

Solutions Manual for Maternity, Newborn, and Women's Health Nursing 2nd O'Meara

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Answers to Think Critically Questions, Chapter 2,

Tatiana Bennett: Later Postpartum Hemorrhage

1. Make sure to take your pill close to the same time every day to minimize side effects such as breakthrough bleeding. If you start your pill within 5 days of starting your period, it is considered effective immediately. If you start later in your cycle, make sure to use a backup method for a week before you rely on the pill for contraception. If you forget to take one pill, take it as soon as you remember. If you forget two pills in the first few weeks of your pack, take two pills when you remember and two pills the next day, and use a backup contraceptive method for 7 days. If you miss two pills in week, three or three pills in a row at any point, take one pill a day until Sunday, throw out the remainder of the pack, and start a new pack the same day. You'll want to use a backup contraceptive method for a week.
2. It depends. We know that the father has two recessive genes because his eyes are blue, which is a recessive trait (b, b). The mother's eyes are brown, however. Because brown is a dominant trait, someone with brown eyes may have either one or two genes for brown eyes (B, b) or (B, B). If the mother has two dominant genes for brown eyes, a blue-eyed child is not possible because the mother can only give B, the dominant gene. If, however, the mother has one gene for brown eyes (B) and one gene for blue eyes (b), each offspring has a 25% chance of inheriting blue eyes.
3. See Patient Teaching 2.3.
4. Group B *Streptococcus* is treated during labor rather than before as colonization tends to recur. Treating during labor increases the chance that the colonization will be adequately treated. Treatment during labor also allows the fetus access to the antibiotic via the maternal circulation. Because penicillin G is the first-line medication for treating group B *Streptococcus* and penicillin allergies are common, it is critical to ask the patient about medication allergies prior to administration.
5. A hungry baby will often display lip-smacking or move their hand to their mouth. The baby may exhibit rooting or appear restless. Crying is a late sign of hunger. A good latch should not be painful. The infant's lips should be flanged and not curled under. A majority of the areolae should be in the infant's mouth (see Fig. 18.19).
6. Uterine atony is failure of the uterus to contract down fully and "pinch" off the blood vessels of the placental bed. Females assigned at birth with uterine atony are at risk for hemorrhage. The priority with uterine atony is to make



the uterus firm. This can typically be done successfully through uterine massage, but medications may be necessary if massage is ineffective.

7. You could say to the patient, "It's not uncommon soon after giving birth to have a reduced sense of your bladder filling. Even if you don't feel like you need to urinate, your bladder may be filling. A full bladder can displace your uterus and cause it to relax. When a uterus is relaxed we call it uterine atony, and it can lead to dangerous bleeding."



Suggested Answers to Assignments, Chapter 2, Tatiana Bennett: Later Postpartum Hemorrhage

Written Assignments	Learning Objective
1. Students' answers should include the following: • Oligo- or anovulation ○ Due to increased luteinizing hormone (LH) secretion and decreased follicle-stimulating hormone (FSH) secretion; follicle development is impaired, leading to lack of ovulation. • Hyperandrogenism ○ Androgen excess leads to hirsutism, acne, alopecia, and comorbidity of depression. • Polycystic ovaries ○ Arrest in antral follicle development leads to "string of pearls" on ultrasound.	2
2. Students' answers should include a diagram that depicts the first pregnancy shown as a closed system with the Rh-negative patient and the Rh-positive fetus; however, the subsequent pregnancy shows the Rh-negative patient with circulating antibodies that attack the Rh-positive fetus. During the birth of the first Rh-positive baby, blood may	6



Written Assignments	Learning Objective
pass from the placenta to the patient; the Rh-negative patient develops antibodies that can attack any Rh-positive fetuses during future pregnancies.	

Group Assignments	Learning Objective
1a. Students' answers should include the following major risk factors for late postpartum hemorrhage: • Uterine atony • Retained placenta or membranes • Subinvolution • Uterine infection • Lacerations of the vulva, vagina, or cervix • Genital hematoma • Coagulopathy 1b. The three interventions to resolve postpartum hemorrhage should include: • Massaging the uterine fundus • Checking maternal vital signs • Giving methylergonovine maleate • Starting an intravenous line (second line for possible blood transfusion) • Carrying out an ultrasound to check for retained placenta	3

Group Assignments	Learning Objective
or membranes • Notifying the medical team	
2. Students' answers should include the following behaviors that show the newborn is ready to feed: • Alert, quiet state • Opens mouth wide when the nipple is brushed against their lips • Smacking lips • Rooting when the infant's cheek is stroked • Making sucking motions	9

Clinical Assignments	Learning Objective(s)		
1. Students' answers should include the following: • Palpation of uterine fundus for position and consistency • Monitoring of vaginal flow or lochia for amount, color, and consistency	5		
2. Students' answers should include the following table: <table border="1"> <tr> <td>Benefits</td><td>Disadvantages</td></tr> </table>	Benefits	Disadvantages	7
Benefits	Disadvantages		



Clinical Assignments		Learning Objective(s)
• Regulation of menstrual cycle; prevention of pregnancy; and effects are reversible. • Less severe menstrual cramps • Improve acne • Protect against pelvic inflammatory disease • Reduces symptoms of endometriosis • Decreases menstruation flow so lessened risk of iron deficiency anemia	• Adverse effects such as nausea, headaches, breast tenderness, mood swings; elevated blood pressure; blood clots; and break through menstrual bleeding • Lack protection against sexually transmitted diseases • Possible lessen libido • Due to drug-to-drug interactions, the efficacy of the pill may be lessened that	



Clinical Assignments		Learning Objective(s)
	would increase the risk of unwanted pregnancy. • Must be taken consistently to be effective	
3. Students' answers should include the following: • During true labor, the patient's contractions have the following qualities: ○ Pain in lower back and abdomen with pressure in the pelvis ○ Progressive pattern that becomes stronger, closer together, and lasting longer ○ Walking leads to the discomfort getting more intense ○ Drinking water and resting do not change contractions. • During false labor, the patient's contractions have the following qualities: ○ Discomfort is felt in the abdomen. ○ Over time, there is no change in pattern; discomfort is mostly irregular or if regular, it is only for short period of time. ○ Stop with walking ○ Resolve when drinking adequate amount of water or		8



Clinical Assignments	Learning Objective(s)
resting	

Web Assignments	Learning Objective
1. Students' answers should include the following: • https://www.aafp.org/family-physician/patient-care/clinical-recommendations/all-clinical-recommendations/cw-pap-smears.html ○ The first PAP test should be performed at age 22 regardless of sexual history. ○ Patients between the ages of 25 and 29 years should have a Pap smear every 3 years; however, if a Pap reveals ASCUS, then an HPV test should be added. ○ Pap test with HPV is recommended every 5 years for patients aged 30 to 64 years. ○ No cervical cancer screening is needed for patients 65 years or older with no history of abnormal Pap tests in the previous 20 years.	1
2. Students' answers should include the following: • Autosomal recessive genetic inherited disease examples would be: ○ Cystic fibrosis ○ Sickle cell disease ○ PKU ○ Albinism	4

Web Assignments	Learning Objective
• To acquire this disease, the child would need to get a copy of the mutation from each parent. (The healthy gene is dominant and the disorder is recessive.) • Autosomal dominant genetic inherited disease examples would be: ○ Rh-positive trait ○ Huntington disease ○ Familial hypercholesterolemia • To have the disease, one parent gave the child a defective dominant allele. (The healthy gene is recessive and the disorder is dominant.)	



Suggested Answers to Case Study, Chapter 2, Tatiana Bennett: Later Postpartum Hemorrhage

Note: The answers presented here are for a supplemental case study to this chapter and feature different individual(s) than the case study in the chapter.

1. The nurse should tell Eva and JD that feeding options are completely individual and that staff will support the couple regardless of their choice to bottle-feed or breastfeed. In addition, breastfeeding, although beneficial, takes effort from both the mother and the baby, so she should continue to work hard to successfully breastfeed.

Babies will let you know when they are ready to eat. Infants cry when hungry (a cry that will soon be distinguishable from cries meaning something other than hunger). Also, infants will root, be more alert, smack their lips, and open their mouths when ready to eat. The nurse should tell the parents to monitor output by ensuring six to eight wet diapers per day. Overfeeding, although rare when breastfeeding, may manifest itself with the infant vomiting. If this occurs, a consult from a lactation consultant would be beneficial. On rare occasions, a newborn will have difficult latching on or stay satisfied with the amount of milk the mother is producing. The mother



should continue to try, if she wants to, and not feel that she is failing at breastfeeding.

2. If Eva is in true labor, she would be advised to go the nearest labor and birthing unit to be checked for labor signs. Signs of true labor include:

- Contractions that become more intense with ambulation
- Contractions that are stronger, closer, and longer
- Pain presenting in the lower back and abdomen
- Changes in cervical dilation

3. Rh is a protein found on blood cells (think of it like sprinkles on a donut). If you have the protein (sprinkles), you are Rh (+). If you do not have the protein (no sprinkles), you are Rh (-). Blood may cross between the bloodstream of the mother and the baby during birth and produce antibodies. These antibodies can effect subsequent pregnancies and cause harm by attacking and destroying the red blood cells of those babies.



Case Study, Chapter 2, Tatiana Bennett: Later Postpartum Hemorrhage

Note: The case study presented here is a supplemental case to this chapter and features different individual(s).

Eva and JD Donchess are newlyweds who decided to start a family. Eva has a toddler from a previous relationship, but Baby Carmella is going to be “Daddy’s little girl”! Eva is also thrilled she is having a girl since her first baby was a boy. Eva bottle-fed her first baby but decided to breastfeed Carmella. Both JD and Eva read about the benefits of breastfeeding; however, the proud new parents are worried about the whole process. They voiced their concerns to the nurse teaching the childbirth education class: “How will we know if she is hungry? How do we know if she is getting enough milk, or if I am overfeeding her because you cannot measure breastmilk?” Eva and JD are apologetic about all their questions, but remain worried. While in childbirth class, the conversation of breastfeeding moved to other topics such as labor, prenatal laboratory tests, and birth. (Learning Objectives #6, #8, and #9)

1. How should the nurse educate these new parents about breastfeeding and the needs of a newborn? What can you tell them about their breastfeeding choice?

2. Since Eva's first baby was delivered by cesarean birth, she is concerned she will not know when she is really in labor. Create a list of signs that indicate true labor. What advice would you give Eva when she is in true labor?
3. JD said he read online about a "shot" that prevents the new baby from reacting to Eva's blood. How would you explain Rh incompatibility?

Suggested Answers to Discussion Topics, Chapter 2, Tatiana Bennett: Later Postpartum Hemorrhage

Suggested Answers to Discussion Topics	Learning Objective(s)
1a. Students' answers should include the following: • Sickle cell disease is an autosomal recessive inherited disorder. • The child would need to receive a recessive copy of the mutation from both parents. • If Victoria and the father of the baby both carry a sickle cell recessive gene, then their baby would have a 25% chance of acquiring sickle cell disease. 1b. Students' answers should include the following: • The nurse can show Victoria her uterine fundus by gently feeling just below her umbilicus. • The components of a uterine fundal assessment are as follows: ○ A firm versus boggy fundus ○ The fundus is midline versus deviated to one side or the other. ○ The location decreases over time by one fingerbreadth per 24 hours.	3, 4, 5, 9



Suggested Answers to Discussion Topics	Learning Objective(s)
1c. Students' answers should include the following: • The pertinent risk factor of late postpartum hemorrhage noted in Victoria's delivery was an infant who was large for gestational age. • The individualized plan of care for Victoria would be to assess for thin, continuous vaginal bleeding that could have occurred from a laceration to her cervix, vagina, or vulva during the birthing process that was assisted with forceps. In addition, the nurse would assess for a genital hematoma formation, a clue of which is when Victoria stated that she had perineal or groin pain with ambulation. The nurse also monitors Victoria's vital signs for signs of shock. 1d. Students' answers should include the following: • During an 8-hour shift, Victoria's baby girl is 40 to 48 hours old. The nurse would take opportunities to facilitate breastfeeding when the infant displays the following behaviors: ○ Alert, quiet ○ Responding by opening the mouth wide when the lips are brushed with a nipple ○ Smacking lips ○ Assisting the infant to be <i>en face</i> with the mother and positioned belly to belly	

Suggested Answers to Discussion Topics	Learning Objective(s)
2a. Students' answers should include the following: • The best interpretation of Tamera's abdominal cramps would be that she is experiencing false labor, which is supported by the following: ◦ Primarily abdominal cramps ◦ Urine cramps that do not progress, but become irregular ◦ Resting and drinking water causes the uterine cramps to slow down. 2b. Students' answers should include the following: • Since Tamera has a known Rh-negative factor, she would need a dose of RhoGAM within 48 hours of the onset of vaginal bleeding. • There is a high possibility that the fetus' blood was exposed to the mother's Rh-negative blood due to the vaginal bleeding. • To prevent the Rh-negative mother from forming antibodies that could attack this fetus (Rh type is unknown) or a future Rh-positive fetus, the Rh-negative mother is given RhoGAM.	6, 8
3a. Students' answers should include the following: • Since Emma is 25 years old, the nurse would determine if she had a previous Pap test. The American Cancer Society recommends that women have their first Pap test at age 21	1, 2, 7

Suggested Answers to Discussion Topics	Learning Objective(s)
regardless if they are sexually active or not. - If Emma's first Pap test was normal, then she would have a repeat Pap test. But if her first Pap screen showed ASCUS, then she would have an HPV test added to the Pap test. 3b. The key laboratory tests to evaluate for polycystic ovary syndrome are the following: - Hyperandrogenism: - Total testosterone - Free testosterone - Laboratory tests to rule out other conditions include: - DHEA-S - TSH - Serum cortisol - Prolactin - IGF-1 - Laboratory tests to monitor for associated conditions include: - Hyperlipidemia: Fasting lipids - Insulin resistance and type 2 diabetes mellitus: 2-hour oral glucose tolerance test and fasting glucose or hemoglobin A1C 3c. Students' answers should include the following: - The birth control pill helps regulate periods.	



Suggested Answers to Discussion Topics	Learning Objective(s)
• With regular menstrual cycles, acne, growth of hair on the chin, and heavy menstrual flow will improve. • A pelvic ultrasound could show whether there are any enlarged, or multiple, ovarian cysts.	

