

**Advanced Health Assessment of Women 4th Edition Clinical Skills and Procedures
Testbank**

Chapter 1. Anatomy and Physiology of the Urinary and Reproductive Systems

MULTIPLE CHOICE

1. A postpartum client who had a vaginal birth asks the nurse, Will my cervix return to its previous shape before I had my baby? Which is the best response by the nurse?

- a. The cervix will now have a slitlike shape.
- b. The cervix will be round and smooth after healing occurs.
- c. The cervix will remain 50% effaced now that you have had a baby.
- d. The cervix will be slightly dilated to 2 cm for about 6 months.

ANS: A

After vaginal birth, the external os has an irregular slitlike shape and may have tags of scar tissue. The external os of a childless woman is round and smooth, but after a vaginal birth it will not be round and smooth. During labor, the cervix effaces (thins) and dilates (opens) to allow passage of the fetus. Once the baby is born, the cervix will close and return to close to 100% effacement.

PTS: 1 DIF: Cognitive Level: Application REF: 47

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Health Promotion and Maintenance

2. The school nurse is conducting health education classes for a group of adolescents. Which statement best describes a secondary sexual characteristic?

- a. Maturation of ova
- b. Production of sperm
- c. Female breast development
- d. Secretion of gonadotropin-releasing hormone

ANS: C

A secondary sexual characteristic is one not directly related to reproduction, such as development of the characteristic female body form. Maturation of ova is directly related to reproduction and is a primary sexual characteristic. Production of sperm is directly related to reproduction and is a primary sexual characteristic. Secretion of hormones is directly related to reproduction and is a primary sexual characteristic.

PTS: 1 DIF: Cognitive Level: Understanding REF: 43, 44

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Health Promotion and Maintenance

3. Which 16-year-old girl may experience secondary amenorrhea?

- a. Jackie, 5 ft 2 in, 130 lb
- b. Karen, 5 ft 9 in, 150 lb

-
- c. Carol, 5 ft 7 in, 96 lb
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- d. Linda, 5 ft 4 in, 120 lb

ANS: C

Because of her height and low body weight, Carol is at risk of developing secondary amenorrhea, which occurs in women who are thin and have a low percentage of body fat. Fat is necessary to make the sex hormones that stimulate ovulation and menstruation. Jackie, Karen, and Linda are of sufficient height and weight to promote sex hormone production.

PTS: 1 DIF: Cognitive Level: Application REF: 44

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Physiologic Integrity

4. Which describes the levator ani?

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- a. Division of the fallopian tube
-
- b. Collection of three pairs of muscles
-
- c. Imaginary line that divides the true pelvis and false pelvis
-
- d. Basin-shaped structure at the lower end of the spine

ANS: B

The levator ani is a collection of three pairs of muscles that support internal pelvic structures and resist increases in intraabdominal pressure. The fallopian tube divisions are the interstitial portion, isthmus, ampulla, and infundibulum. The linea terminalis is the imaginary line that divides the false from the true pelvis. The basin-shaped structure at the lower end of the spine is the bony pelvis.

PTS: 1 DIF: Cognitive Level: Remembering REF: 49

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Health Promotion and Maintenance

5. The nurse is describing the size and shape of the nonpregnant uterus to a client. Which is an accurate description?

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- a. The nonpregnant uterus is the size and shape of a pear.
-
- b. The nonpregnant uterus is the size and shape of a cantaloupe.
-
- c. The nonpregnant uterus is the size and shape of a grapefruit.
-
- d. The nonpregnant uterus is the size and shape of a large orange.

ANS: A

The nonpregnant uterus is about 7.5 x 5 x 2.5 cm, which is close to the size and shape of a pear. A cantaloupe would be too large and is the wrong shape for the uterus. A grapefruit is too large for the nonpregnant uterus; the uterus is larger at the upper end and tapers down. An orange may be the appropriate size, but it is not the appropriate shape.

PTS: 1 DIF: Cognitive Level: Application REF: 47

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Health Promotion and Maintenance

6. If a woman's menstrual cycle began on June 2, on which date should ovulation most likely have occurred?

-
- a. June 10

 - b. June 16

 - c. June 29

 - d. July 5

ANS: B

June 16 would be 18 days into the cycle; ovulation should have occurred at this point. June 10 would just be 8 days into the cycle and too early for ovulation. Ovulation occurs about 12 to 14 days after the beginning of the next menstrual period in a 28-day cycle; ovulation normally occurs about 14 days before the beginning of the next period. June 29 is at the end of the cycle. July 5 would be 27 days into the cycle and about time for the next period.

PTS: 1 DIF: Cognitive Level: Application REF: 45

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Health Promotion and Maintenance
7. A client states, My breasts are so small. I dont think I will be able to breastfeed. Which is the nurses best response?

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- a. It may be difficult but you should try anyway.

 - b. You can always supplement with formula.

 - c. All women have about the same amount of glandular tissue to secrete milk.

 - d. The ability to produce breast milk depends on increased levels of estrogen and progesterone.

ANS: C

All women have 15 to 20 lobes arranged around and behind the nipple and areola. These lobes, not the size of the breast, are responsible for milk production. The size of the breasts does not ensure success or failure in breastfeeding. Supplementation decreases the production of breast milk by decreasing stimulation. Stimulation of the breast, not the size of the breast, brings about milk production. Increased levels of estrogen decrease the production of milk by affecting prolactin.

PTS: 1 DIF: Cognitive Level: Application REF: 53

OBJ: Nursing Process Step: Implementation

MSC: Client Needs: Physiologic Integrity

8. The nurse is explaining the function of the males cremaster muscle to a group of nursing students. Which statement accurately describes the function of the cremaster muscle?

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- a. Assists with transporting sperm

 - b. Aids in temperature control of the testicles

 - c. Aids in voluntary control of excretion of urine

 - d. Entraps blood in the penis to produce an erection

ANS: B

A cremaster muscle is attached to each testicle. Its function is to bring the testicle closer to the body to warm it or allow it to fall away from the body to cool it, thus promoting normal sperm

production. Seminal fluid assists with transporting sperm. The urinary meatus aids in controlling the excretion of urine. Entrapment of the blood in the penis is caused by its spongy tissue.

PTS: 1 DIF: Cognitive Level: Understanding REF: 54

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Physiologic Integrity

9. A newly pregnant client asks the nurse, What is the false pelvis? Which is a correct statement that the nurse should give the client?

- a. It is the total anterior portion of the pelvis.
- b. It is considered to be the lower portion of the pelvis.
- c. It provides support for the internal organs and the upper part of the body.
- d. It is the narrowest part of the pelvis through which a fetus will pass during birth.

ANS: C

The linea terminalis, also called the *pelvic brim* or *ileopectineal line*, is an imaginary line that divides the upper, or false, pelvis from the lower, or true, pelvis. The false pelvis provides support for the internal organs and upper part of the body. The false pelvis is the upper portion, not the total anterior portion. The lower portion of the pelvis is the true pelvis, which is most important during childbirth because it has the narrowest portion through which the fetus will pass during childbirth.

PTS: 1 DIF: Cognitive Level: Understanding REF: 49

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Health Promotion and Maintenance

10. Which hormone is responsible for milk production after the birth of the placenta?

- a. Pitocin
- b. Prolactin
- c. Estrogen
- d. Progesterone

ANS: B

During pregnancy, high levels of estrogen and progesterone produced by the placenta stimulate growth of the alveoli and ductal system to prepare them for lactation. Prolactin secretion by the anterior pituitary gland stimulates milk production during pregnancy, but this effect is inhibited by estrogen and progesterone produced by the placenta. Inhibiting effects of estrogen and progesterone stop when the placenta is expelled after birth, and active milk production occurs in response to the infants suckling while breastfeeding. Pitocin is the hormone that causes the let-down reflex during breastfeeding.

PTS: 1 DIF: Cognitive Level: Understanding REF: 53

OBJ: Nursing Process Step: Assessment MSC: Client Needs: Health Promotion and Maintenance

11. Which hormonal effect is noted during the menstrual cycle?

- a. LH and FSH secretion rise during the ovulatory phase.
- b. A negative feedback mechanism is exhibited by the anterior pituitary gland and ovaries.
- c. The posterior pituitary gland secretes LH.