2023 ATI RN Maternal Newborn Proctored 2019 NGN (REVISED FULL EXAM)

1.A nurse is using Nagele's Rule to calculate the expected delivery date of a client who reports that the first day of her last menstrual cycle was July 28th. Which of the following dates should the nurse document as the client's expected delivery date?

- a. May 5th-3 months & + 7 days
- b. April 21st
- C. --
- d. --
- A nurse is caring for a client who is in active labor and has gonorrhea. For which of the following potential complications of gonorrhea should the nurse monitor? *OB
 Prologue*
 - a. Excessive bleeding after birth
 - b. Vaginal laceration during birth
 - c. Oligohydramnios
 - d. Chorioamnionitis-infection of the membranes
- **3.** A nurse is providing teaching to a postpartum client who has a prescription for a rubella immunization. Which of the following client statements indicates understanding of the teaching?
 - a. "I will receive a series of three immunizations and each one will be a month apart"
 - b. "I should avoid breastfeeding for 2 weeks following the immunization"c. "I should avoid becoming pregnant for at least 1 month followingthe immunization"
 - d. "I will report joint pain that develops after the immunization to my provider immediately"
- A nurse is providing prenatal teaching to a client who practices a vegan diet and is trying to increase intake of vitamin B12 which of the following foods should the nurse recommend? a.
- b. Fresh citrus fruits high in vitamin C
- c. Carrots
- d. Fortified Soy milk

- **5.** A nurse is performing an initial assessment of a newborn who was delivered with a nuchal cord. Which of the following clinical findings should the nurse expect? ***OB Prologue***
 - a. Periauricular papillomas
 - b. Telangiectatic nevi-stork bites; flat pink or red marks that easily blanch & are found on theback of the neck, nose, upper eyelid, and middle of the forehead; usually fade by 2nd year of life
 - c. <mark>Petechiae</mark>
 - d. Erythema toxic newborn rash
- **6.** A nurse is caring for a newborn who is 6 hr old and has a bedside glucometer reading of 65 mg/dL. The newborn's mother has type 2 diabetes mellitus. Which of the following actions should the nurse take?
 - a. Administer 50 mL of dextrose solution IV.
 - b. Feed the newborn immediately
 - c. ???? for serum glucose level
 - d. Recheck prior to next feeding
- 7. A nurse in a prenatal clinic is reviewing the laboratory results for a client who is at 12 weeks of gestation. Which of the following actions should the nurse take? (Click on the "exhibit" button for additional information about the client. There are three tabs that contain separate categories of data.) Neisseria gonorrhoeae in prenatal history exhibit 3
 - a. Obtain a maternal serum alpha-fetoprotein specimen
 - b. Obtain a blood culture
 - c. Administer ceftriaxone IMATI pg. 53 Gonorrhea (Neisseria gonorrhoeae)
 - d. Administer rubella vaccine
- **8.** A client who is at 16 weeks of gestation asks a nurse how to prepare her toddler to have a younger sibling. Which of the following statements should the nurse make?
 - a. "You should hold your newborn in your arms when you introduce him to your toddler"
 - b. "you should place your toddler in time-out if she exhibits regressive behavior after the baby is born"
 - c. "You should give your toddler a gift from the baby when she visits you in the facility"
 - d. "You should move your toddler out of her crib 2 weeks prior to your due date"

9. A nurse is planning care for a newborn who is scheduled to start phototherapy using a lamp. Which of the following actions should the nurse include in the plan?

- Dress the newborn in a thin layer of clothing during therapy.
 b. Ensure the newborn's eyes are closed beneath the shield.
- c. Give the newborn 1 oz of glucose water every 4 hr.

- d. Apply a thin layer of lotion to the newborn's skin every 8 hr.
- **10.** A nurse is assessing a client during her first prenatal visit. The client reports March 20 as her last menstrual period. Use naegele's rule to calculate the estimated date of delivery. (Use the

MMDD format with four numerals and no spaces or punctuation). (FILL IN) 1227-3

months & + 7 days

- **11.** A nurse is caring for a client who has a placenta previa. Which of the following findings should the nurse expect?
 - a. Firm, rigid abdomen-abrupto placentae
 - b. Painless, vaginal bleeding
 - c. Uterine hypertonicity
 - d. --
- **12.** A nurse manager on the labor and delivery unit is teaching a group of newly licensed nurses about maternal **cytomegalovirus.** Which of the following information should the nurse manager include in the teaching?
 - a. Transmission can occur via the saliva and urine of the newbornATI pg. 50 (its droplet)
 - b. Lesions are visible on the mother's genitalia
 - c. ???? that airborne precautions be initiated for the newborn"
 - d. ???? with acyclovir prior to delivery"
- **13.** A nurse is providing discharge instructions to a client who is 24 hr postpartum and has decided not to breastfeed. Which of the following instructions should the nurse include in the teaching? ***OB Prologue***
 - a. "Pump your breasts twice daily to relieve discomfort from engorgement."
 - b. "Shower daily, allowing warm water to run directly over your breasts."
 - c. "Apply ice to your breasts using a 15 minutes on, 45 min offschedule." d. --
- 14. A nurse is assessing a client who is 32 weeks of gestation and is receiving magnesium sulfate via continuous IV infusion. Which of the following findings should the nurse report to the provider? *OB Prologue*
 - a. BP 150/100 mm Hg
 - b. Decrease in frequency of contractions
 - c. Urinary output 35 mL/hr
 - d. Absent deep-tendonreflexes

15. A nurse is caring for a newborn who has **exstrophy of the bladder.** Which of the following actions -- surgical correction? ***OB Prologue*** same as 16 laugh out loud!!

- a. Keep the newborn in a side-lying position.
- b. Restrict the newborn's fluid intake.
- c. Cover the newborn's bladder with a sterile, non-adherent dressing.
- d. Exert gentle pressure on the newborn's bladder with sterile gauze.

16. A nurse is caring for a newborn who has exstrophy of the bladder. Which of the following actions should the nurse take prior to the beginning of surgical correction? ***OB Prologue***

- a. Keep the newborn in a side-lying position
- b. Restrict newborn's fluid intake
- c. Cover the newborn's bladder with sterile, non-adherent dressing
- d. Exert gentle pressure on the newborn's bladder with sterile gauze

17. A nurse is teaching a client and her partner about the technique of counter pressure during labor. Which of the following statements by the nurse is appropriate?

- a. "Your partner will apply upward pressure on your lower abdomen between contractions."
- b. "Your partner will apply pressure to the top of your uterus during contractions."
- c. "Your partner will apply steady pressure with a tennis ball to your lowerback."
- d. "Your partner will apply continuous, firm pressure between your thumb and indexfinger."

18. A nurse is providing dietary teaching to a client who is at 32 weeks of gestation and has **cholelithiasis.** Which of the following foods should the nurse recommend for the client to include in her diet?

- a. Bacon cheeseburger
- b. French fried
- c. Baked chickencholelithiasis is the formation ofgallstones.
- d. Whole milk

19. A nurse is caring for a client who is at **32 weeks of gestation** and has gestational diabetes mellitus. Which of the following findings should the nurse report to the provider?

- a. The client has a fundal height of 38 cm. Should range + or 2 cm . (the fundal height should be 32cm, 38cm is way too big and the baby is macrosomic)
- b. The client reports 12 fetal movements in 1 hr.
- c. The client has a fasting blood glucose of 90 mg/dL.
- d. The client has non-pitting pedal edema.

20. A nurse is caring for a client who is at 30 weeks of gestation and receiving magnesium sulfate for preeclampsia. The nurse should recognize which of the following manifestations as an adverse reaction to the medication? ***OB Prologue***

- a. Respiratory rate 16/min
- b. Hyperglycemia
- c. Hypertension
- d. 20 ml/hrurine
- **21.** A nurse is assessing a client who is 6 hr postpartum and has endometritis. Which of the following findings should the nurse expect?
 - a. WBC count 9,000/mm3
 - b. Uterine tenderness (course hero)
 - c. Temperature 37.4 C (99.3 F)
 - d. Scant lochia

Rationale: Endometritis is a phenomenon of occurrence of the inflammation of the endometrium lining. Some of the common symptoms of endometritis are abnormal vaginal bleeding, pain in the abdomen, and fever. Scant lochia is the bloody discharge associated with the postpartum after delivery of the child.

22. A nurse is providing discharge instructions to a client who is breastfeeding her newborn. Which of the following instructions should the nurse include? *OB Prologue*

- a. Offer the newborn 30 mL (1oz) of water between feedings
- b. Expect two to four wet diapers every 24 hrc. Allow the baby to feed at least every 3hr
- d. Feed the newborn 5-10 mins per breast (at least 15-20 minutes)
- **23.** A nurse is reviewing the electronic medical record of a postpartum client. The nurse should identify which of the following factors places the client at risk for an infection?
 - a. Placenta previa
 - b. Midline episiotomy(course hero)
 - c. Meconium-stained fluid
 - d. Gestational hypertension

Rationale: Midline episiotomy is associated with the occurrence of the higher risk of postpartum perineal infections in the women after delivery. It is associated with an increasing pain, discharge, edema.

- **24.** A nurse is caring for a client who is in labor and just received epidural anesthesia. The client's blood pressure is 90/58 mm Hg. Which of the following actions should the nursetake?
- *OB Prologue*
 - a. Turn the client on their side.