RASMUSSEN MATERNAL CHILD PRACTICE EXAM (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

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How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

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Questions

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1. Which method is listed as a way to help hospitalized children feel less lonely through communication technologies?

A. Social media

B. Face-to-face only

C. Printed letters

D. Radio broadcasts

2. What precaution should immunocompromised individuals take regarding social gatherings?

A. Avoid crowds to reduce infection risk

B. To save money

C. To increase exposure to pathogens

D. To improve fitness

3. Which symptom describes placenta previa?

A. Painless bright red vaginal bleeding, later in pregnancy

B. Severe abdominal pain with contractions

C. Fetal distress

D. No bleeding

4. Which of the following is a strategy to promote successful breastfeeding initiation?

A. Skin-to-skin contact immediately after birth.

B. Delaying the first feeding for 24 hours.

C. Providing only formula at birth.

D. Limiting latch assistance.

5. In APGAR scoring, which appearance score corresponds to pink body with blue extremities?

A. 0

B. 1

C. 2

D. None of the above

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6. Droplet precautions require which PPE?

A. Gloves, gown, mask

B. Gloves only

C. Mask only

D. Gown only

7. What is the single most important task of a nurse during any abuse case?

A. Ensure safety and report

B. Document injury

C. Provide therapy

D. Notify family

8. Which of the following is a sign of placental abruption?

A. Fresh vaginal bleeding

B. Hypotension

C. Sharp abdominal pain with contractions that do not relax

D. Decreased FHR

9. What is a common treatment for croup?

A. Antibiotics alone

B. Hydration and rest

C. Humidified air with bronchodilators only

D. Cool moist air with a corticosteroid such as dexamethasone, or racemic epinephrine with nebulizer; maintain airway and hydration

10. Which is a key safety measure for chest tube management?

A. Keep the drainage system closed

B. Clamp the chest tube intermittently

C. Place the collection chamber above chest level

D. Remove the chest tube if there is drainage

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Answers

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1. A
2. A
3. A
4. A
5. C
6. A
7. A
8. C
9. D
10. A

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Explanations

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1. Which method is listed as a way to help hospitalized children feel less lonely through communication technologies?

A. Social media

B. Face-to-face only

C. Printed letters

D. Radio broadcasts

Social media is listed because it uses communication technologies to keep hospitalized children connected with friends, family, and peers, which helps reduce feelings of loneliness. It enables real-time and asynchronous interactions through messaging, video chats, and shared updates, so kids can participate in social life even when they can't be physically present with others. The other options don't fit as well. Face-to-face interaction requires being together in person, which isn't a technology-based way to connect when a child is hospitalized. Printed letters are a traditional form of communication that isn't interactive or timely, limiting emotional support. Radio broadcasts are one-way and lack direct engagement with the child, making them less effective for reducing loneliness through personal connection.

2. What precaution should immunocompromised individuals take regarding social gatherings?

A. Avoid crowds to reduce infection risk

B. To save money

C. To increase exposure to pathogens

D. To improve fitness

Reducing infection risk by limiting exposure in social settings. When the immune system is weakened, even common illnesses can become serious, so crowded gatherings increase the chance of catching infections and developing complications. Avoiding crowds lowers contact with many potential sources of pathogens and the likelihood of transmission, making it the most effective precaution in this context. The other options don't address infection risk: saving money isn't related to health protection, increasing exposure would raise risk, and improving fitness doesn't mitigate the specific danger posed by germs in crowded environments. In addition to avoiding crowds, maintaining good hand hygiene and staying current with vaccines can provide additional protection.

3. Which symptom describes placenta previa?

A. Painless bright red vaginal bleeding, later in pregnancy

B. Severe abdominal pain with contractions

C. Fetal distress

D. No bleeding

Placenta previa shows up as painless vaginal bleeding that occurs late in pregnancy. This happens because the placenta is located low in the uterus, near or over the cervical opening, so when the cervix dilates or the lower uterine segment changes, blood vessels can bleed without causing contractions or severe abdominal pain. The bleeding is typically bright red and can occur without warning, while the uterus remains soft and non-tender. This description distinguishes placenta previa from other complications. For example, severe abdominal pain with contractions points to placenta abruption, where the placenta detaches and causes painful contractions. Fetal distress can occur with significant bleeding or other placental problems but isn't the defining symptom of placenta previa. No bleeding would not fit the scenario. So the hallmark description—painless bright red vaginal bleeding late in pregnancy—best fits placenta previa.

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4. Which of the following is a strategy to promote successful breastfeeding initiation?

A. Skin-to-skin contact immediately after birth.

B. Delaying the first feeding for 24 hours.

C. Providing only formula at birth.

D. Limiting latch assistance.

Early skin-to-skin contact immediately after birth supports successful breastfeeding initiation by triggering the newborn's natural feeding cues and enabling a smoother latch. When the baby is placed on the mother's chest, warmth, scent, and close contact stimulate rooting and sucking reflexes, encouraging the first effective latch. This closeness also prompts the mother's body to release oxytocin, boosting milk let-down and helping the mother begin breastfeeding sooner. The combination of an early latch, improved comfort for the baby, and hormonal readiness makes breastfeeding more likely to get off to a good start and continue. Delaying the first feeding for 24 hours delays the natural stimulation of milk production and can hinder establishment. Providing formula at birth removes the opportunity for the infant to initiate breastfeeding and can undermine the drive to breastfeed. Limiting latch assistance reduces support needed to achieve an effective latch, which can complicate early breastfeeding success. Skin-to-skin contact right after birth is the best approach to promote successful initiation.

5. In APGAR scoring, which appearance score corresponds to pink body with blue extremities?

A. 0

B. 1

C. 2

D. None of the above

In APGAR scoring, appearance (skin color) is assessed to gauge how well the newborn is perfused. The scoring for color is: completely blue or pale = zero; body pink with blue extremities = one; completely pink = two. Therefore pink body with blue extremities corresponds to a score of one. A completely pink baby would be two, and a completely blue/pale baby would be zero. So the description given fits the appearance score of one, not two.

6. Droplet precautions require which PPE?

A. Gloves, gown, mask

B. Gloves only

C. Mask only

D. Gown only

Droplet precautions protect against large respiratory droplets that travel short distances from the patient, potentially contaminating the face, mucous membranes, and surrounding surfaces. To reduce exposure, you need protection for the hands, skin/clothes, and the face. Gloves prevent contact with secretions, a gown shields clothing and skin, and a mask blocks inhalation or splash of droplets onto the nose and mouth. All three together provide appropriate protection in encounters with droplets. Wearing only one item leaves other exposure routes open—for example, a mask alone protects the face but not hands or clothing, while gloves or a gown alone don't protect the face. Eye protection may be added if splashes are possible, but the essential combination here is gloves, gown, and mask.

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7. What is the single most important task of a nurse during any abuse case?

A. Ensure safety and report

B. Document injury

C. Provide therapy

D. Notify family

The most important task in any abuse case is to ensure the patient's safety and initiate reporting. The immediate priority is to protect the person from further harm—this may involve removing them from an unsafe environment, staying with them to provide emotional support, and coordinating with other team members to create a safe plan. Once safety is addressed, reporting to the appropriate authorities is essential. Nurses are often mandated reporters, and promptly informing child protective services, adult protective services, or law enforcement triggers a protective response that can stop the abuse and connect the patient with needed resources. Documentation matters, but it serves after safety and reporting. It should record objective findings and the patient's statements without delaying the protective action. Providing therapy is important for long-term care, but it isn't the immediate task in an abuse crisis. Notifying family isn't always appropriate and can jeopardize safety, autonomy, or confidentiality, depending on the situation. Focusing first on safety and reporting ensures the patient is protected and connected with the supports they need.

8. Which of the following is a sign of placental abruption?

A. Fresh vaginal bleeding

B. Hypotension

C. Sharp abdominal pain with contractions that do not relax

D. Decreased FHR

Placental abruption occurs when the placenta starts to separate from the uterine wall before delivery, causing uterine irritation and bleeding. The most telling sign is sudden, sharp abdominal pain with a uterus that feels firm or tender and contractions that continue without relief. This persistent, painful tightening reflects ongoing placental separation and maternal uterine irritability, making it the best indicator of abruption. Vaginal bleeding can occur with abruption, but it isn't always present and isn't as specific. Low blood pressure indicates blood loss and can happen with heavy bleeding, but it isn't unique to abruption. A decreased fetal heart rate can occur due to fetal distress from the placental separation, but it's not the defining maternal sign and may appear later.

9. What is a common treatment for croup?

A. Antibiotics alone

B. Hydration and rest

C. Humidified air with bronchodilators only

D. Cool moist air with a corticosteroid such as dexamethasone, or racemic epinephrine with nebulizer; maintain airway and hydration

Croup needs a treatment approach that quickly reduces airway swelling and supports breathing. The most effective strategy is to use medications that lessen subglottic edema and provide rapid relief when needed. A corticosteroid such as dexamethasone is given to decrease airway inflammation, often with a single dose, and it works within hours to lessen stridor and agitation and can reduce the need for hospital care. For children with more significant symptoms, adding nebulized racemic epinephrine can rapidly open the airway by reducing swelling, but this effect is temporary, so the child must be observed afterward for possible rebound tightening. Along with these measures, keeping the child well hydrated and ensuring the airway is clear are essential supports. Antibiotics aren't routinely used because croup is usually viral, and simply providing hydration and rest or relying on humidified air without anti-inflammatory treatment does not address the underlying airway swelling.

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10. Which is a key safety measure for chest tube management?

A. Keep the drainage system closed

B. Clamp the chest tube intermittently

C. Place the collection chamber above chest level

D. Remove the chest tube if there is drainage

Maintaining a closed drainage system is essential for chest tube safety because it keeps the pleural space sealed from the external environment, preserves the necessary negative pressure for lung re-expansion, and reduces the risk of infection and air entry. When the system stays closed, drainage occurs in a controlled way and coughing or movement doesn't introduce air or contaminants into the chest. Intermittently clamping the chest tube is not advised because it can trap air in the pleural space and, when unclamped, may cause a sudden rebound of air leading to a pneumothorax. Placing the collection chamber above chest level disrupts gravity-driven drainage and can allow backflow or inadequate drainage. Removing the chest tube while there is ongoing drainage is unsafe and can precipitate reaccumulation of air or fluid; removal is only appropriate when a clinician confirms that drainage has ceased and the lung has re-expanded. Keeping the system closed is the best safeguard for effective, safe chest tube management.

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Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

https://rasmussenmaternalchild.examzify.com

We wish you the very best on your exam journey. You've got this!

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