

HESI Maternity Exam

Which finding for a client in labor at 41weeks gestation requires additional assessment by the nurse?

- Cervix dilated 2 cm and 50% effaced.
- Score of 8 on the biophysical profile.
- Fetal heart rate of 116 beats per
- minute. **One fetal movement noted in an**
- hour.**

A client at 28weeks gestation arrives at the labor and delivery unit with a complaint of bright red, painless vaginal bleeding. For which diagnostic procedure should the nurse prepare the client?

- Contraction stress test.
- Internal fetal monitoring.
- Abdominal ultrasound.**
- Lecithinsphingomyelin ratio.
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A multiparous client delivered a 7 lb 10 oz infant 5 hours ago. Upon fundal assessment, the nurse determines the uterus is boggy and is displaced above and to the right of the umbilicus. Which action should the nurse implement next?

- Document the color of the lochia.
- Observe maternal vital signs.
- Assist the client to the bathroom.**
- Notify the healthcare provider.
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A multiparous client is experiencing bleeding 2 hours after a vaginal delivery. What action should the nurse implement next?

- Determine the firmness of the fundus. Give oxytocin (Pitocin) intravenously.
- Inform the healthcare provider of the bleeding. Assess the vital signs for indicators of shock.

The nurse notes a pattern of the fetal heart rate decreasing after each contraction. What action should the nurse implement?

- Give 10 liters of oxygen via face mask.
- Prepare for an emergency cesarean section.
- Continue to monitor the fetal heart rate pattern. Obtain an oral maternal temperature.

A client at 28weeks gestation experiences blunt abdominal trauma. Which parameter should the nurse assess first for signs of internal hemorrhage?

- Vaginal bleeding.
- Complaints of abdominal pain.
- Changes in fetal heart rate patterns. Alteration in maternal blood pressure.