

NCC C-EFM

Electronic Fetal Monitoring

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Latest Version: 6.0

Question: 1

Increases mom and baby's heart rate and cardiac output

- A. Side effect of terb
- B. Ph 7.24, pco2 54, be -10
- C. Hematocrit should be __x hgb
- D. Memorize fetal circulation and draw a diagram

Answer: A

Question: 2

When mom has a fever oxygen releases more freely thus baby doesn't get as much

- A. What are the benefits of palpating?
- B. Why would the EFM/US double or halve the FHR?
- C. When mom has a fever why does this cause not as much oxygen for baby?
- D. Stimulation of the sympathetic branch releases _____ which cause ____\

Answer: C

Question: 3

Waste products are carbon dioxide and water and take seconds to clear

- A. How can you tell the difference between artifact and an arrhythmia?
- B. In aerobic metabolism waste products are what and take how long to clear baby's system
- C. When mom has a fever why does this cause not as much oxygen for baby?
- D. Most cases of metabolic acidemia do not result in injury, but risk increases when pH and BD are what

Answer: B

Question: 4

6.1 minutes

- A. In the 1st stage of labor you can do intermittent monitoring on a low risk patient how often?
- B. D/c oxytocin, iv fluid bolus and repositioning takes how long to resolve tachysystole
- C. CTX of at least 30mmHg causes ____ blood flow
- D. Baroreceptors elicits a _____ in FHR, cardiac output and fetal blood pressure

Answer: B

Question: 5

Mixed acidemia

- A. ph 6.83, pco2 75, Be -9
- B. ph 6.95, pco2 58, Be -19
- C. pH 7.19, pCO2 68, BE -14
- D. ph 7.04, pco2 54, Be -17

Answer: C

Question: 6

—

- A. In the fetus CO is essentially ____ dependent
- B. Ph 6.83, pco2 75, be -9
- C. Side effect of terb
- D. Memorize fetal circulation and draw a diagram

Answer: D

Question: 7

When pH is less than 7 and BD greater than 12

- A. What is the primary function and secondary of parasympathetic branch for FHR?
- B. Test question — what does respiratory, metabolic and mixed have in common?
- C. In the 2nd stage (pushing) how often can you intermittently monitor for low and high right patients
- D. Most cases of metabolic acidemia do not result in injury, but risk increases when pH and BD are what

Answer: D

Question: 8

Oxygen

- A. Fetal hgb has a higher affinity for
- B. Intrinsic factor of variable?
- C. Extrinsic factor of variable?
- D. Moms Hgb affinity is less than or greater than baby's?

Answer: A

Question: 9

SA and AV nodes

- A. Having a baby with a two vessel cord increases the risk of what?
- B. Chemoreceptors elicit a ___ in FHR - typical delayed in timing
- C. The parasympathetic branch innervates where in the heart
- D. What do you NOT document for auscultation documentation?

Answer: C

Question: 10

Respiratory acidemia

- A. pH 6.83, pCO₂ 75, BE -9
- B. pH 7.24, pCO₂ 54, BE -10
- C. pH 7.04, pCO₂ 54, BE -17
- D. pH 6.95, pCO₂ 58, BE -19

Answer: A

Question: 11

Variable

- A. A ——— decel would be a response to baroreceptors detecting change in pressure of cord being smooched
- B. D/c oxytocin to resolve tachystyle takes how long?

- C. In the fetus CO is essentially _____ dependent
D. _____ - _____ mL of blood perfuse the uterus each minute

Answer: A

Question: 12

pH is less than 7.2
pCO₂ is elevated >60
BE/BD is less than 12

- A. The umbilical artery carries what from where?
B. Category 2 auscultation includes ANY of the following
C. Contraindications for FSE/IFM?
D. Respiratory acidemia is diagnosed when

Answer: D

Question: 13

How baby did

- A. An arterial cord gas shows us?
B. Extrinsic factor of variable?
C. Late decel - chemo or baro?
D. Uterine blood flow is dependent on maternal?

Answer: A

Question: 14

Low risk q15 min
High risk q5 min

- A. In the 2nd stage (pushing) how often can you intermittently monitor for low and high risk patients
B. When mom has a fever why does this cause not as much oxygen for baby?
C. Where are sympathetic influence in fetal heart?
D. Do you ever document that you hear fetal movement? Why?

Answer: A

Question: 15

$CO = HR \times SV$

- A. Respiratory acidemia reflects a transient disruption in
- B. What is the normal range of MVU's?
- C. Chemoreceptors elicit a ___ in FHR - typical delayed in timing
- D. In an adult how do you calculate cardiac output?

Answer: D

Question: 16

Blood exchange

- A. Mom's Hgb affinity is less than or greater than baby's?
- B. Chemoreceptors elicit a ___ in FHR - typical delayed in timing
- C. In an adult how do you calculate cardiac output?
- D. Respiratory acidemia reflects a transient disruption in

Answer: D

Question: 17

Standard terminology to prevent perinatal sentinel events

- A. FSE/IFM benefits?
- B. In 2004 JCAHO Sentinel Event Alert #30 recommends
- C. Why would the EFM/US double or halve the FHR?
- D. The parasympathetic branch originates where?

Answer: B

Question: 18

Severe metabolic acidemia cause pH <7

- A. pH 6.95, pCO₂ 58, BE -19
- B. pH 7.19, pCO₂ 68, BE -14
- C. pH 7.04, pCO₂ 54, BE -17

D. pH 6.83, pCO₂ 75, BE -9

Answer: A

Question: 19

Normal

- A. pH 7.24, pCO₂ 54, BE -10
- B. pH 6.95, pCO₂ 58, BE -19
- C. pH 7.19, pCO₂ 68, BE -14
- D. pH 6.83, pCO₂ 75, BE -9

Answer: A

Question: 20

Metabolic acidemia

- A. pH 7.19, pCO₂ 68, BE -14
- B. pH 6.83, pCO₂ 75, BE -9
- C. pH 6.95, pCO₂ 58, BE -19
- D. pH 7.04, pCO₂ 54, BE -17

Answer: D

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