

Study guide for maternity nursing

[Health & Medicine](#), [Nursing](#)



Study Guide for Exam 1 * What are the risk factors for uterine atony? Loss of uterine tone Overdistention of the uterus (multiple gestation, polyhydramnios, macrosomia, fibroid tumors, distention with clots), bladder distention, grand multiparity, uterine trauma (forceps vacuum, c-section, cervical biopsy), bottle feeding, length of labor (precipitous or prolonged), Hx of PPH, medications (anesthesia, recent tocolysis, magnesium sulfate, induction greater than 15 hours), abruptio placenta, placenta previa, infection, inversion of uterus, placenta accrete – increta – percreta * Upon palpation you find that your client's uterus is above the umbilicus and displaced to the right, what is your nursing intervention? sk patient last time they voided. check for distention of the bladder (superpubic distention), encourage voiding. teaching patient to try and void q2h. Methods to promote urination: hand under warm water, squirt bottle, sitz bath, analgesic, warm shower. * How would you expect a pp client's labs to change/ 1.

WBC Increase 2. H&H Decrease 3. Platelets Stay Same * Bright red bleeding of lochia rubra one week or more into the pp period would suggest what? Late postpartum hemorrhage What teaching do you give after administering a rubella vaccine? Patient should not get pregnant for one month following the vaccine * You assess a pp client 20 minutes after birth and discover that she has saturated her pad.

Her fundus is slightly above the umbilicus but centered (not off to the side this time) and boggy. What will be your next action? Early postpartum hemorrhage. Massage uterus firmly and continuously until uterus becomes firm. Call for help (to notify physician). Position flat with feet elevated approximately 30 degrees. Vital signs, I&O.

Medicine to contract uterus may be needed, IV, O2 10L through mask, Cath, prep for D&C, bimanual massage * How do you relieve a Post C-section client of gas pains? What are gas pains post-surgical described as? Gas pains are described as pain in the stomach. stomach distended and hard. For tx promote ambulation for pain (medication will not effective) and offer warm beverages to promote peristalsis * Study the postpartum psychosocial phases. Page 424 of book * Review postpartum care of the Mexican-American woman. Page 410 of book. * What are the signs of a cervical/high vagina laceration? Fundus will remain firm, continuous spurting of bright red blood * Study risk for postpartum depression. Pg. 741 * Review signs and symptoms of PIH.

* What treatments would be given for endometritis and what is the rationale?

* Review care of the client with mastitis. * The math will include all of the same type problems as last exam including a GTPAL. G – number of times pregnant T – number of term births P – number of preterm births A – number of abortions (spontaneous and induced) L – number of living children * Know the 3 lochia types and time span for each. Rubra (red) days 1-4 Serosa (pink-brown) days 2-10 Alba (white) days 11+ ..

. 3-6 weeks postpartum * Review teaching for the mother concerning uterine involution/ recovery and self-care activities for a new vaginal delivered client.