

POST TEST

ICEA POSITION PAPER: THE ROLE AND SCOPE OF THE DOULA

1. *The long-term impact for a woman with the presence of a doula during labor may include:*
 - a. enhanced self-confidence
 - b. enhanced self-esteem
 - c. decreased postpartum depression
 - d. a and b
 - e. all of the above

2. *The term "doula" is Greek for:*
 - a. woman's helper
 - b. woman's servant
 - c. woman's companion
 - d. birth helper

3. *Direct impacts in the postpartum period include:*
 - a. increased acceptance of the baby
 - b. enhanced maternal/infant bonding
 - c. decreased neonatal problems
 - d. all of the above
 - e. a and b

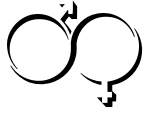
4. *Any doula may perform the following as part of her basic skills:*
 - a. massage, aromatherapy, encouragement
 - b. massage, positioning, reassurance
 - c. acupressure, touch, encouragement
 - d. none of the above
 - e. all of the above

5. *ICEA certified doulas are trained professionals who recognize that birth is:*
 - a. unique for each woman
 - b. a key life experience
 - c. a lot of hard work
 - d. a universal experience

6. *Requests for an epidural are reduced by ____% when a doula is present.*
 - a. 60%
 - b. 62%
 - c. 75%
 - d. 49%

7. *With a doula, a woman may experience decreased likelihood of:*
- a. negative ratings of the childbirth experience
 - b. feeling tense during labor
 - c. personal control during labor
 - d. a and b
 - e. b and c
8. *By 1972, at the National Maternity Hospital in Dublin, normal labor for the first-time mother was no longer than _____ hours.*
- a. 8 hours
 - b. 12 hours
 - c. 13 hours
 - d. 10 hours
9. *In one study, fathers were present _____% of the time that their partners were uncomfortable in early labor:*
- a. 56%
 - b. 90%
 - c. 78%
 - d. 85%
10. *Women are now wanting to have women at their births who:*
- a. have had a child themselves
 - b. will comfort and support them
 - c. have doula training
 - d. are relatives or good friends

Name _____



POST TEST
ICEA POSITION STATEMENT AND REVIEW:
LABOR SUPPORT AND THE LABOR SUPPORT PERSON

1. *Intrapartum benefits of labor support include all of the following EXCEPT*
 - a. fewer operative vaginal deliveries
 - b. fewer breech presentations
 - c. fewer cesarean births
 - d. reduced use of pain medication
 - e. reduced need for oxytocin augmentation

2. *Postpartum benefits of labor support include*
 - a. fewer reported infant health problems at six weeks
 - b. increased breastfeeding rate at six weeks
 - c. fewer Apgar scores <7
 - d. all of the above
 - e. a and b

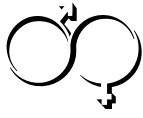
3. *In determining women's satisfaction with their birth experiences*
 - a. the presence of the support person was one of the most important determiners
 - b. the support person was the most important only if the woman was a primipara
 - c. the support person was most important only if that person was a doula
 - d. the presence of the support person was less important than the length of the labor
 - e. the presence of the support person was less important than the amount of pain

4. *The strongest factor for dissatisfaction with labor is*
 - a. having a cesarean
 - b. having a midwife
 - c. having no say in what happens
 - d. having the partner act as the coach
 - e. having to go without an epidural

5. *The only component of active management of labor associated with a shorter labor and a lower cesarean rate is*
 - a. rupture of membranes
 - b. oxytocin augmentation
 - c. admission to labor unit only if in active labor
 - d. epidural anesthesia
 - e. one-to-one support

6. *Which is NOT one of Hodnett's components of labor support?*
- a. emotional support
 - b. physical support
 - c. pain medication
 - d. information
 - e. advocacy
7. *Which of the following influences the effectiveness of labor support?*
- a. when the support begins
 - b. whether the support is continuous
 - c. pervasive obstetrical management procedures
 - d. all of the above
 - e. a and b
8. *Based on randomized controlled trials, which of the following provides the most effective labor support?*
- a. nurse
 - b. doula
 - c. partner
 - d. midwife
 - e. female relative
9. *The personality of the support person makes a difference in the effectiveness of the support when*
- a. the person is a nurse
 - b. the person is a doula
 - c. the person is not known to the laboring woman
 - d. the person has met the woman prior to her going into labor
 - e. a and b
10. *If a woman is supported by her partner and a doula*
- a. the partner provides less support
 - b. the partner has to compete with the doula
 - c. the partner provides more attentive support
 - d. the doula provides less effective support
 - e. the woman feels overwhelmed

Name _____



POST TEST
ICEA POSITION STATEMENT AND REVIEW:
INFORMED CONSENT IN PREGNANCY AND CHILDBIRTH

1. *The goal of informed consent in medical practice is:*

- A) to protect the care provider from litigation
- B) to enhance and encourage a responsible patient-physician partnership in treatment decisions
- C) to provide a balance of power
- D) all of the above

2. *The primary values underlying informed consent include:*

- A) shared responsibility for care
- B) the promotion of a patient's well-being
- C) respect for a patient's self-determination, or autonomy
- D) answers b and c

3. *Childbirth education classes for pregnant women should include discussions of:*

- A) the health practitioner's personally held moral beliefs
- B) the woman's rights and responsibilities for making informed choices based on knowledge of alternatives
- C) experimental medical procedures
- D) strategies to improve and legalize rights of childbearing women

4. *The primary and most critical means for health practitioners to provide information for informed consent is:*

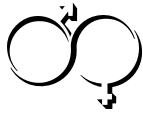
- A) printed pamphlets and handouts
- B) videotapes
- C) face-to-face discussion
- D) internet sites

5. *As an active participant in the informed consent process, the childbearing woman has a responsibility to:*

- A) provide accurate and complete information to her health practitioner
- B) insist the practitioner follow her birth plan
- C) ask questions regarding care or services that are unclear
- D) a and c

6. *Under United States law, disclosing information under the doctrine of informed consent may not apply in special circumstances such as:*
- A) if the patient's family doesn't want her to have information regarding her care
 - B) if the practitioner is concerned that consent for a treatment or procedure may not be given
 - C) an emergency situation requiring urgent medical intervention
 - D) none of the above
7. *The benefits of informed consent include:*
- A) it helps to strengthen the patient-practitioner partnership and thereby reduces the likelihood of recourse to legal action in the event of damaging outcome
 - B) the health practitioner can demonstrate his/her level of knowledge and skill to the patient
 - C) there is a legal form that shows the patient knew and understood the procedure or treatment undertaken
 - D) it promotes patient respect for the health practitioner
8. *An argument against, and limitations of, the usefulness and value of informed consent is:*
- A) it does not promote the attainment of personal health and well-being
 - B) the process has become more an elaborate ritual than a genuine dialogue between participants
 - C) the patients do not need, nor want, the extensive information required
 - D) that informed consent increases patient anxiety and fear
9. *In order to provide fully informed consent, the practitioner must explain to the patient:*
- A) the nature and purpose of the treatment or procedure recommended
 - B) the potential consequences associated with the treatment recommended
 - C) the relative probability of success for the treatment or procedure
 - D) all of the above
10. *Informed consent can be revoked:*
- A) only before the signing of any consent form
 - B) twenty-four hours before the start of the procedure or treatment
 - C) orally, at any time
 - D) in writing only

Name _____



POST TEST
ICEA POSITION PAPER: INFANT FEEDING

1. *Research indicates that breast milk jaundice, which may persist for many weeks, is*
 - A) dangerous to the infant
 - B) an indication of improper digestion of breast milk
 - C) almost always a benign condition
 - D) an early indication of lactose intolerance

2. *Research indicates that infants with diarrhea recover faster if*
 - A) they are fed electrolyte solutions alone
 - B) breast milk is provided
 - C) sterile water is all they receive
 - D) breast milk is supplemented with electrolyte solutions

3. *Research indicates that breastfeeding outcomes are better when infants*
 - A) have unrestricted access to the breast in the postpartum period
 - B) are occasionally supplemented so mothers can obtain needed rest
 - C) are born at full term
 - D) are fed on a two to three hour schedule

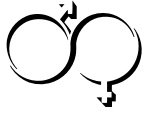
4. *Research indicates that human milk*
 - A) is easily duplicated by modern technological processes
 - B) is a natural resource of unequalled value
 - C) from poorly nourished mothers has significantly less nutrients than that from properly nourished mothers
 - D) is occasionally of too poor a quality to sustain adequate weight gain and wellness in an infant

5. *Research indicates that the gastric emptying time of breast milk*
 - A) is slightly less than that of other foods
 - B) is decidedly longer than that of other foods
 - C) is essentially the same as that of other foods
 - D) is significantly less than that of other foods

6. *Under normal circumstances, breastfed infants requiring surgery*
 - A) may be breastfed until eight hours before surgery
 - B) may be breastfed until two hours before surgery
 - C) should be given supplemental foods for the 24 hours preceding surgery
 - D) should be given clear fluids only until ten hours after surgery

7. *Research indicates that pain during breastfeeding*
- A) is common during the early postpartum period
 - B) will diminish as the areola toughens
 - C) is preventable in most circumstances
 - D) indicates lack of preparation during the prenatal period
8. *Research indicates that the normal duration of human lactation is*
- A) up to eighteen months
 - B) highly variable but usually about twelve months
 - C) up to four years
 - D) two or more years
9. *The decision to breastfeed is significantly linked with*
- 1. *the size of the mother's breasts*
 - 2. *knowledge about infant feeding*
 - 3. *age of the mother*
 - 4. *knowledge of the basic skills of breastfeeding*
 - 5. *information about the hazards of artificial feeding*
- A) 1 & 2
 - B) 1, 3 & 4
 - C) 2 & 5
 - D) 4 & 5
10. *Breastfeeding decreases mother's risks of*
- A) lung cancer
 - B) breast and ovarian cancer
 - C) viral illnesses
 - D) obesity

Name _____



POST TEST

ICEA POSITION STATEMENT AND REVIEW: THE BIRTH PLACE

1. *The following are reasons for ICEA's support of alternative birth settings:*
 - a. Each childbearing woman should be recognized as a unique individual.
 - b. Scientific evidence has not proven that the acute care setting is the safest setting for low-risk, normal childbirth.
 - c. The choice of birth place involves the assumption of responsibility by each woman for informed evaluation of the birth setting.
 - d. All of the above

2. *The Single-Room Maternity Care (SRMC) concept includes:*
 - a. A labor-delivery-recovery-postpartum (LDRP) environment of care
 - b. Family-centered maternity care for low-risk patients only
 - c. Multiple sets of staff to care for the mother and baby
 - d. A focus on intrapartum care

3. *Within the labor-delivery-recovery (LDR) setting, the laboring woman:*
 - a. Is transferred from labor, to delivery, to recovery, and to postpartum, with baby taken to separate nursery.
 - b. Stays in one room, with baby rooming-in from admission until discharge.
 - c. Stays in one room for labor, delivery and recovery, and is then moved to postpartum, with rooming-in available for baby.
 - d. Is transferred from labor to delivery and recovery, staying in that room until discharge, with option of rooming-in with baby.

4. *A freestanding birth center is one that:*
 - a. Is connected to an acute care hospital and remains under hospital policies and regulations.
 - b. Is set apart from the acute care hospital setting and is able to formulate its own policies and programs of care.
 - c. Provides care based on the needs of the health care team.
 - d. Provides a hospital-like environment.

5. *Women choosing birth center care are:*
 - a. Women who look to their physician for direction in their care.
 - b. Women who feel as though they have no control over their own lives.
 - c. Women looking for less costly care.
 - d. Women who wish to be actively involved in the birth process.

6. *In the National Birth Center Study, _____ percent of women who were transferred to the hospital for birth stated that they would return to a birth center during a subsequent pregnancy.*
 - a. 35%
 - b. 52%
 - c. 83%
 - d. 97%

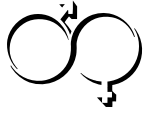
7. *Home birth is recognized as the place for the practice of:*
 - a. Obstetrics
 - b. Midwifery
 - c. High-risk maternity care
 - d. Both a and c

8. *The highest risk for mortality related to home birth appears in which group:*
 - a. Unprepared women experiencing an unplanned home birth
 - b. Women transferred to the hospital during labor
 - c. Well-prepared women with a planned home birth
 - d. Any out-of-hospital birth

9. *Selection of home birth candidates would include an evaluation of the following:*
 - a. The woman's health status before and during pregnancy
 - b. The preparation of the family and home environment for birth
 - c. The proximity of the birth environment to the acute care setting
 - d. All of the above

10. *Reasons women have given for choosing home birth include:*
 - a. To be in a more relaxed, familiar setting for birth
 - b. To let the midwife be in control
 - c. To avoid doctors and the hospital
 - d. Because they didn't want medications anyway

Name _____



POST TEST
ICEA POSITION STATEMENT AND REVIEW:
CESAREAN BIRTH AND VBAC

1. *The optimal rate of cesarean section*
 - a. is 10% for low-risk women and 15% for high-risk women
 - b. should not exceed 15%
 - c. is 15.5% for nulliparous women at term with singleton fetuses and vertex presentations
 - d. has yet to be determined

2. *The increase in the cesarean birth rate is related to*
 - a. advancing maternal age
 - b. increased use of electronic fetal monitoring, labor stimulation, and epidural anesthesia
 - c. fear of malpractice litigation
 - d. a combination of many factors

3. *The most frequently reported indication for cesarean section is*
 - a. dystocia
 - b. placenta praevia
 - c. prior cesarean section
 - d. fetal distress
 - e. breech presentation

4. *The most common problem associated with cesarean section is*
 - a. hemorrhage
 - b. aspiration of acidic stomach contents
 - c. post-operative infection
 - d. wound dehiscence
 - e. embolism

5. *The overall cesarean birth rate can be reduced safely and effectively*
 - a. when the indications for primary cesarean section are addressed
 - b. through education and support of all women who are candidates for VBAC
 - c. by protecting the normal process of birth
 - d. all of the above

6. *A cesarean section can potentially be prevented by focusing on all of the following except*
- a. frequent movement and position changes during labor
 - b. working with a doula or birth companion
 - c. using directed pushing to minimize the length of second stage
 - d. using nonpharmacological pain management techniques
 - e. providing one-to-one nursing care
7. *Vaginal birth after a previous cesarean is associated with*
- a. a small but significant risk of uterine rupture
 - b. a uterine rupture rate of approximately 0.2-1.5% in women with a previous low transverse incision
 - c. reduced morbidity than repeat cesarean section
 - d. a 60-80% success rate
 - e. all of the above
8. *Vaginal birth after a previous cesarean is contraindicated*
- a. when there was a previous diagnosis of labor dystocia or cephalopelvic disproportion
 - b. for women with a previous vertical incision within the lower segment of the uterus
 - c. for women with a previous incision extending into the fundus
 - d. for women who have one or more previous low transverse incision(s)
 - e. all of the above
9. *The care of a woman in labor after a previous cesarean*
- a. requires careful monitoring of the mother and fetus
 - b. should only take place in large tertiary settings that can provide immediate emergency management
 - c. should include a special consent form for vaginal birth after cesarean.
 - d. all of the above
10. *In discussing cesarean birth in childbirth classes the childbirth educator's overall goal is to*
- a. help expectants find ways of avoiding unnecessary cesareans
 - b. help reduce the cesarean birth rate
 - c. prepare parents for cesarean birth in case they have one
 - d. provide parents with the skills and knowledge they need in order to become active participants in making informed decisions for themselves and their babies

Name _____