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NCC Credential in Inpatient Antepartum Nursing



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Question: 1

A 30-week patient with PPROM has no fever, but the fetal tracing now shows persistent tachycardia and the patient reports feeling “flu-like.” Which complication should the nurse most strongly suspect?

- A. Developing intra-amniotic infection
- B. Benign fetal sleep cycle
- C. Uncomplicated placenta previa

Answer: A

Question: 2

A 31-week patient undergoes an NST that remains nonreactive after the initial monitoring period. Which nursing understanding is most appropriate?

- A. A nonreactive NST always proves fetal death
- B. A nonreactive NST may require extended observation or additional testing rather than immediate assumption of irreversible injury
- C. A nonreactive NST is more reassuring than a reactive NST

Answer: B

Question: 3

A 32-week patient with severe preeclampsia reports a severe headache and now seems increasingly difficult to arouse. Which obstetric emergency is most concerning?

- A. Impending or evolving eclampsia
- B. Hyperemesis gravidarum
- C. Placenta accreta spectrum

Answer: A

Question: 4

A 34-week patient with preeclampsia says her rings suddenly feel tight, she has a worsening headache, and she now feels short of breath when walking a few steps. Which nursing interpretation is most appropriate?

- A. These are expected discomforts of the third trimester and can wait until the next routine check
- B. The symptoms are most consistent with placenta previa
- C. The patient may be developing worsening maternal complications and needs prompt reassessment

Answer: C

Question: 5

A hospitalized antepartum patient with a prior pulmonary embolus reports sudden chest pain and new shortness of breath while walking to the bathroom. Which complication should the nurse most strongly suspect?

- A. Recurrent pulmonary embolus
- B. Hyperemesis gravidarum
- C. Placenta previa

Answer: A

Question: 6

A patient on antihypertensive medication for severe blood pressure elevations asks why close blood pressure reassessment is required after administration. Which explanation is most accurate?

- A. Reassessment is unnecessary once the drug is given
- B. Medication response must be monitored to judge effectiveness and detect excessive lowering
- C. Antihypertensives in pregnancy affect only maternal comfort, not hemodynamics

Answer: B

Question: 7

A patient with chronic gastrointestinal disease says fear of symptom flares has led her to skip meals regularly. Which nursing interpretation is most appropriate?

- A. Reduced intake can worsen nutrition and antepartum stability even when the goal is symptom avoidance
- B. Meal skipping is the preferred strategy for chronic GI disease in pregnancy
- C. Nutrition concerns matter only if fetal distress is already documented

Answer: A

Question: 8

A patient with gestational diabetes asks why fetal status may still require surveillance even when her symptoms are minimal. Which explanation is most accurate?

- A. Minimal maternal symptoms guarantee absence of fetal complications
- B. Fetal surveillance is unnecessary unless the mother feels unwell
- C. Maternal symptoms do not always parallel fetal condition or placental effects

Answer: C

Question: 9

A patient with PPROM at 30 weeks develops maternal tachycardia, uterine tenderness, and malaise, but only a borderline temperature elevation. Which nursing interpretation is most appropriate?

- A. Infection should still be strongly considered even without a high fever
- B. Infection can be excluded unless temperature is markedly elevated
- C. Borderline temperature change after PPROM is always benign

Answer: A

Question: 10

A patient with gestational diabetes has consistently elevated fasting and postprandial glucose values despite adherence to diet and activity recommendations. Which nursing interpretation is most appropriate?

- A. Persistent elevation is expected in pregnancy and does not affect outcomes
- B. The current management plan may no longer be sufficient and should be reassessed
- C. Elevated glucose values are meaningful only if the patient feels symptomatic

Answer: B

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