

MULTIPLE CHOICE

1. Which medical risk factor contributes to a higher infant mortality rate?
 - a. Diabetes mellitus
 - b. Mitral valve prolapse (MVP)
 - c. Chronic hypertension
 - d. Anemia

ANS: C

Poor maternal health or chronic conditions such as hypertension are important contributors to a high infant mortality rate. Although diabetes mellitus, MVP, and anemia are concerns in pregnancy, they are not one of the most frequently reported maternal medical risk factors that contribute to a higher infant mortality.

DIF: Cognitive Level: Knowledge REF: page 5 OBJ: 4
TOP: Nursing Process: Assessment MSC: CRNE: CH-7

2. Which woman would be most at risk for the poorest perinatal outcome?
 - a. A 25-year-old single mother on maternity leave with two existing children
 - b. An unemployed 32-year-old lawyer in an inner city neighbourhood
 - c. An Inuit woman in her mid-20s with no high school education
 - d. A 19-year-old college student who lives at home with her parents

ANS: C

Both the Canadian Perinatal Surveillance System (CPSS) and the Maternity Experiences Survey note that poor women, Aboriginal women, and young women with less education consistently have the poorest perinatal outcomes.

DIF: Cognitive Level: Analysis REF: page 3 OBJ: 4
TOP: Nursing Process: Assessment MSC: CRNE: CH-9

3. Which is the main characteristic of the evolved role of the professional perinatal nurse?
 - a. Providing care to patients directly at the bedside
 - b. Planning patient care to cover longer hospital stays
 - c. Leading the activities of a team of interdisciplinary health care providers
 - d. Managing care to cure health problems once they have occurred

ANS: C

Professional nurses are part of the team of health and social care providers who collaboratively care for perinatal patients and their families. Providing care to patients directly at the bedside is one of a nurse's tasks, but it does not encompass the concept of the evolved professional nurse. Patient hospital stays are decreasing in length of time rather than becoming longer stays. Nurses do not cure health problems; they work to promote well-being.

DIF: Cognitive Level: Knowledge REF: page 2 OBJ: 1
TOP: Nursing Process: Implementation MSC: CRNE: PP-9

4. Ms. Kiyawasew, a 23-year-old First Nations woman, is pregnant with her first child. Based on the statistics for infant mortality, which intervention is most important for the nurse to implement?
- Perform a nutrition assessment.
 - Refer the woman to a social worker.
 - Advise the woman to see an obstetrician, not a midwife.
 - Explain to the woman the importance of keeping her prenatal care appointments.

ANS: D

Consistent prenatal care is the best method of preventing or controlling risk factors associated with infant mortality. Nutritional status is an important modifiable risk factor, but it is not the most important action a nurse should take in this situation. The patient may need assistance from a social worker at some time during her pregnancy, but a referral to a social worker is not the most important aspect the nurse should address at this time. If the woman has identifiable high-risk problems, her health care may need to be provided by a physician. However, it cannot be assumed that all First Nations women have high-risk issues. In addition, advising the woman to see an obstetrician is not the most important aspect on which the nurse should focus at this time.

DIF: Cognitive Level: Application

REF: page 3

OBJ: 4

TOP: Nursing Process: Planning

MSC: CRNE: CH-13

5. The nurse knows that teaching to promote healthy living has been effective when the patient makes which comment?
- "I'll do whatever you say; you're the nurse."
 - "I don't think I can quit smoking."
 - "I exercise for 30 minutes, 3 days a week."
 - "What do you think I should do?"

ANS: C

"I exercise for 30 minutes, 3 days a week" indicates the patient's willing participation and understanding of healthy living behaviours. Doing is different from comprehension. The goal of teaching about healthy living is to make sure the patient understands the factors associated with her care. Smoking cessation is only one behaviour associated with healthy living in pregnancy. The patient's question, "What do you think I should do?" indicates that she does not understand what measures she can take to practice healthy living behaviours.

DIF: Cognitive Level: Application

REF: page 12

OBJ: 5

TOP: Nursing Process: Evaluation

MSC: CRNE: NCP-14

6. When managing health care for pregnant women at a prenatal clinic, which barrier to access prenatal care is considered most significant?
- Age
 - Minority status
 - Educational level
 - Geographic location

ANS: D

The most significant barrier to health care access is geographic location. Inequities in access to good quality prenatal care have developed particularly in rural, remote, inner city, and Aboriginal communities. Although adolescent pregnant patients statistically receive less prenatal care, age is not the most significant barrier. Significant disparities in morbidity and mortality rates exist for minority women; however, minority status is not the most significant barrier to access of care. Disparities in educational level are associated with morbidity and mortality rates; however, educational level is not the most significant barrier to access of care.

DIF: Cognitive Level: Knowledge
TOP: Nursing Process: Assessment

REF: page 3
OBJ: 1
MSC: CRNE: HW-11

7. What is the primary role of practicing nurses in the research process?
- Designing research studies
 - Collecting data for other researchers
 - Identifying areas for further research
 - Seeking funding to support research studies

ANS: C

The primary role of the practicing nurse is to identify areas for further research. When problems are identified, research can be conducted properly. Research of health care issues leads to evidence-informed practice guidelines. Designing research studies is only one factor of the research process. Data collection is one factor of research. Financial support is necessary to conduct research, but it is not the primary role of the nurse in the research process.

DIF: Cognitive Level: Comprehension
TOP: Nursing Process: Diagnosis | Nursing Process: Evaluation
MSC: CRNE: PP-14

8. Which event shifted the focus of the Public Health Agency of Canada (PHAC) away from a population health and health promotion focus?
- Shift to home births
 - Emergence of avian influenza
 - United Nations Millennium Goals
 - Increase in the maternal mortality rate

ANS: B

The emergence of the avian influenza shifted the focus of the PHAC from population health and a health promotion focus to a focus on planning for a pandemic. There has been no shift to home births from hospital births in Canada. The United Nations Millennium Goals did not cause a focal shift for the PHAC. There has not been an increase in the maternal mortality rate.

DIF: Cognitive Level: Comprehension
TOP: Nursing Process: Implementation
REF: page 3
OBJ: 7
MSC: CRNE: HW-16

9. From the nurse's perspective, what measure should be the focus of the health care system to further reduce the rate of infant mortality?
- Implementing programs that focus on health promotion and preventive care
 - Increasing the length of stay in a hospital after vaginal birth from 2 to 3 days
 - Expanding the number of neonatal intensive care units (NICUs)

- d. Mandating that all pregnant women receive care from an obstetrician

ANS: A

To address factors that are associated with infant mortality, there needs to be a shift from the current emphasis on highly technological medical intervention toward a focus on health promotion and preventive care. An increased length of stay has been shown to foster improved self-care and parental education; however, it does not prevent the incidence of leading causes of infant mortality rates such as low birth weight. NICUs offer care to high-risk infants after they are born; therefore, expanding the number of NICUs would offer better access for high-risk care, but this factor is not the primary focus for further reduction of infant mortality rates. A mandate that all pregnant women receive obstetric care would be nearly impossible to enforce.

DIF: Cognitive Level: Comprehension REF: page 5 OBJ: 6
TOP: Nursing Process: Implementation MSC: CRNE: HW-3

10. Which is a characteristic of integrative healing?
- It replaces conventional Western modalities of treatment.
 - It is used by only a small number of Canadian adults.
 - It recognizes the value of patients' input into their health care.
 - It focuses primarily on the disease an individual is experiencing.

ANS: C

Integrative healing encompasses complementary and alternative therapies and healing modalities that offer human-centred care based on philosophies that recognize the value of the patient's input and honor the individual's beliefs, values, and desires. Alternative and complementary therapies are part of an integrative approach to health care. An increasing number of Canadian adults are seeking alternative and complementary health care options. Alternative healing modalities offer a holistic approach to health, focusing on the whole person, not just the disease.

DIF: Cognitive Level: Comprehension REF: page 7 OBJ: 7
TOP: Nursing Process: Planning MSC: CRNE: HW-4

11. A 38-year-old Métis woman delivered a 4250 g baby girl vaginally after being in labour for 43 hours. The baby died 3 days later from sepsis. On what grounds would the woman potentially have a legitimate legal case for negligence?
- She is Métis.
 - She delivered a girl.
 - She refused fetal monitoring.
 - The standards of care were not met.

ANS: D

Not meeting the standards of care is a legitimate factor for a case of negligence. Perinatal nurses act with integrity and in a manner consistent with their professional responsibilities and standards of practice. The patient's race is not a factor for a case of negligence, nor is the infant's gender a factor. Although fetal monitoring is the standard of care, the patient has the right to refuse treatment. This refusal is not a case for negligence, but informed consent should be properly obtained, and the patient should sign an against medical advice form for refusal of any treatment that is within the standard of care.

DIF: Cognitive Level: Comprehension REF: page 3, Box 1-1

OBJ: 7

TOP: Nursing Process: Planning

MSC: CRNE: PP-8

12. Which of the following have contributed to escalating maternity-related health care costs?
- Early postpartum discharges
 - Explosion in perinatal care technology
 - The reduction in acceptable genetic screening options
 - Rural health services delivered via telemedicine networks

ANS: B

The explosion of technology in health care, for example, electronic fetal health surveillance, has contributed to escalating health care costs. Early postpartum discharges have reduced costs, not increased them. Genetic screening options have increased, not decreased, and they affect the ways in which women and their families experience pregnancy. Rural health services delivered via telemedicine networks have reduced rather than increased health care costs.

DIF: Cognitive Level: Analysis

REF: page 5

OBJ: 7

TOP: Nursing Process: Implementation

MSC: CRNE: CH-3

13. What is the term used to describe legal and professional responsibility for maintaining standards of practice?
- Collegiality
 - Ethics
 - Evaluation
 - Accountability

ANS: D

Accountability refers to perinatal nurses acting with integrity and in a manner consistent with their professional responsibilities and standards of practice. *Collegiality* refers to a working relationship with one's colleagues. *Ethics* refers to a code to guide practice. *Evaluation* refers to examination of the effectiveness of interventions in relation to expected outcomes.

DIF: Cognitive Level: Evaluation REF: page 3, Box 1-1

OBJ: 1

TOP: Nursing Process: Evaluation

MSC: CRNE: PP-8

14. Which reflects a future goal for perinatal nursing?
- Limiting multiprofessional teams
 - Maintaining existing power structures
 - Advocating for an increased number of Cesarean sections
 - Addressing health inequities by creating healthy public policies

ANS: D

Addressing health inequities by creating health policy and services that focus on both resources needed for health and access to health services is a future goal of perinatal nurses. Nurses should be expanding multiprofessional teams rather than limiting their existence. Existing power structures and practices need to be disrupted rather than maintained. Advocating for an increased number of cesarean section births is not a future goal for perinatal nursing.

DIF: Cognitive Level: Knowledge REF: page 14, Box 1-12

OBJ: 7

TOP: Nursing Process: Implementation

MSC: CRNE: HW-1

15. Which statement is true related to integrative healing?
- Its aim is to provide the same health care for all racial and ethnic groups.
 - It blends complementary and alternative therapies with conventional Western treatment.
 - It focuses on the disease or condition rather than the background of the patient.
 - It has been mandated by Health Canada.

ANS: B

Integrative healing tries to mix the old with the new at the discretion of the patient and health care providers. Integrative healing is a blending of new and traditional practices and focuses on the whole person, not just the disease or condition. Health Canada supports complementary and alternative therapies but does not mandate them.

DIF: Cognitive Level: Application REF: page 7 OBJ: 7
TOP: Nursing Process: Implementation MSC: CRNE: HW-14

16. Which recent trend in childbirth practices in Canada is accurate?
- More than 15% of mothers had late or no prenatal care.
 - The percentage of Aboriginal and White women who received prenatal care was essentially the same.
 - Ninety-eight percent of births occurred in the hospital.
 - Less than 50% of pregnant women take folic acid supplements.

ANS: C

The majority of births occur in the hospital, approximately 98% of them. Only 3.4% of mothers had either late care or no care. A higher percentage of White women received prenatal care than Aboriginal women. The majority of pregnant women take folic acid supplements.

DIF: Cognitive Level: Knowledge REF: page 9 OBJ: 4
TOP: Nursing Process: Planning MSC: CRNE: CH-3

17. Which trend has a positive impact on the infant mortality rate?
- Delayed second-stage pushing is now discouraged in labour.
 - Episiotomy rates are increasing.
 - Midwives perform more episiotomies than physicians.
 - Newborn infants remain with the mother and are encouraged to breastfeed.

ANS: D

Infants are encouraged to remain with their mother to assist in keeping them warm, and breastfeeding is encouraged immediately after birth. Delayed pushing is encouraged for several reasons, not discouraged. Episiotomy rates are declining rather than increasing. Midwives perform fewer episiotomies than do physicians.

DIF: Cognitive Level: Knowledge REF: page 13 OBJ: 6
TOP: Nursing Process: Planning MSC: CRNE: HW-3

18. Which of the following best describes a doula?
- Advanced practice labour and delivery nurse
 - A trained and experienced female labour attendant
 - Clinical nurse specialist in neonatal and postpartum care
 - Leader of a multidisciplinary, intrapartum health care team

ANS: B

A *doula* is a trained and experienced female labour attendant and may provide continuous one-on-one caring presence throughout the labour and birth. A doula does not need to be a nurse. An advanced practice labour and delivery nurse is not a doula. A clinical nurse specialist in neonatal and postpartum care is not a doula. A doula is not a leader of a multidisciplinary intrapartum health care team.

DIF: Cognitive Level: Comprehension REF: page 6 OBJ: 7
TOP: Nursing Process: Planning | Nursing Process: Implementation
MSC: CRNE: PP-26

19. Which is the correct definition of the perinatal mortality rate?
- Number of live births in one year per 1000 population
 - Number of deaths of infants under one year of age per 1000 live births
 - Number of deaths of infants under 28 days of age per 1000 live births
 - Number of stillbirths and neonatal deaths per 1000 live births

ANS: D

The *perinatal mortality rate* is the number of stillbirths and neonatal deaths per 1000 live births. The number of live births in one year per 1000 population is the *birth rate*. Number of deaths of infants under one year of age per 1000 live births is the *infant mortality rate*. Number of deaths of infants under 28 days of age per 1000 live births is the *neonatal mortality rate*.

DIF: Cognitive Level: Knowledge REF: page 7, Box 1-7
OBJ: 4 TOP: Nursing Process: Assessment MSC: CRNE: CH-3

20. Which statement is true of maternity nursing care that is based on knowledge gained through various forms of research?
- An outgrowth of telemedicine
 - Known as *evidence-informed practice*
 - Exclusive to maternity nursing practice
 - At odds with the Cochrane Pregnancy and Childbirth Database

ANS: B

Evidence-informed practice is based on knowledge gained from various forms of research. Evidence-informed practice is practiced within all disciplines of nursing and is not exclusive to maternity nursing practice. The Cochrane Pregnancy and Childbirth Database is based on systematically reviewed research trials and is part of the evidence-informed practice movement. Telemedicine uses communication technologies to support health care.

DIF: Cognitive Level: Comprehension REF: pages 9-10 OBJ: 7
TOP: Nursing Process: Assessment MSC: CRNE: PP-15

21. Which of the following is a principle of the Canada Health Act?
- Justice
 - Universality
 - Health and well-being
 - Informed decision making

ANS: B

Universality is one of the five principles of the Canada Health Act. Justice is a guiding principle for perinatal nursing in Canada. Informed decision making is a guiding principle for perinatal nursing in Canada. Health and well-being is a guiding principle for perinatal nursing in Canada.

DIF: Cognitive Level: Knowledge
TOP: Nursing Process: Assessment

REF: page 3
OBJ: 2
MSC: CRNE: HW-26

22. During an initial prenatal interview, the patient informs the nurse that she would prefer a midwife to both provide her care during pregnancy and deliver her infant. What information would be most appropriate for the nurse to share with this patient?
- a. Midwifery care is not a choice for women in Canada.
 - b. Usually two midwives attend the birth and share perinatal care.
 - c. She should be aware of poor outcomes associated with midwifery care.
 - d. Her delivery can take place only at home or in a birth centre.

ANS: B

Usually two midwives attend the birth and share the care throughout the pregnancy, labour, and birth and after delivery for six weeks. Although Canada has a very low percentage of well-woman care provided by midwives, these services are available. Midwifery care is not associated with poor outcomes. Midwives can provide care and delivery at home, in freestanding birth centres, and in community and teaching hospitals.

DIF: Cognitive Level: Knowledge
TOP: Nursing Process: Implementation

REF: page 3
OBJ: 6
MSC: CRNE: CH-2

23. While obtaining a detailed history from a woman who has recently emigrated from Somalia, the nurse realizes that the patient has undergone female genital mutilation (FGM). Which is the nurse's best response?
- a. "This is a very abnormal practice and rarely seen in Canada."
 - b. "Do you know who performed this so that it can be reported to the authorities?"
 - c. "We will be able to fully restore your circumcision after delivery."
 - d. "The extent of your circumcision will affect the potential for complications."

ANS: D

"The extent of your circumcision will affect the potential for complications" is the most appropriate response. The patient may experience pain, bleeding, scarring, or infection and may require surgery before childbirth. With the growing number of immigrants from countries where FGM is practiced, nurses will increasingly encounter women who have undergone the procedure. Responding with "This is a very abnormal practice and rarely seen in Canada" is culturally insensitive. The infibulation may have occurred during infancy or childhood. The patient will have little to no recollection of the event. She would have considered this to be a normal milestone during her growth and development. The International Council of Nurses has spoken out against this procedure as harmful to a woman's health and a violation of human rights.

DIF: Cognitive Level: Comprehension
TOP: Nursing Process: Planning

REF: page 13
OBJ: 7
MSC: CRNE: NCP-7

24. According to the Canadian Maternity Experiences Survey, what was the most frequent pain medication used during labour and delivery?

- a. Nitrous oxide
- b. Demerol (meperidine)
- c. Epidural anaesthesia
- d. Local infiltration anaesthesia

ANS: C

Epidural anaesthesia was the most frequent pain medication used by women; it was reported by 57% of women in the survey. Nitrous oxide, inhalation therapy was not the more frequently reported pain medication used by women. Demerol (meperidine) was not the more frequently reported pain medication used by women. Local infiltration anaesthesia was not the more frequently reported pain medication used by women.

DIF: Cognitive Level: Knowledge
TOP: Nursing Process: Assessment

REF: page 9
OBJ: 5
MSC: CRNE: CH-52

25. Which of the following is a strategic direction for nursing and midwifery services as identified by the World Health Organization?
- a. Culturally appropriate prenatal care
 - b. Health and human resource planning
 - c. Consent and allocation of scarce resources
 - d. Collaborating with stakeholders in an ongoing dialogue

ANS: B

Health and human resource planning is one of the five strategic directions for nursing and midwifery services. Culturally appropriate prenatal care is certainly important but it is not one of the five directions. Consent and allocation of scarce resources is not one of the five directions. Collaborating with stakeholders in an ongoing dialogue is one of the goals of the Canadian Patient Safety Institute (CPSI), not the World Health Organization.

DIF: Cognitive Level: Knowledge
TOP: Nursing Process: Implementation

REF: page 13
OBJ: 7
MSC: CRNE: PP-28