

ATI Maternal Newborn EXAM 2023 GRADED A / 130 QUESTIONS AND ANSWERS WITH NGN

The nurse has learned that cultural rituals and practices during pregnancy seem to have one purpose in common. What statement best describes this purpose?

- A. They provide family unity
- B. They ward off the evil eye.
- C. They protect the mother and fetus
- D. They appease the god of fertility - **CORRECT ANSWER A. They provide family unity**
- C. They protect the mother and fetus

The nurse is caring for a patient who is 8 weeks pregnant and is not happy about being pregnant. What is an appropriate nursing response?

- A. "You need to talk this over with the doctor"
- B. "Aren't you happy about this new life?"
- C. "Your feelings are normal at this time."
- D. "Tell me more about how you are feeling" - **CORRECT ANSWER D. "Tell me more about how you are feeling"**

The nurse recognizes the most significant barrier encountered by pregnant women in accessing care is:

- A. Lack of transportation
- B. Other child care responsibilities
- C. Inability to pay
- D. Deficient knowledge about benefits of prenatal care - **CORRECT ANSWER C. Inability to pay**

The nurse has just finished teaching a class on weight gain during pregnancy. Which statement by one of the mothers indicates she understands the teaching?

- A. "My baby will make up most of my weight gain."
- B. "Since I am overweight, I don't need to gain any weight."
- C. "The fat I gain during pregnancy will disappear right after birth."
- D. "My breasts will probably shrink and lead to weight loss." - CORRECT ANSWER A.

The nurse is caring for a patient who is scheduled for an amniocentesis to determine fetal lung maturity. When the nurse checks the chart for results, which test result will she be looking for?

- A. Lecithin/ Sphingomyelin (L/S ratio)
- B. Indirect Coombs test
- C. Kleinhaur-Berke Test
- D. Alpha-fetoprotein - CORRECT ANSWER A.

The nurse provides instructions to a malnourished pregnant client regarding Iron supplementation. Which client statement indicates an understanding of the instructions?

- A. "Iron supplements will give me diarrhea."
- B. "Meat does not provide Iron and should be avoided."
- C. "Iron is absorbed best if taken on an empty stomach."
- D. "On the days I eat liver, I don't have to take my iron supplement." - CORRECT ANSWER C.

A nurse is caring for a pregnant patient needs to be aware that physical abuse during pregnancy can result in?

- A. Excessive weight gain due to stress
- B. Use of alcohol or tobacco as a means of coping
- C. Hypertension of pregnancy
- D. Premature delivery or spontaneous abortion - CORRECT ANSWER D.

The nurse who assesses the FHR is expecting to find the heart rate within which range?

- A. 100-130 bpm
- B. 110-160 bpm
- C. 120-180 bpm
- D. 130-160 bpm - CORRECT ANSWER B.

A nurse determines a pregnant patient needs further instruction about amniocentesis when the patient states:

- A. "I must report cramping or signs of infection to my doctor"
- B. "I should drink lots of fluids for 24 hours following this procedure."
- C. "I need to have a full bladder for this procedure."
- D. "My amniotic fluid can be examined to tell me if my baby has downs syndrome" - CORRECT ANSWER C.

A nurse is caring for a client who is pregnant and states that her last menstrual period was April 1st. Which of the following is the client's estimated date of delivery?

- a. January 8
- b. January 15
- c. February 8
- d. February 15 - CORRECT ANSWER a

A nurse in a prenatal clinic is caring for a client who is in the first trimester of pregnancy. The client's health record includes this data: G3 T1 P0 A1 L1. How should the nurse interpret this information? (SATA)

- a. client has delivered one newborn at term
- b client has experienced no preterm labor
- c. client has been through active labor
- d. client has had two prior pregnancies
- e. client has one living child - CORRECT ANSWER a

d

e

A nurse is reviewing the health record of a client who is pregnant. The provider indicated the client exhibits probable signs of pregnancy. Which of the following findings should the nurse expect? (SATA)

a. montgomery's glands

b. goodell's sign

c. ballottement

d. chadwick's sign

e. quickening - CORRECT ANSWER b

c

d

A nurse in a prenatal clinic is caring for a client who is pregnant and experiencing episodes of maternal hypotension. The client asks the nurse what causes these episodes. Which of the following responses should the nurse make?

a. "This is due to an increase in blood volume."

b. "This is due to pressure from the uterus on the diaphragm."

c. "This is due to the weight of the uterus on the vena cava."

d. "This is due to increased cardiac output." - CORRECT ANSWER c

A nurse in a clinic receives a phone call from a client who believes she is pregnant and would like to be tested in the clinic to confirm her pregnancy. Which of the following information should the nurse provide to the client?

a. "You should wait until 4 weeks after conception to be tested."

b. "You should stop any medications for 24 hours prior to the test."

c. "You should be NPO for at least 8 hours prior to the test."

d. "You should collect urine from the first morning void." - CORRECT ANSWER d

A nurse is teaching a group of women who are pregnant about measures to relieve backache during pregnancy. Which of the following measures should the nurse include in the teaching? (SATA)

- a. avoid any lifting
 - b. perform kegel exercises twice a day
 - c. perform the pelvic rock exercise every day
 - d. use proper body mechanics
 - e. avoid constrictive clothing - CORRECT ANSWER c
- d

A nurse is caring for a client who is pregnant and reviewing signs of complications the client should promptly report to the provider. Which of the following complications should the nurse include in the teaching?

- a. vaginal bleeding
- b. swelling of the ankles
- c. heartburn after eating
- d. lightheadedness when lying on back - CORRECT ANSWER a

A client who is at 7 weeks of gestation is experiencing nausea and vomiting in the morning. Which of the following information should the nurse include in the teaching?

- a. eat crackers or plain toast before getting out of bed
- b. awaken during the night to eat a snack
- c. skip breakfast and eat lunch after nausea has subsided
- d. eat a large evening meal - CORRECT ANSWER a

A nurse is teaching a client who is at 6 weeks of gestation about common discomforts of pregnancy. Which of the following findings should the nurse include in the teaching? (SATA)

- a. breast tenderness

- b. urinary frequency
 - c. epistaxis
 - d. dysuria
 - e. epigastric pain - CORRECT ANSWER a
- b
- c

A client who is at 8 weeks of gestation tells the nurse that she isn't sure she is happy about being pregnant. Which of the following responses should the nurse make?

- a. "I will inform the provider that you are having these feelings."
- b. "It is normal to have these feelings during the first few months of pregnancy."
- c. "You should be happy that you are going to bring new life into the world."
- d. "I am going to make an appointment with the counselor for you to discuss these thoughts." - CORRECT ANSWER b

A nurse in a prenatal clinic is providing education to a client who is in the 8th week of gestation. The client states that she does not like milk. Which of the following foods should the nurse recommend as a good source of calcium?

- a. dark green leafy vegetables
- b. deep red or orange vegetables
- c. white breads and rice
- d. meat, poultry, and fish - CORRECT ANSWER a

A nurse in a prenatal clinic is caring for four clients. Which of the following clients' weight gain should the nurse report to the provider?

- a. 1.8kg (4lb) weight gain and is in her first trimester
- b. 3.6kg (8lb) weight gain and is in her first trimester
- c. 6.8kg (15lb) weight gain and is in her second trimester
- d. 11.3kg (25lb) weight gain and is in her third trimester - CORRECT ANSWER b

A nurse in a clinic is teaching a client of childbearing age about recommended folic acid supplements. Which of the following defects can occur in the fetus or neonate as a result of folic acid deficiency?

- a. iron deficiency anemia
- b. poor bone formation
- c. macrosomic fetus
- d. neural tube defects - CORRECT ANSWER d

A nurse is reviewing a new prescription for iron supplements with a client who is in the 8th week gestation and has iron deficiency anemia. Which of the following beverages should the nurse instruct the client to take the iron supplements with?

- a. ice water
- b. low-fat or whole milk
- c. tea or coffee
- d. orange juice - CORRECT ANSWER d

A nurse is reviewing postpartum nutrition needs with a group of new mothers who are breastfeeding their newborns. Which of the following statements by a member of the group indicates an understanding of the teaching?

- a. "I am glad I can have my morning coffee."
- b. "I should take folic acid to increase my milk supply."
- c. "I will continue adding 330 calories per day to my diet."
- d. "I will continue my calcium supplements because I don't like milk." - CORRECT ANSWER d

A nurse is reviewing findings of a client's biophysical profile (BPP). The nurse should expect which of the following variables to be included in this test? (SATA)

- a. fetal weight
- b. fetal breathing movement

- c. fetal tone
- d. fetal position
- e. amniotic fluid volume - CORRECT ANSWER b

c
e

A nurse is caring for a client who is in preterm labor and is scheduled to undergo an amniocentesis. The nurse should evaluate which of the following tests to assess fetal lung maturity?

- a. alpha-fetoprotein (AFP)
- b. lecithin/sphingomyelin (L/S) ratio
- c. kleihauer-betke test
- d. indirect coombs' test - CORRECT ANSWER b

A nurse is caring for a client who is pregnant and undergoing a non stress test. The client asks why the nurse is using an acoustic vibration device. Which of the following responses should the nurse make?

- a. "It is used to stimulate uterine contractions."
- b. "It will decrease the incidence of uterine contractions."
- c. "It lulls the fetus to sleep."
- d. "It awakens a sleeping fetus." - CORRECT ANSWER d

A nurse is teaching a client who is pregnant about the amniocentesis procedure. Which of the following statements should the nurse include in the teaching?

- a. "You will lay on your right side during the procedure."
- b. "You should not eat anything for 24 hours prior to the procedure."
- c. "You should empty your bladder prior to the procedure."
- d. "The test is done to determine gestational age." - CORRECT ANSWER c

A nurse is caring for a client who is pregnant and is to undergo a contraction stress test (CST). Which of the following findings are indications of this procedure? (SATA)

- a. decreased fetal movement
 - b. intrauterine growth restriction (IUGR)
 - c. postmaturity
 - d. placenta previa
 - e. amniotic fluid emboli - CORRECT ANSWER a
- b
- c

A nurse in the emergency department is caring for a client who reports abrupt, sharp, right-sided lower quadrant abdominal pain and bright red vaginal bleeding. The client states she missed one menstrual cycle and cannot be pregnant because she has an intrauterine device. The nurse should suspect which of the following?

- a. missed abortion
- b. ectopic pregnancy
- c. severe preeclampsia
- d. hydatidiform mole - CORRECT ANSWER b

A nurse is providing care for a client who is diagnosed with a marginal abruptio placentae. The nurse is aware that which of the following findings are risk factors for developing the condition? (SATA)

- a. fetal position
 - b. blunt abdominal trauma
 - c. cocaine use
 - d. maternal age
 - e. cigarette smoking - CORRECT ANSWER b
- c
- e

A nurse is providing care for a client who is at 32 weeks of gestation and who has a placenta previa. The nurse notes that the client is actively bleeding. Which of the following types of medications should the nurse anticipate the provider will prescribe?

- a. betamethasone
- b. indomethacin
- c. nifedipine
- d. methylergonovine - CORRECT ANSWER a

A nurse at an antepartum clinic is caring for a client who is at 4 months of gestation. The client reports continued nausea and vomiting and scant, prune-colored discharge. She has experienced no weight loss and has a fundal height large than expected. Which of the following complications should the nurse suspect?

- a. hyperemesis gravidarum
- b. threatened abortion
- c. hydatidiform mole
- d. preterm labor - CORRECT ANSWER c

A nurse is caring for a client who has a diagnosis of ruptured ectopic pregnancy. Which of the following findings is seen with this condition?

- a. no alteration in menses
- b. transvaginal ultrasound indicating a fetus in the uterus
- c. serum progesterone greater than the expected reference range
- d. report of severe shoulder pain - CORRECT ANSWER d

A nurse is admitting a client who is in labor and has HIV. Which of the following interventions should the nurse identify as contraindicated for this client? (SATA)

- a. episiotomy
- b. oxytocin infusion