VERSION 16

CHAMBERLAIN COLLEGE OF NURSING - NURSING 446: MATERNALNEWBORN COMPLETE GUIDES

The nurse is assessing a new mother's efforts to bond with her newly born infant. Identify three (3) factors that can impact effective bonding between mother and infant?

- 1. Holds the infant face-to-face (en face position) maintaining eye contact
- 2. Identifies the infant's unique characteristics and relates them to those of other family members
- 3. Provides physical care for the infant, such as feeding and diapering

A nurse is providing community education regarding risk factors for ovarian cancer. Identify five (5) risk factors associated with the development of ovarian cancer. (Review the Med Surg RM)

- Age greater than 40 years
- Nulliparity/first pregnancy after 30 years of age
- Family history of ovarian, breast, or genetic mutation for hereditary nonpolypolyposis colon cancer (HNPCC)
- BRCA1 or BRCA2 gene mutations
- Diabetes mellitus
- Early menarche/late menopause
- History of dysmenorrhea/heavy bleeding
- Endometriosis
- High-fat diet
- Hormone replacement therapy
- Use of infertility medications
- Older adult clients following surgery for cancer

The client enters the obstetrical clinic for birth control information on using a diaphragm. What five (5) instructions would be provided by the nurse to explain use of the diaphragm?

- Client should be properly fitted with a diaphragm by provider
- Replaced every 2 years and refitted for a 20% weight fluctuation, after abdominal/pelvic surgery, and after every pregnancy
- Requires proper insertion and removal. Prior to coitus, the diaphragm is inserted vaginally over the cervix with spermicidal

jelly/cream, that is applied to the cervical side of the dome and around the rim. The diaphragm can be inserted up to 6 hours before intercourse but for no more than 24 hours.

- Spermicide must be reapplied with each act of coitus
- A client should empty her bladder prior to insertion of the diaphragm
- Diaphragm should be washed with mild soap and warm water after each use

What are risks/possible complications/contraindications for the use of intrauterine contraceptive devices?

- Best used by women in a monogamous relationship due to the risks of STIs
- Can cause irregular menstrual bleeding
- Risk of bacterial vaginosis, uterine perforation, or uterine expulsion
- Active pelvic infection
- Abnormal uterine bleeding
- Severe uterine distortion
- For copper IUD- Wilson's diseases and copper allergy

A nurse is caring for a client who is considering use of a hormonal intrauterine system. What information regarding the advantages of an Intrauterine Device (IUD) should the nurse provide?

- IUD can maintain effectiveness for 1 to 10 years (**hormonal IUD 3-5 years**, copper IUD 10 years)
- Can be inserted immediately after abortion, miscarriage, childbirth, and while breastfeeding
- Contraception can be reversed with immediate return to fertility
- Doesn't interfere with spontaneity
- Safe for mothers who are breastfeeding
- It is 99% effective in preventing pregnancy