

ATI Maternal Newborn Proctored 2019 70 QUESTIONS AND ANSWERS GRADED A

A client who is 16 weeks of gestation asks the nurse how to prepare her father to a younger sibling. Statements should the nurse make?

- A. You should hold your newborn in your arms when you introduce him to your toddler
- B. You should move your toddler out of her crib 2 weeks prior to your due date
- C. You should give your toddler a gift from the baby when she visits you in the facility.
- D. You should place your toddler in timeout 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.**

A nurse is observing an adolescent client who is offering her newborn a bottle while he is laying in the bassinet. When the nurse offers to pick the newborn up and place them 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. Insist that the mother pick up the newborn to feed him
- B. Demonstrate how to hold a newborn and allow the client to practice
- C. Persuade the client to breastfeed the newborn to promote bonding
- D. Offer to take the newborn to the nursery to finish his feeding
- B. Demonstrate how to hold a newborn and allow the client to practice**

A nurse is assessing a client who is in preterm labor and has a new prescription or terbutaline 0.25 mg subcutaneous. For which of the following findings should the nurse Withhold the medication and report to the provider?

- A. Fasting blood glucose 75 mg / DL
- B. Blood pressure 88/58 mmhg
- C. Urinary output 40 ml /hr
- D. FHR 120/min

B. Blood pressure 88/58 mmhg

A nurse is providing teaching to the parents of a newborn about the plastibell circumcision technique. Which of the following is included in the teaching?

- A. The plastibell will be removed 4 hours after the procedure
- B. Notify the provider if the end of your penis appears dark red
- C. Make sure the newborn's diaper is snug
- D. Yellow exudate will form at the surgical site in 24 hours

D. Yellow exudate will form at the surgical site in 24 hours

A nurse is planning care immediately following birth for a newborn who has Myelomeningocele that is cerebrospinal fluid. Which of the following actions should the nurse include in the plan of care?

- A. Administer broad-spectrum antibiotics
- B. Cleanse the site with Povidone iodine
- C. Monitor the rectal temperature every 4 hours
- D. Prepare for surgical closure after 72 hours

A. Administer broad-spectrum antibiotics

A nurse is caring for a newborn boy 6 hours old and has a bedside glucose meter reading of 65 mg/dl. The New Orleans mother has Type 2 diabetes mellitus. Which of the following actions should the nurse take?

- A. Administer 50 mL of dextrose solution IV
 - B. Obtain a blood sample of serum glucose level
 - C. Reassess the blood glucose level prior to the next feeding
 - D. Feed the newborn immediately
- C. Reassess the blood glucose level prior to the next feeding

A nurse is caring for four enter-partum clients. Which of the following clients should the nurse assess first?

- A. A client who is at 7 weeks of gestation and reports urinary frequency.
 - B. A client who is at 32 weeks of gestation and reports seeing floating spots.
 - C. A client who is 38 weeks of gestation and reports leg cramps.
 - D. A client who is at 20 weeks of gestation and reports periodic numbness in her fingers.
- B. A client who is at 32 weeks of gestation and reports seeing floating spots.

A nurse is planning care for a client who is pregnant and has HIV. Which of the following actions Should the nurse include in the plan of care?

- A. Use a fetal scalp electrode during labor and delivery.
 - B. Bathe the newborn before initiating skin to skin contact.
 - C. Instruct the client to stop taking the antiretroviral medication at 32 weeks of gestation.
 - D. Administer pneumococcal immunization to the newborn within 4 hours following birth.
- D. Administer pneumococcal immunization to the newborn within 4 hours following birth.

A nurse is caring for a client who has placenta previa. Which of the following findings should the nurse expect?

- A. Firm rigid abdomen
- B. Painless, vaginal bleeding**
- C. Uterine hypertonicity
- D. Persistent headache
- B. Painless, vaginal bleeding

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

- A. Apply a thin layer lotion to the newborn skin every 8 hours.
- B. Trust in you born in a thin layer clothing during the therapy.
- C. Ensure the newborn's eyes are closed beneath the shield.**
- D. Give the newborn 1 oz of glucose water every 4 hours.
- C. Ensure the newborn's eyes are closed beneath the shield.

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

- A. Expect 2 to 4 wet diapers every 24 hours
- B. Allow the baby to feed at least every 3 hours**
- C. Offer the newborn 30 ml (1 oz.) a water between feedings
- D. Feed the newborn 5 to 10 minutes per breast
- B. Allow the baby to feed at least every 3 hours

A nurse is assessing a client during her first prenatal visit the client reports March 20th as her last menstrual.. Use Naegele's rule to calculate the estimated date of delivery. Use the mmdd. format with four numerals and no spaces or punctuation

1227

A nurse is caring for a client who is at 30 weeks of gestation. The nurse should plan to immunize the client which of the following vaccinations? Select all that apply.

- A. Varicella
- B. Human papillomavirus
- C. Diphtheria - acellular pertussis
- D. Inactivated influenza
- E. Measles, mumps, and rubella

CD

C. Diphtheria - acellular pertussis

D. Inactivated influenza

A nurse is caring for a client who has preterm labor and receiving magnesium sulfate by continuous IV infusion. Which of the following laboratory values should the nurse review during tocolytic therapy?

- A. Indirect Coombs test
- B. Liver enzymes
- C. Uric acid level
- D. Serum medication level
- D. Serum medication level

A nurse is caring for a client who reports spontaneous rupture. The nurse observed fetal bradycardia in the FHR tracing and notices the umbilical cord is protruding. After calling for assistance and notifying the provider, which of the following should the nurse take next?

- A. Initiate an infusion of IV fluids for the client.
- B. Perform vaginal examination by applying upward pressure on the presenting part.
- C. Administer oxygen via non rebreather mask at 8L/ min.
- D. Cover the umbilical cord with sterile saline saturated towel.
- B. Perform vaginal examination by applying upward pressure on the presenting part.

A nurse is caring for a client who is 36 weeks gestation and has MRSA. Which of the following isolation precautions should the nurse initiate?

- A. Droplet
- B. Contact
- C. Airborne
- D. Protective environment
- B. Contact

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

- A. Hemoglobin 14.8 g/dL
- B. Platelet count 60,000/ mm
- C. Creatine 0.8 mg/ dL
- D. Urine protein concentration 200 mg/24hr
- B. Platelet count 60,000/ mm

A nurse is providing teaching to a client who is 2 days postpartum and wants to continue using her diaphragm for contraception. Which of the following instructions should the nurse include?

- A. You should use an oil based vaginal lubricant when inserting your diaphragm.
- B. You should store your diaphragm in sterile water after each use.
- C. You should keep the diaphragm in place for at least 4 hours after intercourse.
- D. You should have your provider refit you for a new diaphragm.
- D. You should have your provider refit you for a new diaphragm.

A nurse is caring for a client who is receiving prenatal care and is at her 24-week appointment. Which of the following laboratory tests should the nurse plan to conduct?

- A. 1 hour glucose tolerance test
- B. Rubella titer
- C. Group B strep culture
- D. Blood type and Rh
- A. 1 hour glucose tolerance test

A nurse is caring for a client who has gestational diabetes mellitus. Which of the following clinical findings should indicate to the nurse the client has hyperglycemia?

- A. Double vision
- B. Increased urination
- C. Sweating
- D. dizziness
- B. Increased urination

A nurse is reviewing the laboratory results of a newborn. Which of the following findings should the nurse report to the provider?

- A. Blood glucose 58 mg / DL
- B. Hematocrit 48%
- C. Platelets 100,000/ mm³
- D. Hemoglobin 16 G / DL
- C. Platelets 100,000/ mm³

A nurse is using Naegele's rule to calculate the expected delivery date of a client who reports the first day of the last menstrual cycle was July 28th. Which of the following dates should the nurse document as a client expected delivery date? 07/28

- A. April 21st
- B. April 4th
- C. May 5th
- D. May 21st
- C. May 5th

The 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 continuous firm pressure between your thumb and index finger.
- C. Your partner will apply pressure to the top of your uterus during contractions.

- D. Your partner will apply steady pressure with a tennis ball to your lower back.
- D. Your partner will apply steady pressure with a tennis ball to your lower back.

A nurse is caring for a client who is 6 weeks of gestation and reports nausea and vomiting. Which of the following recommendations should the nurse make?

- A. Avoid eating snacks before bedtime.
- B. Eat high-fat snack before getting out of bed.
- C. Drink additional liquids with each meal.
- D. Consume food served at cool temperatures.
- D. Consume food served at cool temperatures.

A nurse is providing teaching to a client who is receiving medroxyprogesterone IM for contraception. Which of the following statements by the client indicates an understanding of the teaching?

- A. I should discontinue this medication if I experience spotting.
- B. I will need to return to the clinic in the next eight weeks for my next injection.
- C. I should increase my calcium intake while taking this medication.
- D. I will get two shots each time I receive this medication.
- C. I should increase my calcium intake while taking this medication.

A nurse is preparing to perform a fundal massage for a postpartum client with hearing seeing uterine atony. In which order should the nurse plan to perform the following actions? (molded steps into the box on the right. Placing them in order of performance use all steps)

1. Ask the client to lie on her back in with her knees flexed.

2. Position one hand around the top of the client's fundus and the other hand just above the client's symphysis pubis.

3. Rotate the upper hand to massage that client's uterus while using slight downward pressure to compress the fundus.

4. Observe the client's perineum for the passage of clots and the amount of bleeding.

A nurse is providing discharge teaching to a postpartum client about caring for her five-year 5-day old male newborn at home. Which of the following statements should the nurse make to the client?

A. Retract the foreskin to clean your baby's penis during each bath.

B. Use triple antibiotic ointment on your baby's umbilical cord twice per day.

C. Swaddle your baby tightly with legs extended before laying him down to sleep.

D. Notify your baby's pediatrician if he urinates less than 6 times per day.

D. Notify your baby's pediatrician if he urinates less than 6 times per day.

A nurse is assessing a newborn whose mother had a primary cytomegalovirus (CMV) infection during pregnancy. The newborn acquired CMV through transplacental transmission. Which of the following findings should the nurse expect the newborn to exhibit?

A. Urinary tract infection

B. Hearing loss

C. Macrosomia

D. Cataracts

B. Hearing loss