UNIT 6: CHILDBIRTH

Chapter 7 Decisions Facing A Parent-to Be 1. There are many parents mu		nen having a	child.
A) Health care provider for prenatal care,		, and for bab	by.
B) Birthplace C)Support people for	and	d for after bir	th.
D)Name(s) E)Breast-feeding or	feeding		
F) Housing arrangements,, a		G)	and leave options
Explaining Pregnancy to Siblings pg 179			
2. Explain changes in the or how a b	aby is born if a	sked.	
3. Familiarize an older child with	17 in		2. Air
4. Assure child about what will b		(1)	
5. Explain and make any changes in	arrangeme	nts or routine	es.
6. Engage older child as a special			
7. Make sure older children receive at least one	e		
8. Let child "introduce" baby to an	d friends.	. 10	
Employment Considerations pg 180			
9. Pregnancy leave is used if a mother-to-be of	annot	_during preg	nancy due to health
LIFE			reasons.
10. Pregnancy Discrimination Act (PDA) protect	ts rights of wor	king	women.
11. Maternity/paternity leave is time away from	work	_the birth or	adoption of a child.
12. Family and Medical Leave Act (FMLA) is us	sed to take	leave	for family-related
		178	reasons.
13. Choosing a birthplace: A) hospitals B) bir			
	childbirth B)Laı	maze metho	d C)delivery with
15. Hospitals deliveries are the most16. In a hospital, mothers labor in a	 room and a	are taken to	a delivery room shortly
		befor	e the baby's birth.
17.Mothers who requiredelivery o 19. The delivery or surgical room in a hospital i			ıl room. -risk deliveries.
19. After the birth, mothers spend time in a	Z 4007 /100%	A 0 A 0 A 0 A 0 A 0 A 0 A 0 A 0 A 0 A 0	. / #// 25 /
			room.
20. At the hospital, newborns stay in the hospi NOTES:	tal		

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	VIII O. CHILDUR I H
Deli	very Considerations pg 181
21. N	Many hospitals offer parents the option of a homelike room orroom in the hospital
	for low-risk deliveries.
	The birthing room is furnished like a but has all the needed hospital equipment.
	A stays with the parents during labor in the birthing room.
	The remains with the parents in the birthing room until the mother is discharged.
25. N	Nothers-to-be who have low-risk pregnancies may opt for a center that provides health
	care before labor as well as delivery services.
	Birth centers are often located near and employ certified nurse-midwives.
27. <i>A</i>	certified nurse midwife or CNM is a who has special training in delivering babies
: 4	during low-risk pregnancies.
28. 0	One drawback of birth centers is that mothers are often released withinafter giving birth.
29. N	Nothers may choose to give birth in their own
30. F	Home births can be, especially when emergency services are not nearby.
	Parents may lessen the risk of home births by having apresent for the delivery.
	The newborn death rate for home births is higher than forbirths.
_	childbirth is a delivery method in which pregnant woman learns about the birth
-	ess and uses breathing and relaxation techniques to reduce fear and pain during labor.
	Vomen do not use any pain relieving drugs during and delivery in natural childbirth.
35	Most common method is the method which is both a prenatal care and delivery method in natural childbirth.
36. T	The method is named for a French doctor that has pregnant women train to use
	breathing patterns to keep her mind off the pain.
	here areways to deliver a baby with drugs.
	are used to reduce anxiety and are used in the early stages of labor.
39	are used to reduce pain but not take pain away.
40	blocks pain during labor.
	s of Labor pg 187
41. E	Birth should occur aboutdays after conception.
42	is when the baby descends into the pelvis during the last few weeks of pregnancy.
43	are the tightening of the muscles to move the baby out of the mother's body.
44. V	When the plug becomes dislodged or the amniotic sac breaks notify your doctor.
45	labor is irregular contractions that are not real labor.

birth position is when the baby's feet, legs or buttocks emerge first.

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Complications of Childbirth pg 189	
47. Premature delivery is when baby may not be mature enough to 48. Baby is often not in the correct position for delivery in a delivery.	
48. Baby is often not in the correct position for delivery in a delivery.	
49. Premature rupture of membranes is when the sac breaks, but labor does not beg	in.
50. Infection is a when there is a premature rupture of membranes.	
51. With an baby, drugs are given to prevent infection until delivery.	
52 delivery is when both mother and baby are at risk for other complications.	
53. When baby is in abnormal position for delivery, baby may be injured and may ruptur	
54. Sometimes the position may be corrected. If not, the baby needs to be removed	
55.Cephalopelvic disproportion is when baby's head is too to pass through mother's pelv bones. Baby is often surgically removed	1
56. Umbilical cord problems like is hollow cord is wrapped around the baby's boo	Jy,
57is when cord slips into the birth canal and is trapped between the baby and can	al.
58. The umbilical cord supplies	
59. A baby who is deprived of may be born with cerebral palsy, visual problems and	
brain damage or may even die	
60. If thecord cannot be returned to the proper position, the baby must be surgica removed.	ılly
61 is when oxygen supply is cut off due to problems with the placenta or umbilion	cal
cord which can cause brain damage or death.	
62. After birth, breathing problems may result if lungs contain or waste materials.	0
63. Chest massage, and respirators can be used to stimulate breathing.	
64. Meconium aspiration occurs if the baby passes abefore birth, the meconium in the	ie
amniotic fluid may be swallowed or aspirated (breathing it in) and the baby may be covered in	
meconium.	
65. Swallowing meconium is not a problem.	Ŀ
66. Aspirating meconium can cause the baby to have mild to severe problems whic	
can last for years	
67. Doctors attempt to suction from the baby's nose and mouth before the first breath.	
68. Postpartum bleedingthe uterus should and squeeze the blood vessels shut that supplied the uterus during pregnancy	y.
59. Massage and are given to help the uterus return to its original size.	
Procedures for Childbirth Complications pg 190	
60.Drug-assisted deliveries is the increase or administration of drugs for relief during laboration	or.
61. Vaginal-assisted deliveries may beusing version or <i>operative</i> using forceps or	
vacuum extraction	
62. Cesarean sections is when baby is surgically removed through	
63. Hysterectomy is the removal of the	

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64. The 7 Medical Reasons for C-Section Deliveries pg 191

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1					
2					
3					
4) 5)			position for birth.		
6			birth.	LILIE .	
7			ne could rupture during la	abor.	
1e	ewborn Medical	Care and Tes	sts pg 193		
5	10° ~	is a doctor	who cares for infants, children and	teens until adulthood.	
6	is	a baby from	birth to one month of age.		
	Sign				
	0	0	1	2	
0.0	Heart rate	Absent	Slow; fewer than 100 beats per minute	More than 100 beats per minute	
7.5	Respiratory effort	Absent	Weak cry; hyperventilation	Good; strong cry	
	Muscle tone	Limp	Some flexing and bending of extremities	Well flexed	
2	Reflex irritability	No response	Some motion	Cry	
	Color	Blue; pale	Body pink; extremities blue	Completely pink	
7	. The Apgar test of	checks the ba	ıby's pulse,, r	nuscle tone and skin color.	
16	wborn Screenin	ig Tests pg 1	95	744	
8	8. Blood tests check for anemia,, and developmental disorders.				
9		_test checks	neonate's hearing.		
70. Heart test checks for heart, such as critical congenital heart disease (CCHD).					
'1	is a w	hen the level	of healthy red blood cells which ca	rry oxygen becomes too low	
	2 is a liver condition that can make the skin, tissues, and body fluids look yellow				
'3	. The	Scale is	s used to test babies up to two mon	ths of age.	
4	. The Brazelton id	dentifies whet	her a baby has problems with 4 are	eas:	
	A) interacting v	with the	B)handling	_ processes	
			state D)responding to		

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First Medical Care of Baby pg 196	
75. Male circumcision is the removal of the	e from the end of the penis one or 2 days after birth.
76. Well-baby checkup is routinev	visit to ensure signs of good health and proper growth.
77. Pediatrician will want to see newborn i	in 3 to days after leave hospital.
Care for High-Risk Newborns	LILIA LILIA .
78. High-risk newborns are newborns who	are, low-birthweight, or who have another high-risk condition.
79. Neonatal intensive care unit (NICU) p	provides immediate, specialized care forrisk
	newborns.
80. Neonatology is the branch of medicine	e concerned with, development, and diseases of
	Newborns.
Physical Care of the Mother pg 200	
	receives for the six to eight weeks following
	childbirth.
82. Typical side effects of	
	ding B)some loss or thinning of
	night and frequent urination
E) sore and engorgem	
F) extra due to any del	
Postpartum Mood Disorders pg 200 82. Baby blues is a mild mood	
83. Postpartum depression (PPD) is a ser	
84. Postpartum psychosis (PPP) is severe	
85. Paternal postpartum depression (PPP	
	, , , , , , , , , , , , , , , , , , , ,
6 Things to Help Meet the Parent's Need A) Getting enough B) Maintain	
D) Staying E) Takin	g care ofmatters F) Socializing
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