

# HESI PN MATERNITY EXAM-WITH LATEST SOLUTIONS 2023/2024

## HESI OB 2021

• At 14-weeks gestation, a client arrives at the Emergency Center complaining of a dull pain in the right lower quadrant of her abdomen. The LPN/LVN obtains a blood sample and initiates an IV. Thirty minutes after admission, the client reports feeling a sharp abdominal pain and a shoulder pain. Assessment findings include diaphoresis, a heart rate of 120 beats/minute, and a blood pressure of 86/48. Which action should the nurse implement next?

C. Increase the rate of IV fluids.

• During a prenatal visit, the LPN/LVN discusses with a client the effects of smoking on the fetus. When compared with nonsmokers, mothers who smoke during pregnancy tend to produce infants who have

D. a higher rate of congenital anomalies.

• Which action should the LPN/LVN implement when preparing to measure the fundal height of a pregnant client?

A. Have the client empty her bladder.

5) One hour after giving birth to an 8-pound infant, a client's lochia rubra has increased from small to large and her fundus is boggy despite massage. The client's pulse is 84 beats/minute and blood pressure is 156/96. The healthcare provider prescribes Methergine 0.2 mg IM q 1. What action should the LPN/LVN take immediately?

D. Call the healthcare provider to question the prescription.

7) A client at 32-weeks gestation comes to the prenatal clinic with complaints of pedal edema, dyspnea, fatigue, and a moist cough. Which question is most important for the LPN/LVN to ask this client?

D. Do you have a history of rheumatic fever?

• Immediately after birth a newborn infant is suctioned, dried, and placed under a radiant warmer. The infant has spontaneous respirations and the nurse assesses an apical heart rate of 80 beats/minute and respirations of 20 breaths/minute. What action should the LPN/LVN perform next?

A. Initiate positive pressure ventilation

- A pregnant woman comes to the prenatal clinic for an initial visit. In reviewing her childbearing history, the client indicates that she has delivered premature twins, one full-term baby, and has had no abortions. Which GTPAL should the LPN/LVN document in this client's record?

D. 3-1-1-0-3.

16) The nurse is providing discharge teaching for a client who is 24 hours postpartum. The nurse explains to the client that her vaginal discharge will change from red to pink and then to white. The client asks, "What if I start having red bleeding after it changes?" What should the nurse instruct the client to do?

A. Reduce activity level and notify the healthcare provider.

18) A pregnant client tells the LPN/LVN that the first day of her last menstrual period was August 2, 2006. Based on Nägele's rule, what is the estimated date of delivery?

B. May 9, 2007.

- The LPN/LVN is preparing a client with a term pregnancy who is in active labor for an amniotomy. What equipment should the nurse have available at the client's bedside? (Select all that apply.)

C. A sterile glove.

D. An amniotic hook.

F. A Doppler.

- The LPN/LVN should explain to a 30-year-old gravida client that alpha-fetoprotein testing is recommended for which purpose?

B. Screen for neural tube defects.

- A 38-week primigravida who works as a secretary and sits at a computer 8 hours each day tells the nurse that her feet have begun to swell. Which instruction would be most effective in preventing pooling of blood in the lower extremities?

C. Move about every hour.

- During a prenatal visit, the nurse discusses with a client the effects of smoking on the fetus. When compared with nonsmokers, mothers who smoke during pregnancy tend to produce infants who have:

B. lower birth weight

- A mother who is breastfeeding her baby receives instructions from the nurse. Which instruction is most effective to prevent nipple soreness?

C. Correctly place the infant on the breast.

- A full term infant is transferred to the nursery from labor and delivery. Which information is most important for the LPN/LVN to receive when planning immediate care for the newborn?

B. Infant's condition at birth and treatment received.

34) The LPN/LVN is counseling a couple who has sought information about conceiving. For teaching purposes, the nurse should know that ovulation usually occurs

- two weeks before menstruation.

37) A 28-year-old client in active labor complains of cramps in her leg. What intervention should the LPN/LVN implement?

- Extend the leg and dorsiflex the foot.

39) Twenty-four hours after admission to the newborn nursery, a full-term male infant develops localized edema on the right side of his head. The LPN/LVN knows that, in the newborn, an accumulation of blood between the periosteum and skull which does not cross the suture line is a newborn variation known as

A. a cephalhematoma caused by forceps trauma and may last up to 8 weeks.

- A new mother who has just had her first baby says to the nurse, "I saw the baby in the recovery room. She sure has a funny looking head." Which response by the LPN/LVN is best?

C. That is normal; the head will return to a round shape within 7-10 days.

- A new mother asks the LPN/LVN, "How do I know that my daughter is getting enough breast milk?" Which explanation should the nurse provide?

B. Your milk is sufficient if the baby is voiding pale straw-colored urine 6 to 10 times a day.

- After each feeding, a 3-day-old newborn is spitting up large amounts of Enfamil® Newborn Formula, a nonfat cow's milk formula. The pediatric healthcare provider changes the neonate's formula to Similac® Soy Isomil® Formula, a soy protein isolate based infant formula. What information should the LPN/LVN provide to the mother about the newly prescribed formula?

D. Similac® Soy Isomil® Formula is a soy-based formula that contains sucrose.

• A client who gave birth to a healthy 8 pound infant 3 hours ago is admitted to the postpartum unit. Which nursing plan is best in assisting this mother to bond with her newborn infant?

D. Meet the mother's physical needs and demonstrate warmth toward the infant.

• Which nursing intervention is most helpful in relieving postpartum uterine contractions or "afterpains?"

• Lying prone with a pillow on the abdomen.

• Which maternal behavior is the LPN/LVN most likely to see when a newmother receives her infant for the first time?

• Her arms and hands receive the infant and she then traces the infant's profile with her fingertips.

48) The LPN/LVN is counseling a woman who wants to become pregnant. The woman tells the nurse that she has a 36-day menstrual cycle and the first day of her last menstrual period was January 8. The nurse calculates that the woman's next fertile period is

• January 30-31.

50 Twenty minutes after a continuous epidural anesthetic is administered, a laboring client's blood pressure drops from 120/80 to 90/60. What action should the LPN/LVN take?

C. Place the woman in a lateral position.

51) A client at 28-weeks gestation calls the antepartal clinic and states that she is experiencing a small amount of vaginal bleeding which she describes as bright red. She further states that she is not experiencing any uterine contractions or abdominal pain. What instruction should the LPN/LVN provide?

A. Come to the clinic today for an ultrasound.

53) A pregnant client with mitral stenosis Class III is prescribed complete bedrest. The client asks the nurse, "Why must I stay in bed all the time?" Which response is best for the LPN/LVN to provide this client?

A. Complete bedrest decreases oxygen needs and demands on the heart muscle tissue.

55) Just after delivery, a new mother tells the nurse, "I was unsuccessful breastfeeding my first child, but I would like to try with this baby." Which intervention is best for the LPN/LVN to implement first?

D. Provide assistance to the mother to begin breastfeeding as soon as possible after delivery.

1) A client is admitted to the labor and delivery unit with contractions that are 3-5 minutes apart, lasting 60-70 seconds. She reports that she is leaking fluid. A vaginal exam reveals that her cervix is 80 percent effaced and 4 cm dilated and a -1 station. The LPN/LVN knows that the client is in which phase and stage of labor?

B) Active Phase of First Stage

• The factors that affect the process of labor and birth, known commonly as the fivePs, include all EXCEPT:

D) Pressure.

• While evaluating an external monitor tracing of a woman in active labor, the nurse notes that the fetal heart rate (FHR) for five sequential contractions begins to decelerate late in the contraction, with the nadir of the decelerations occurring after the peak of the contraction. The LPN/LVN first priority is to:

C) Change the woman's position

19) What is an advantage of external electronic fetal monitoring?

C) The external EFM does not require rupture of membranes or introduction of scalp electrode or IUPC which may introduce risk of infection or fetal scarring.

• A woman in active labor receives an analgesic, an opioid agonist. Which medication relieves severe, persistent, or recurrent pain; creates a sense of well-being; overcomes inhibitory factors; and may even relax the cervix but should be used cautiously in women with cardiac disease?

• Meperidine (Demerol)

• A laboring woman received meperidine (Demerol) intravenously 90 minutes before she gave birth. Which medication should be available to reduce the postnatal effects of Demerol on the neonate?

C) Naloxone (Narcan)

• A woman in labor has just received an epidural block. The most important nursing intervention is to: