

Old's Maternal-Newborn Nursing and Women's Health, 11e
(Davidson/London/Ladewig)

Chapter 1 Contemporary Maternal-Newborn Nursing

- 1) The nurse is speaking to students about changes in maternal-newborn care. One change is that self-care has gained wide acceptance with clients and the healthcare community due to research findings that suggest that it has which effect?
- A) Shortens newborn length of stay
 - B) Decreases use of home health agencies
 - C) Decreases healthcare costs
 - D) Decreases the number of emergency department visits

Answer: C

Explanation:

- A) Length of stay is often determined by third-party payer (insurance company) policies as well as the physiologic stability of the mother and newborn. Home healthcare agencies often are involved in client care to decrease hospital stay time.
- B) Home healthcare agencies often are involved in client care to decrease hospital stay time.
- C) Research indicates that self-care significantly decreases healthcare costs.
- D) Acute emergencies are addressed by emergency departments, and are not delayed by those practicing self-care.

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Cognitive Level: Understanding

Client Need/Sub: Health Promotion and Maintenance: Self-Care

Standards: QSEN Competencies: I .A.2. Describe strategies to empower patients or families in all aspects of the healthcare process. | AACN Essentials Competencies: IX.7. Provide appropriate patient teaching that reflects developmental stage, age, culture, spirituality, patient preferences, and health literacy considerations to foster patient engagement in their care. | NLN Competencies: Context and Environment: Health care economic policy; reimbursement structures; accreditation standards; staffing models and productivity; supply chain models | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 1 Discuss the impact of the self-care movement on contemporary childbirth.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 2) Care delivered by nurse-midwives can be safe and effective and can represent a positive response to the healthcare provider shortage. Nurse-midwives tend to use less technology, which often results in which of the following?
- A) There is less trauma to the mother.
 - B) More childbirth education classes are available.
 - C) They are instrumental in providing change in the birth environment at work.
 - D) They advocate for more home healthcare agencies.

Answer: A

Explanation:

- A) Nurse-midwife models of care can be one way to ensure that mothers receive excellent prenatal and intrapartum care.
- B) It is appropriate for nurse-midwives, in conjunction with doctors and hospitals, to provide childbirth classes for expectant families.
- C) By working with other staff members and doctors, the nurse-midwife is able to implement changes as needed within the birthing unit.
- D) Clients are increasingly going home sooner, so there needs to be more follow-up in the home.

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Cognitive Level: Understanding

Client Need/Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention

Standards: QSEN Competencies: III.A.6. Describe how the strength and relevance of available evidence influences the choice of interventions in provision of patient-centered care. | AACN Essentials Competencies: IX. 5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences. | NLN Competencies: Context and Environment: Read and interpret data; apply health promotion/disease prevention strategies; apply health policy; conduct population-based transcultural health assessments and interventions. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 2 Compare the nursing roles available to the maternal-newborn nurse.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 3) The nurse is telling a new client how advanced technology has permitted the physician to do which of the following?
- A) Treat the fetus and monitor fetal development.
 - B) Deliver at home with a nurse-midwife and doula.
 - C) Have the father act as the coach and cut the umbilical cord.
 - D) Breastfeed a new baby on the delivery table.

Answer: A

Explanation:

- A) The fetus is increasingly viewed as a patient separate from the mother, although treatment of the fetus necessarily involves the mother.
- B) A nurse-midwife and a doula are not examples of technological care.
- C) Fathers being present during labor and coaching their partners represents nontechnological care during childbirth.
- D) Breastfeeding is not an example of technology impacting care.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I.B.10. Engage patients or designated surrogates in active partnerships that promote health, safety and well-being, and self-care management. | AACN Essentials Competencies: IX.5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences. | NLN Competencies: Teamwork: Scope of practice, roles, and responsibilities of health care team members, including overlaps. | Nursing/Integrated Concepts: Nursing Process: Implementation.

Learning Outcome: 6 Evaluate the potential impact of some of the special situations in contemporary maternity care.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 4) A nurse is examining different nursing roles. Which example best illustrates an advanced practice nursing role?
- A) A registered nurse who is the manager of a large obstetrical unit
 - B) A registered nurse who is the circulating nurse during surgical deliveries (cesarean sections)
 - C) A clinical nurse specialist working as a staff nurse on a mother-baby unit
 - D) A clinical nurse specialist with whom other nurses consult for her expertise in caring for high-risk infants

Answer: D

Explanation:

- A) A registered nurse who is the manager of a large obstetrical unit is a professional nurse who has graduated from an accredited program in nursing and completed the licensure examination.
- B) A registered nurse who is a circulating nurse at surgical deliveries (cesarean sections) is a professional nurse who has graduated from an accredited program in nursing and completed the licensure examination.
- C) A clinical nurse specialist working as a staff nurse on a mother-baby unit might have the qualifications for an advanced practice nursing staff member but is not working in that capacity.
- D) A clinical nurse specialist with whom other nurses consult for expertise in caring for high-risk infants is working in an advanced practice nursing role. This nurse has specialized knowledge and competence in a specific clinical area, and is master's prepared.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: II .A.2. Describe scopes of practice and roles of healthcare team members. | AACN Essentials Competencies: VI. 6. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e. scope of discipline, education, and licensure requirements). | NLN Competencies: Teamwork: Scope of practice, roles, and responsibilities of health care team members, including overlaps. | Nursing/Integrated Concepts: Nursing Process: Assessment.

Learning Outcome: 2 Compare the nursing roles available to the maternal-newborn nurse.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 5) A nursing student investigating potential career goals is strongly considering becoming a nurse practitioner (NP). The major focus of the NP is on which of the following?
- A) Leadership
 - B) Physical and psychosocial clinical assessment
 - C) Independent care of the high-risk pregnant client
 - D) Tertiary prevention

Answer: B

Explanation:

- A) Leadership might be a quality of the NP, but it is not the major focus.
- B) Physical and psychosocial clinical assessment is the major focus of the NP.
- C) NPs cannot provide independent care of the high-risk pregnant client, but must work under a physician's supervision.
- D) The NP cannot do tertiary prevention as a major focus.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: II .A.2. Describe scopes of practice and roles of healthcare team members. | AACN Essentials Competencies: VI. 2. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e. scope of discipline, education, and licensure requirements). | NLN Competencies: Teamwork: Scope of practice, roles, and responsibilities of health care team members, including overlaps. | Nursing/Integrated Concepts: Nursing Process: Assessment.

Learning Outcome: 2 Compare the nursing roles available to the maternal-newborn nurse.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 6) The nurse manager is consulting with a certified nurse-midwife about a client. What is the role of the CNM?

Note: Credit will be given only if all correct choices and no incorrect choices are selected.

Select all that apply.

- A) Be prepared to manage independently the care of women at low risk for complications during pregnancy and birth.
- B) Give primary care for high-risk clients who are in hospital settings.
- C) Give primary care for healthy newborns.
- D) Obtain a physician consultation for any technical procedures at delivery.
- E) Be educated in two disciplines of nursing.

Answer: A, C, E

Explanation:

- A) A CNM is prepared to manage independently the care of women at low risk for complications during pregnancy and birth and the care of healthy newborns.
- B) CNMs cannot give primary care for high-risk clients who are in hospital settings. The physician provides the primary care.
- C) A CNM is prepared to manage independently the care of women at low risk for complications during pregnancy and birth and the care of healthy newborns.
- D) The CNM does not need to obtain a physician consultation for any technical procedures at delivery.
- E) The CNM is educated in the disciplines of nursing and midwifery.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: II .A.2. Describe scopes of practice and roles of healthcare team members. | AACN Essentials Competencies: VI. 1. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e. scope of discipline, education, and licensure requirements). | NLN Competencies: Teamwork: Scope of practice, roles, and responsibilities of health care team members, including overlaps. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 2 Compare the nursing roles available to the maternal-newborn nurse.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 7) The registered nurse who has completed a master's degree program and passed a national certification exam has clinic appointments with clients who are pregnant or seeking well-woman care. What is the role of this nurse considered to be?
- A) Professional nurse
 - B) Certified registered nurse (RNC)
 - C) Clinical nurse specialist
 - D) Nurse practitioner

Answer: D

Explanation:

- A) A professional nurse is one who has completed an accredited basic educational program and has passed the NCLEX-RN® exam.
- B) A certified registered nurse (RNC) has shown expertise in the field and has taken a national certification exam.
- C) A clinical nurse specialist has completed a master's degree program, has specialized knowledge and competence in a specific clinical area, and often is employed in hospitals on specialized units.
- D) A nurse practitioner has completed either a master's or doctoral degree in nursing and passed a certification exam, and functions as an advanced practice nurse. Ambulatory care settings and the community are common sites for nurse practitioners to provide client care.

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Cognitive Level: Remembering

Client Need/Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention

Standards: QSEN Competencies: II .A.2. Describe scopes of practice and roles of healthcare team members. | AACN Essentials Competencies: VI. 6. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e. scope of discipline, education, and licensure requirements). | NLN Competencies: Teamwork: Scope of practice, roles, and responsibilities of health care team members, including overlaps. | Nursing/Integrated Concepts: Nursing Process: Assessment.

Learning Outcome: 2 Compare the nursing roles available to the maternal-newborn nurse.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 8) While a child is being admitting to the hospital, the parent receives information about the pediatric unit's goals, including the statement that the unit practices family-centered care. The parent asks why that is important. The nurse responds that what communication dynamic is characteristic of the family-centered care paradigm?
- A) The mother is the principal caregiver in each family.
 - B) The child's physician is the key person in ensuring that the health of a child is maintained.
 - C) The family serves as the constant influence and continuing support in the child's life.
 - D) The father is the leader in each home; thus, all communications should include him.

Answer: C

Explanation:

- A) Culturally competent care recognizes that both matriarchal and patriarchal households exist.
- B) The physician is not present during the day-to-day routines in a child's life.
- C) Family-centered care is characterized by an emphasis on the family and family involvement throughout the pregnancy, birth, and postpartum period.
- D) Culturally competent care recognizes that both matriarchal and patriarchal households exist.

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Cognitive Level: Understanding

Client Need/Sub: Health Promotion and Maintenance: Developmental Stages and Transitions

Standards: QSEN Competencies: I.B.3. Provide patient-centered care with sensitivity and respect for the diversity of human experience. | AACN Essentials Competencies: IX. 6. Implement holistic, patient-centered care that reflects an understanding of human growth and development, pathophysiology, pharmacology, medical management and nursing management across the health-illness continuum, across the lifespan, and in all healthcare settings. | NLN Competencies: Relationship-Centered Care: Promote and accept the patient's emotions; accept and respond to distress in the patient and self; facilitate hope, trust and faith. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 4 Identify specific factors that contribute to a family's value system.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

- 9) The current emphasis on federal healthcare reform has yielded what unexpected benefit?
- A) Assessment of the details of the family's income and expenditures
 - B) Case management to limit costly, unnecessary duplication of services
 - C) Many healthcare providers and consumers are becoming more aware of the vitally important role nurses play in providing excellent care to clients and families
 - D) Education of the family about the need for keeping regular well-child visit appointments

Answer: C

Explanation:

- A) Financial assessment is more commonly the function of a social worker. The social worker is part of the interdisciplinary team working with clients, and this professional's expertise is helping clients get into the appropriate programs.
- B) The case management activity mentioned will not provide a source of funding.
- C) Nurses must clearly articulate their role in the changing environment to define and differentiate practice roles and the educational preparation required for their new roles.
- D) The education of the family will not provide a source of funding.

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Cognitive Level: Understanding

Client Need/Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention

Standards: QSEN Competencies: I .A.4. Examine how the safety, quality and cost effectiveness of health care can be improved through the active involvement of patients and families. | AACN Essentials Competencies: VI. 1. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e. scope of discipline, education, and licensure requirements). | NLN Competencies: Context and Environment: Read and interpret data; apply health promotion/disease prevention strategies; apply health policy; conduct population-based transcultural health assessments and interventions. | Nursing/Integrated Concepts: Nursing Process: Implementation.

Learning Outcome: 2 Compare the nursing roles available to the maternal-newborn nurse.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

10) For prenatal care, the client is attending a clinic held in a church basement. The client's care is provided by registered nurses and a certified nurse-midwife. What is this type of prenatal care?

- A) Secondary care
- B) Tertiary care
- C) Community care
- D) Unnecessarily costly care

Answer: C

Explanation:

- A) Secondary care is specialized care; an example is checking the hemoglobin A1C of a diabetic client at an endocrine clinic.
- B) Tertiary care is very specialized, and includes trauma units and neonatal intensive care units.
- C) Prenatal care is primary care. Community care is often provided at clinics in neighborhoods to facilitate clients' access to primary care, including prenatal care and prevention of illness.
- D) Community care decreases costs while improving client outcomes, and is not unnecessarily expensive.

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Cognitive Level: Understanding

Client Need/Sub: Health Promotion and Maintenance: Ante/Intra/Postpartum and Newborn Care

Standards: QSEN Competencies: I .A.1. Integrate understanding of multiple dimensions of patient-centered care. | AACN Essentials Competencies: VI. 1. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e. scope of discipline, education, and licensure requirements). | NLN Competencies: Context and Environment: Environmental health; health promotion/disease prevention (e.g. transmission of disease, disease patterns, epidemiological principles); chronic disease management; health care systems; transcultural approaches to health; family dynamics. | Nursing/Integrated Concepts: Nursing Process: Implementation.

Learning Outcome: 3 Describe the use of community-based nursing care in meeting the needs of childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

11) The nurse at an elementary school is performing TB screenings on all of the students. Permission slips were returned for all but the children of one family. When the nurse phones to obtain permission, the parent states in clearly understandable English that permission cannot be given because the grandmother is out of town for 2 more weeks. Which cultural element is contributing to the dilemma that faces the nurse?

- A) Permissible physical contact with strangers
- B) Beliefs about the concepts of health and illness
- C) Religion and social beliefs
- D) Presence and influence of the extended family

Answer: D

Explanation:

- A) The situation the nurse faces is not being caused by permissible contact with strangers.
- B) The situation the nurse faces is not caused by beliefs about the concepts of health and illness.
- C) The situation the nurse faces is not caused by religion and social beliefs.
- D) The presence and influence of the extended family is contributing to the situation the nurse faces. In many cultures, a family elder is the primary decision maker when it comes to health care. In this case, the parent cannot grant permission to the nurse until the parent consults the grandmother.

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Cognitive Level: Applying

Client Need/Sub: Health Promotion and Maintenance: Health Screening

Standards: QSEN Competencies: I .A.2. Describe how diverse cultural, ethnic, and social backgrounds function as sources of patient, family, and community values. | AACN Essentials Competencies: IX. 5. Deliver compassionate, patient-centered, evidence-based care that respects patient and family preferences. | NLN Competencies: Context and Environment: Analyze ethical challenges presented by ambiguous and uncertain clinical situations; self-assess one's own tolerance for ambiguity and uncertainty; accept the possibility of multiple "right" answers (rather than one right answer thinking) in patient care and other professional situations. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 4 Identify specific factors that contribute to a family's value system.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

12) A maternity client is in need of surgery. Which healthcare member is legally responsible for obtaining informed consent for an invasive procedure?

- A) The nurse
- B) The physician
- C) The unit secretary
- D) The social worker

Answer: B

Explanation:

- A) It is not the nurse's legal responsibility to obtain informed consent.
- B) Informed consent is a legal concept designed to allow clients to make intelligent decisions regarding their own health care. Informed consent means that a client, or a legally designated decision maker, has granted permission for a specific treatment or procedure based on full information about that specific treatment or procedure as it relates to that client under the specific circumstances of the permission. The individual who is ultimately responsible for the treatment or procedure should provide the information necessary to obtain informed consent. In most instances, this is a physician.
- C) Unit secretaries are not responsible for obtaining informed consent.
- D) It is not within a social worker's scope of practice to obtain informed consent.

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Cognitive Level: Remembering

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I.B.12. Facilitate informed patient consent for care. | AACN Essentials Competencies: VIII. 1. Demonstrate the professional standards of moral, ethical, and legal conduct. | NLN Competencies: Context and Environment: Code of ethics (e.g. American Nurses Association 2005; International Council of Nurses, 2006); regulatory and professional standards (ANA Social Policy Statement [ANA, 2003]; HIPAA [Health Insurance Portability and Accountability Act]); ethical decision making modes; scope of practice considerations; principles of informed consent, confidentiality, patient self-determination. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

13) A nurse who tells family members the sex of a newborn baby without first consulting the parents would have committed which of the following?

- A) A breach of privacy
- B) Negligence
- C) Malpractice
- D) A breach of ethics

Answer: A

Explanation:

- A) A breach of privacy would have been committed in this situation, because informing other family members of the child's sex without the parents' consent violates the parents' right to privacy. The right to privacy is the right of a person to keep his person and property free from public scrutiny (or even from other family members).
- B) Negligence is a punishable legal offense, and is more serious.
- C) Malpractice is a punishable legal offense, and is more serious.
- D) No breach of ethics has been committed in this situation.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Ethical Practice

Standards: QSEN Competencies: I.B.13. Assess own level of communication skill in encounters with patient and families. | AACN Essentials Competencies: IV. 8. Uphold ethical standards related to data security, regulatory requirements, confidentiality and clients' right to privacy. | NLN Competencies: Context and Environment: Code of ethics (e.g. American Nurses Association 2005; International Council of Nurses, 2006); regulatory and professional standards (ANA Social Policy Statement [ANA, 2003]; HIPAA [Health Insurance Portability and Accountability Act]); ethical decision making modes; scope of practice considerations; principles of informed consent, confidentiality, patient self-determination. | Nursing/Integrated Concepts: Nursing Process: Implementation.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

14) The nursing instructor explains to the class that according to the 1973 Supreme Court decision in *Roe v. Wade*, abortion is legal if induced:

- A) Before the 30th week of pregnancy.
- B) Before the period of viability.
- C) To provide tissue for therapeutic research.
- D) Can be done any time if mother, doctor, and hospital all agree.

Answer: B

Explanation:

- A) This statement is not true, because the fetus is viable many weeks before the 30th week.
- B) Abortion can be performed legally until the period of viability.
- C) Abortion cannot be used for the sole purpose of providing tissue for therapeutic research.
- D) This is not true. Legal abortion can be done only up until the time of viability.

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Cognitive Level: Remembering

Client Need/Sub: Safe and Effective Care Environment: Ethical Practice

Standards: QSEN Competencies: I.B.3. Provide patient-centered care with sensitivity and respect for the diversity of human experience. | AACN Essentials Competencies: IV. 8. Uphold ethical standards related to data security, regulatory requirements, confidentiality and client's right to privacy. | NLN Competencies: Context and Environment: Code of ethics (e.g. American Nurses Association 2005; International Council of Nurses, 2006); regulatory and professional standards (ANA Social Policy Statement [ANA, 2003]; HIPAA [Health Insurance Portability and Accountability Act]); ethical decision making modes; scope of practice considerations; principles of informed consent, confidentiality, patient self-determination. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

15) The nurse reviewing charts for quality improvement notes that a client experienced a complication during labor. The nurse is uncertain whether the labor nurse took the appropriate action during the situation. What is the best way for the nurse to determine what the appropriate action should have been?

- A) Call the nurse manager of the labor and delivery unit and ask what the nurse should have done.
- B) Ask the departmental chair of the obstetrical physicians what the best nursing action would have been.
- C) Examine other charts to find cases of the same complication, and determine how it was handled in those situations.
- D) Look in the policy and procedure book, and examine the practice guidelines published by a professional nursing organization.

Answer: D

Explanation:

- A) The nurse should find the standards, and not rely on another person to determine appropriateness of care.
- B) Physician care and nursing care are very different; physicians might not be up to date on nursing standards of care or nursing policies and procedures.
- C) What nursing action was undertaken in a different situation might not be based on the policies and procedures or other standards of care. The quality improvement nurse will obtain the most accurate information by examining the policies, procedures, and standards of care.
- D) Agency policies, procedures, and protocols contain guidelines for nursing action in specific situations. Professional organizations such as the Association of Women's Health, Obstetrical, and Neonatal Nurses (AWHONN) also publish standards of practice that should guide nursing care.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: IV.A.4. Explain the importance of variation and measurement in assessing quality of care. | AACN Essentials Competencies: V. 1. Demonstrate basic knowledge of healthcare policy, finance, and regulatory environments; including local, state, national, and global healthcare trends. | NLN Competencies: Knowledge and Science: Retrieve research findings and other sources of information; critique research to judge its value and usefulness; evaluate the strength of evidence for application of research findings to clinical practice. | Nursing/Integrated Concepts: Nursing Process: Evaluation.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

16) The nurse is reviewing care of clients on a mother-baby unit. Which situation should be reported to the supervisor?

- A) A 2-day-old infant has breastfed every 2-3 hours and voided four times.
- B) An infant was placed in the wrong crib after examination by the physician.
- C) The client who delivered by cesarean birth yesterday received oral narcotics.
- D) A primiparous client who delivered today is requesting discharge within 24 hours.

Answer: B

Explanation:

- A) Breastfeeding every 2 hours and voiding four times is within normal limits for a 2-day-old infant. There is no negligence in this situation.
- B) Placing an infant in the wrong crib is malpractice. Malpractice is negligent action by a professional person.
- C) Receiving oral narcotics at this point in the client's stay is within normal limits. There is no negligence in this situation.
- D) If the client is feeling well and able to care for her infant, it is normal to be discharged at this time. The mother and baby both must be within normal limits to be discharged.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Safety and Infection Control

Standards: QSEN Competencies: V.B.1. Demonstrate effective use of strategies to reduce risk of harm to self or others. | AACN Essentials Competencies: VIII. 1.

Demonstrate the professional standards of moral, ethical, and legal conduct. | NLN Competencies: Quality and Safety: Communicate effectively with different individuals (team members, other care providers, patients, families, etc.) so as to minimize risks associated with handoffs among providers and across transitions in care. |

Nursing/Integrated Concepts: Nursing Process: Evaluation.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

17) The nurse manager is planning a presentation on ethical issues in caring for childbearing families. Which example should the nurse manager include to illustrate maternal-fetal conflict?

- A) A client chooses an abortion after her fetus is diagnosed with a genetic anomaly.
- B) A 39-year-old nulliparous client undergoes therapeutic insemination.
- C) A family of a child with leukemia requests cord-blood banking at a sibling's birth.
- D) A cesarean delivery of a breech fetus is court ordered after the client refuses.

Answer: D

Explanation:

- A) Abortion is a different type of ethical situation.
- B) Achieving pregnancy through the use of therapeutic insemination is a form of reproductive assistance, and is not considered a maternal-fetal conflict.
- C) Cord-blood banking is a different type of ethical situation.
- D) Maternal-fetal conflict is a special ethical situation where the rights of the fetus and the rights of the mother are considered separately. Forced cesarean birth, coercion of mothers who practice high-risk behaviors, and, perhaps most controversial, mandating experimental in utero therapy or surgery in an attempt to correct a specific birth defect are interventions that infringe on the mother's autonomy.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I.B.9. Assess level of patient's decisional conflict and provide access to resources. | AACN Essentials Competencies: VIII. 1.

Demonstrate the professional standards of moral, ethical, and legal conduct. | NLN Competencies: Context and Environment: Show respect for others' values; appreciate diversity; be civil during relationships and work; value community empowerment and social justice; work to improve social conditions affecting health; adopt inclusive language. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

18) Client safety goals, which are evaluated and updated regularly, are requirements for what?

- A) Clinical practice guidelines
- B) Scope of practice
- C) Accreditation
- D) Standards of care

Answer: C

Explanation:

- A) Clinical practice guidelines are adopted within a healthcare setting to reduce variation in care management, to limit costs of care, and to evaluate the effectiveness of care.
- B) State nurse practice acts protect the public by broadly defining the legal scope of practice within which every nurse must function and by excluding untrained or unlicensed individuals from practicing nursing.
- C) The Joint Commission has identified client safety as an important responsibility of healthcare providers.
- D) Standards of care establish minimum criteria for competent, proficient delivery of nursing care.

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Cognitive Level: Remembering

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: V.A.7. Discuss potential and actual impact of national patient safety resources, initiatives, and regulations. | AACN Essentials Competencies: IX. 12. Create a safe environment that results in high quality patient outcomes. | NLN Competencies: Quality and Safety: Value and encourage nurses' involvement in the design, selection, implementation, and evaluation of information technologies to support patient care (e.g. as recommended by QSEN). | Nursing/Integrated Concepts: Nursing Process: Assessment.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

19) A fetus has been diagnosed with myelomeningocele. Which of the following surgeries would be performed to correct this condition?

- A) Tubal ligation
- B) Intrauterine fetal surgery
- C) Cesarean section
- D) Sterilization

Answer: B

Explanation:

- A) Tubal ligation is not an intrauterine fetal surgery.
- B) Intrauterine fetal surgery, which is generally considered experimental, is a therapy for anatomic lesions that can be corrected surgically and are incompatible with life if not treated. Examples include surgery for myelomeningocele and some congenital cardiac defects.
- C) A cesarean birth is not considered an intrauterine fetal surgery.
- D) Sterilization surgery does not involve the fetus.

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Cognitive Level: Remembering

Client Need/Sub: Physiological Integrity: Physiological Adaptation

Standards: QSEN Competencies: II.B.8. Integrate the contributions of others who play a role in helping the patient/family achieve health goals. | AACN Essentials Competencies: VI. 1. Compare/contrast the roles and perspectives of the nursing profession with other care professionals on the healthcare team (i.e. scope of discipline, education, and licensure requirements). | NLN Competencies: Teamwork: Function competently within one's own scope of practice as leader or member of the health care team and manage delegation effectively. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

20) A nurse is providing guidance to a group of parents of children in the infant-to-preschool age group. After reviewing statistics on the most common cause of death in this age group, the nurse includes information about prevention of which of the following?

- A) Cancer by reducing the use of pesticides in the home
- B) Accidental injury by reducing the risk of pool and traffic accidents
- C) Heart disease by incorporating heart-healthy foods into the child's diet
- D) Pneumonia by providing a diet high in vitamin C from fruits and vegetables

Answer: B

Explanation:

- A) Cancer due to pesticide use is not a large cause of death in this age group.
- B) Unintentional injuries cause death in infants more often than cancer, heart disease, and pneumonia.
- C) Heart disease is not a large cause of death in this age group.
- D) Pneumonia does not cause a large number of deaths.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Safety and Infection Control

Standards: QSEN Competencies: V.A.1. Examine human factors and other basic safety design principles as well as commonly used unsafe practices (such as work-arounds and dangerous abbreviations) | AACN Essentials Competencies: II.7. Promote factors that create a culture of safety and caring. | NLN Competencies: Quality and Safety: Communicate potential risk factors and actual errors. | Nursing/Integrated Concepts: Nursing Process: Implementation.

Learning Outcome: 7 Contrast descriptive and inferential statistics.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

21) The nurse is preparing a report on the number of births by three service providers at the facility (certified nurse-midwives, family practitioners, and obstetricians). What is this an example of?

- A) Inferential statistics
- B) Descriptive statistics
- C) Evidence-based practice
- D) Secondary use of data

Answer: B

Explanation:

- A) Inferential statistics allow the investigator to draw conclusions from data to either support or refute causation.
- B) Descriptive statistics concisely describe phenomena such as births by providers.
- C) Evidence-based practice is the use of research conclusions to improve nursing care.
- D) Secondary use of data is analyzing data in a different way than was originally undertaken, or looking at different variables from a data set.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: III.A.2. Describe EBP to include the components of research evidence, clinical expertise and patient/family values. | AACN Essentials Competencies: III. 2. Demonstrate an understanding of the basic elements of the research process and models for applying evidence to clinical practice. | NLN Competencies: Knowledge and Science: Retrieve research findings and other sources of information; critique research to judge its value and usefulness; evaluate the strength of evidence for application of research findings to clinical practice. | Nursing/Integrated Concepts: Nursing Process: Planning.

Learning Outcome: 7 Contrast descriptive and inferential statistics.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

22) The nurse is explaining the difference between descriptive statistics and inferential statistics to a group of student nurses. To illustrate descriptive statistics, what would the nurse use as an example?

- A) A positive correlation between breastfeeding and infant weight gain
- B) The infant mortality rate in the state of Oklahoma
- C) A causal relationship between the number of sexual partners and sexually transmitted infections
- D) The total number of spontaneous abortions in drug-abusing women as compared with non-drug-abusing women

Answer: B

Explanation:

- A) A positive correlation between two or more variables is an inferential statistic.
- B) The infant mortality rate in the state of Oklahoma is a descriptive statistic, because it describes or summarizes a set of data.
- C) A causal relationship between the number of sexual partners and sexually transmitted infections is an inferential statistic.
- D) The total number of spontaneous abortions in drug-abusing women is an inferential statistic.

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Cognitive Level: Understanding

Client Need/Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention

Standards: QSEN Competencies: III.A.2. Describe EBP to include the components of research evidence, clinical expertise, and patient/family values. | AACN Essentials Competencies: III. 2. Demonstrate an understanding of the basic elements of the research process and models for applying evidence to clinical practice. | NLN Competencies: Knowledge and Science: Retrieve research findings and other sources of information; critique research to judge its value and usefulness; evaluate the strength of evidence for application of research findings to clinical practice. | Nursing/Integrated Concepts: Nursing Process: Evaluation.

Learning Outcome: 7 Contrast descriptive and inferential statistics.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

23) The nurse manager is examining the descriptive statistics of increasing teen pregnancy rates in the community. Which inferential statistical research question would the nurse manager find most useful in investigating the reasons for increased frequency of teen pregnancy?

- A) What providers do pregnant teens see for prenatal care?
- B) What are the ages of the parents of pregnant teens in the community?
- C) Do pregnant teens drink caffeinated beverages?
- D) What do pregnant teens do for recreation?

Answer: A

Explanation:

- A) Understanding which providers pregnant teens are most likely to seek out for prenatal care can lead to further investigation on why prenatal care with that provider is more acceptable to teens, which in turn can lead to greater understanding of the issue of teen pregnancy.
- B) A question about the age of parents of pregnant teens might prove useful in seeking causes of teen pregnancy, but it is not the most useful question in understanding the increased frequency of teen pregnancy.
- C) Whether pregnant teens drink caffeinated beverages gives no further insight into the issues of teen pregnancy.
- D) Understanding the recreational activities of pregnant teens would not lead to an understanding of the issues surrounding increasing teen pregnancy rates.

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Cognitive Level: Analyzing

Client Need/Sub: Health Promotion and Maintenance: Health Promotion/Disease Prevention

Standards: QSEN Competencies: III.A.2. Describe EBP to include the components of research evidence, clinical expertise, and patient/family values. | AACN Essentials Competencies: III. 2. Demonstrate an understanding of the basic elements of the research process and models for applying evidence to clinical practice. | NLN Competencies: Knowledge and Science: Retrieve research findings and other sources of information; critique research to judge its value and usefulness; evaluate the strength of evidence for application of research findings to clinical practice. | Nursing/Integrated Concepts: Nursing Process: Diagnosis.

Learning Outcome: 7 Contrast descriptive and inferential statistics.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

24) The Quality and Safety Education for Nurses (QSEN) project focused on competencies in which areas?

Note: Credit will be given only if all correct choices and no incorrect choices are selected.

Select all that apply.

- A) Client-centered care
- B) Teamwork and collaboration
- C) Evidence-based practice
- D) Family planning
- E) Injury and violence prevention

Answer: A, B, C

Explanation:

- A) The Quality and Safety Education for Nurses (QSEN) project is designed "to meet the challenge of preparing future nurses who will have the knowledge, skills, and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work," which includes client-centered care.
- B) The Quality and Safety Education for Nurses (QSEN) project, is designed "to meet the challenge of preparing future nurses who will have the knowledge, skills, and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work," which includes teamwork and collaboration.
- C) The Quality and Safety Education for Nurses (QSEN) project, is designed "to meet the challenge of preparing future nurses who will have the knowledge, skills, and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work," which includes evidence-based practice.
- D) Healthy People 2020 focuses on family planning.
- E) Healthy People 2020 focuses on injury and violence prevention.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: V.B.8. Use national patient safety resources for own professional development and to focus attention on safety in care settings. | AACN Essentials Competencies: VIII. 12. Act to prevent unsafe, illegal, or unethical care practices. | NLN Competencies: Quality and Safety: Value and encourage nurses' involvement in the design, selection, implementation, and evaluation of information

technologies to support patient care (e.g., as recommended by QSEN). |
Nursing/Integrated Concepts: Nursing Process: Implementation.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

25) The nurse is serving on a panel to evaluate the hospital staff's reliance on evidence-based practice in their decision-making processes. Which practices characterize the basic competencies related to evidence-based practice?

Note: Credit will be given only if all correct choices and no incorrect choices are selected.

Select all that apply.

- A) Recognizing which clinical practices are supported by good evidence
- B) Recognizing and including clinical practice supported by intuitive evidence
- C) Using data in clinical work to evaluate outcomes of care
- D) Including quality-improvement measures in clinical practice
- E) Appraising and integrating scientific bases into practice

Answer: A, C, E

Explanation:

- A) Recognizing which clinical practices are supported by sound evidence is a basic competency related to evidence-based practice.
- B) Including clinical practice supported by intuitive evidence is not a basic competency related to evidence-based practice.
- C) Using data in clinical work to evaluate outcomes of care is one of the basic competencies related to evidence-based practice.
- D) Including quality-improvement measures is a form of evidence that can be useful in making clinical practice decisions, but it is not a basic competency related to evidence-based practice.
- E) Appraising and integrating scientific bases into practice is one of the characteristics of the basic competencies related to evidence-based practice.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: III.A.2. Describe EBP to include the components of research evidence, clinical expertise and patient/family values. | AACN Essentials Competencies: II. 5. Participate in quality and patient safety initiatives, recognizing that these are complex system issues, which involve individuals, families, groups, communities, populations and other members of the healthcare team. | NLN Competencies: Knowledge and Science: Translate research into practice in order to promote quality and improve practices. | Nursing/Integrated Concepts: Nursing Process: Assessment.

Learning Outcome: 8 Identify the impact of evidence-based practice in improving the quality of nursing care for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

26) Nursing research is vital to do which of the following?

Note: Credit will be given only if all correct choices and no incorrect choices are selected.

Select all that apply.

- A) Expand the science of nursing.
- B) Foster evidence-based practice.
- C) Improve client care.
- D) Visually depict nursing management.
- E) Plan and organize care.

Answer: A, B, C

Explanation:

- A) Research is vital to expanding the science of nursing.
- B) Research is vital to fostering evidence-based practice.
- C) Research is vital to improving client care.
- D) The nursing process is research-based, but is not a part of the clinical pathway. Visually depicting nursing management is part of concept mapping, not nursing research.
- E) Organizing patient care is an aspect of the nursing process. Planning and organizing care is part of nursing care plans, not nursing research.

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Cognitive Level: Understanding

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: III.A.7. Discriminate between valid and invalid reasons for modifying evidence-based clinical practice based on clinical expertise or patient/family preferences. | AACN Essentials Competencies: III. 5. Participate in the process of retrieval, appraisal and synthesis of evidence in collaboration with other members of the healthcare team to improve patient outcomes. | NLN Competencies: Knowledge and Science: Retrieve research findings and other sources of information; critique research to judge its value and usefulness; evaluate the strength of evidence for application of research findings to clinical practice. | Nursing/Integrated Concepts: Nursing Process: Evaluation.

Learning Outcome: 8 Identify the impact of evidence-based practice in improving the quality of nursing care for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

27) A group of nurses are meeting as identified in the image below. Which behavior are the nurses demonstrating during this meeting?



- A) Privacy
- B) Advocacy
- C) Collaboration
- D) Informed consent

Answer: C

Explanation:

- C) Collaborative practice is a comprehensive model of health care that uses a multidisciplinary team of health professionals to provide cost-effective, high-quality care. In a successful team, each individual has autonomy but functions within a clearly defined scope of practice. In such a collaborative approach, no single profession "owns the patient." The right to privacy is the right of a person to keep his or her person and property free from public scrutiny. Advocacy is ensuring a patient receives necessary and required support. Informed consent is a legal concept designed to allow patients to make intelligent decisions regarding their own health care.

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Cognitive Level: Analyzing

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: II.B.9.9. Communicate with team members, adapting own style of communicating to needs of the team and situation. | AACN

Essentials Competencies: VI.5. 5. Demonstrate appropriate teambuilding and collaborative strategies when working with interprofessional teams. | NLN

Competencies: Relationship Centered Care; Practice; Share responsibility responsibly; collaborate and work cooperatively with others. | Nursing/Integrated Concepts: Assessment; Communication and Documentation.

Learning Outcome: 3 Describe the use of community-based nursing care in meeting the needs of childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

28)The nurse is reviewing the Quality and Safety Education for Nurses (QSEN) competencies while preparing an in-service program to address safety in the neonatal intensive care unit. In which order should the nurse present these competencies?

1. Safety
2. Informatics
3. Patient-centered care
4. Quality improvement
5. Evidence-based practice
6. Teamwork and collaboration

Answer: 3, 6, 5, 4, 1, 2

Explanation:

The Quality and Safety Education for Nurses (QSEN) project is designed "to meet the challenge of preparing future nurses who will have the knowledge, skills and attitudes (KSAs) necessary to continuously improve the quality and safety of the healthcare systems within which they work. The project focuses on competencies in six areas: 1. Patient-centered care, 2. Teamwork and collaboration; 3. Evidence-based practice; 4. Quality improvement; 5. Safety; and 6. Informatics.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Safety and Infection Control

Standards: QSEN Competencies: I .A.1.1. Integrate understanding of multiple dimensions of patient centered care. | AACN Essentials Competencies: II . 7. Promote factors that create a culture of safety and caring. | NLN Competencies: Quality and Safety; Ethical Comportment; Commit to a generative safety culture. | Nursing/Integrated Concepts: Implementation; Teaching/Learning.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

29) The nurse is ensuring that a patient has provided informed consent before agreeing to an amniocentesis. In which order should the nurse validate that informed consent was provided by the patient?

1. Information provides risk and benefits
2. Information provided clearly and concisely
3. Information included treatment alternatives
4. Information explaining the right to refuse treatment
5. Information reviews consequences if no treatment provided

Answer: 2, 1, 3, 5, 4

Explanation:

Several elements must be addressed to ensure that the patient has given informed consent. The information must be clearly and concisely presented in a manner understandable to the patient and must include risks and benefits, the probability of success, and significant treatment alternatives. The patient also needs to be told the consequences of receiving no treatment or procedure. Finally, the patient must be told of the right to refuse a specific treatment or procedure. Each patient should be told that refusing the specified treatment or procedure does not result in the withdrawal of all support or care.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I .B.12. Facilitate informed patient consent for care. | AACN Essentials Competencies: II . 7. Promote factors that create a culture of safety and caring. | NLN Competencies: Context and Environment; Knowledge; principles of informed consent, confidentiality, patient self-determination. | Nursing/Integrated Concepts: Evaluation; Nursing Process.

Learning Outcome: 5 Delineate significant legal and ethical issues that influence the practice of nursing for childbearing families.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

30) The nurse is preparing a presentation for new labor and delivery nurses. Which cultural group should the nurse identify as having the lowest birth rate for the 20 to 24 age range?

Table 1-2 Birth Rate by Age and Race of Mother, 2011

Age	All Races	White	Black	American Indian or Alaska Native	Asian or Pacific Islander
10-14	0.4	0.3	0.9	0.5	0.1
15-19	31.3	29.1	47.3	36.1	10.2
15-17	15.4	14.1	24.7	18.2	4.6
18-19	54.1	50.8	78.8	61.6	18.1
20-24	85.3	83	111.9	86.6	41.9
25-29	107.2	110	101.7	75.4	93.7
30-34	96.5	100.1	74.1	47.3	114.9
35-39	47.2	47.6	38.0	23.1	64.1
40-44	10.3	10.1	9.4	5.5	15.2
45-49	0.7	0.6	0.7	0.2	1.2

Source: Martin, J.A., Hamilton, B.E., Ventura, S.J., Osterman, M.J.K., & Matthews, T.J. (2013). Births: Final data 2011. *National Vital Statistics Reports*, 62(1), 1-70.

- A) Asian
- B) White
- C) Black
- D) American Indian

Answer: A

Explanation:

- A) For the 20 to 24 age group, the lowest birth rate is within the Asian or Pacific Islander cultural group. The birth rate for Whites for this age range is the next lowest. The birth rate for American Indians within this age group is the third highest and the highest birth rate for this age group is within the Black cultural group.

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Cognitive Level: Analyzing

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I .A.1. Integrate understanding of multiple dimensions of patient centered care. | AACN Essentials Competencies: V . 6. Explore the impact of socio-cultural, economic, legal and political factors influencing healthcare delivery and practice. | NLN Competencies: Relationship Centered Care; Knowledge; The role of family, culture, and community in a person's development. | Nursing/Integrated Concepts: Implementation; Teaching/Learning.

Learning Outcome: 6 Evaluate the potential impact of some of the special situations in contemporary maternity care.

MNL LO: Recognize contemporary issues related to care of the childbearing family.

31) The manager of a maternal-child care area is preparing information to share with nursing staff regarding the leading causes of infant death in the United States. In which order, from most to least frequent, should the manager provide this information?

1. SIDS
2. Low birth weight
3. Unintentional injuries
4. Maternal complications
5. Congenital malformation

Answer: 5, 2, 1, 4, 3

Explanation:

The five leading causes of deaths of infants in the United States, from highest to lowest in frequency, are congenital malformations, low birth weight, SIDS, maternal complications, and unintentional injuries.

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Cognitive Level: Applying

Client Need/Sub: Safe and Effective Care Environment: Management of Care

Standards: QSEN Competencies: I .A.1. Integrate understanding of multiple dimensions of patient centered care. | AACN Essentials Competencies: V . 6. Explore the impact of socio-cultural, economic, legal and political factors influencing healthcare delivery and practice. | NLN Competencies: Relationship Centered Care; Knowledge; The role of family, culture, and community in a person's development. | Nursing/Integrated Concepts: Implementation; Teaching/Learning.

Learning Outcome: 6 Evaluate the potential impact of some of the special situations in contemporary maternity care.

MNL LO: Recognize contemporary issues related to care of the childbearing family.