MATCHING KEY TERMS

Match the term with the correct definition.

1. ______ abruption placentae
   a. Delayed or difficult birth of the shoulders after the head has emerged
2. ______ hydramnios
   b. Premature separation of a normally implanted placenta
3. ______ placenta accreta
   c. Excessive volume of amniotic fluid
4. ______ shoulder dystocia
   d. Placenta that is abnormally adherent to the uterine muscle
5. ______ tocolytic
   e. Medication to stop preterm or hypertonic labor contractions

KEY CONCEPTS

1. What are three characteristics of effective uterine activity?

2. Complete the following table to compare the characteristics of hypotonic and hypertonic labor dysfunction.

<table>
<thead>
<tr>
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<th>Hypotonic Dysfunction</th>
<th>Hypertonic Dysfunction</th>
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<tbody>
<tr>
<td>Contraction characteristics</td>
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<td>Uterine resting tone</td>
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<td>Phase of labor when it is most common</td>
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<td>Therapeutic management</td>
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On a separate paper, type the answers to the following questions:

3. What two measures may be used to stimulate labor that slows down after it is established?
4. What is the central principle of nursing actions when dysfunctional labor is a result of ineffective maternal pushing?
5. Why are upright maternal positions good for women who have ineffective second stage pushing?
6. List nursing measures to promote normal labor when maternal pushing is ineffective for each reason listed:
   a. fear of injury
   b. exhaustion
7. Why are upright maternal positions best to relieve persistent occiput posterior positions?
8. List four intrapartal problems that are more likely if a woman has a multi fetal pregnancy.
9. What are the expected rates for dilatation and fetal descent for the following:
   a. nulliparas
   b. parous women
10. List nursing measures for a woman having prolonged labor and for her fetus.
11. List nursing measures that may be used when a woman has precipitate labor:
   a. promoting fetal oxygenation
   b. Promoting maternal comfort
12. What factors may make a woman think her membranes have ruptured when they have not?
13. A client will be discharged with ruptured membranes at 32 weeks gestation. Write a summary of client teaching in simple terms that you might use.
14. List side effects that may occur with beta adrenergic drugs such as terbutaline. What drug should be available to reverse serious adverse effects of beta adrenergic drugs and what is its classification?
15. How do these drugs stop preterm labor? Give an example of each:
   a. prostaglandin synthesis inhibitors
   b. calcium antagonists
16. What are the primary nursing assessments related to each of these tocolytic drugs?
    Terbutaline magnesium sulfate indomethacin
    Nifedipine corticosteroids
17. What are the two variations of prolapsed cord?
18. What are the two objectives if umbilical cord prolapsed occurs or is suspected?
19. Describe three variations of uterine rupture
20. Why is it important that the nurse not push on the uncontracted uterine fundus after birth? What is the correct procedure?
21. Why may amniotic fluid embolism result in disseminated intravascular coagulation (DIC)?
22. If a pregnant woman suffers trauma, why should medical and nursing care focus on her stabilization before fetal stabilization?
23. A woman at 32 weeks gestation has had a car accident. Her vital signs are stable and the fetal heart rate is 150-160. What should the nurse suspect if the woman’s uterus seems to be enlarging? What is the correct action?