurse include? **ATI PAGE 76**

- a. You will have dilation and effacement of the cervix
- b. Your contractions will become temporarily regular**
- c. You will have bloody show
- d. Your contractions will become more intense when walking

5. A nurse manager is revising a maternal unit policy to ensure proper identification of newborns. Which of the following should the nurse include in the policy? **ATI PAGE 164**

- a. Check the newborn's identification using the crib card
- b. Replace the infant's identification band after his name has been recorded
- c. Require visitors to wear an identification band
- d. Obtain an imprint of the infant's feet prior to taking him to the nursery**

6. A nurse is caring for a client who delivered by cesarean birth 6 hr ago. The nurse notes a steady trickle of vaginal bleeding that does not stop with fundal massage. Which of the following actions should the nurse take? **ATI PAGE 136**

- a. Replace the surgical dressing
- b. Administer 500 mL lactated ringer's IV bolus**
- c. Apply an ice pack to the incision site
- d. Evaluate urinary output

7. A nurse is providing discharge instructions to a client who is postpartum and has engorged breasts. Which of the following nonpharmacological comfort measures should the nurse include in the teaching?

- a. Wear nipple shields during the feeding
- b. Apply cabbage leaves after feedings**
- c. Use a breast binder for 2 days
- d. Use plastic-lined breast pads

8. A nurse is calculating the estimated date of birth using Nagele's rule for a client who is pregnant and whose last menstrual cycle started June 21. Which of the following is the estimated date of delivery in the next year?

- a. March 14
- b. March 28**
- c. March 21
- d. April 4

9. A nurse is caring for a client immediately following the delivery of a stillborn fetus. Which of the following actions should the nurse take? **ATI PAGE 40**

- a. Prepare the client for what to expect the fetus to look like**
- b. Instruct the client that an autopsy should be performed within 24 hr
- c. Inform the client that the law requires her to name the fetus
- d. Limit the amount of time the fetus is in the client's room

10. A nurse is observing an adolescent client who is offering her newborn a bottle while he is lying in the bassinet. When the nurse offers to pick the newborn up and place him in the client's arms, the mother states, "No, the baby is too tired to be held." Which of the following actions should the nurse take?

- a. Offer to take the newborn to the nursery to finish his feeding
- b. Persuade the client to breastfeed the newborn to promote bonding
- c. Insist that the mother pick up the newborn to feed him
- d. Demonstrate how to hold the newborn and allow the client to practice**

11. A nurse is caring for a client who is in labor. Which of the following findings should prompt the nurse to reassess the client?

- a. A sense of excitement and warm, flushed skin
- b. An urge to have a bowel movement during contractions**
- c. Intense contractions lasting 45 to 60 seconds
- d. Progressive sacral discomfort during contractions

12. A nurse is assessing a client who is at 27 weeks of gestation and has preeclampsia. Which of the following findings should the nurse report to the provider?

- a. Hemoglobin 14.8 g/dL
- b. Platelet count 60,000/mm³**
- c. Urine protein concentration 200 mg/24 hr
- d. Creatinine 0.8 mg/dL

13. A nurse in a clinic is preparing to measure the fundal height of a client who is pregnant. Which of the following actions should the nurse take? **ATI PAGE 15**

- a. Place the client in a left-lateral position to obtain the measurement
- b. Measure from the upper border of the symphysis pubis to the upper border of the fundus**
- c. Ensure that the client has a full bladder before taking the measurement
- d. Lay the tape measure horizontally over the middle of the client's abdomen

14. A nurse is caring for a client who is at 20 weeks of gestation and reports constipation. Which of the following recommendations should the nurse make to help relieve this common discomfort of pregnancy?

- a. Take 60 mL of magnesium hydroxide once daily
- b. Drink 2 to 3 L of water each day**