Test Bank Questions, Chapter 1: Perspectives on Maternal and Child Health Care

1. The nurse is committed to promoting women's health aligned with the Healthy People 2030 goals. Which action applies these goals to address maternal health disparities?
A. advocating for policies that promote equal access to quality prenatal care for people of all socioeconomic groups
B. implementing routine screenings for gestational diabetes and hypertension during prenatal visits
C. collaborating with community organizations to organize educational sessions on the benefits of breastfeeding
D. ensuring strict adherence to hospital protocols during labor to minimize complications

2. The nurse is caring for a pregnant client seeking an abortion at an outpatient clinic. Which response by the nurse applies ethical considerations and fosters the nurse–client relationship?
A. "I want to have a conversation with you to understand your values and preferences."
B. "I believe it is important to strictly follow hospital policies, regardless of your personal beliefs."
C. "I recommend considering alternative options without discussing potential emotional and physical implications."
D. "I advise you to proceed with the abortion, as it aligns with what is best for you."

3. The nurse is providing education to a group of nursing students about the health care barriers affecting women and their families. Which statement should the nurse include in the teaching?
A. "Families who live below the poverty level are less likely to receive quality health care."
B. "Women have better access to health care because they have higher rates of being insured than men."
C. "Women often face fewer cultural and linguistic barriers when seeking health care services compared to men."
D. "Low health literacy is a barrier that is identified most often in middle-aged citizens."

4. A perinatal nurse is interviewing a group of women in the community about health care services. Assessment of these services reveals that many of them are being underutilized. Which statement(s) from the women would assist the nurse in identifying potential reasons for this underutilization? Select all that apply.
A. "The services are hard to access by public transportation."
B. "The clinics are only open during the morning hours."

C. "The staff seems to look down on us when we do come in."
D. "The clinics are all in the northwest of the city."
E. "You need insurance to go to the clinics."

5. A nurse providing care to a 10-year-old child who is scheduled for a procedure is obtaining the child's assent. Which action will the nurse take **first**?
A. Help the child understand their current condition.
B. Tell the child about the planned procedure.
C. Discuss what the child should expect during the procedure.
D. Determine the child's understanding of the procedure.

6. A nurse is preparing a presentation for a group of elementary school parents about the mental health of children. Which area will the nurse emphasize as a major factor negatively affecting the mental health of children?
A. social media
B. physical illness
C. peer support
D. school environment

7. A nurse providing care to a client who has given birth vaginally to a healthy term newborn is teaching the client about measures to promote the newborn's health. The nurse determines that additional teaching is needed based on which client statement?
A. "For the first 2 weeks, I will let my newborn sleep with me in my bed."
B. "It might take a bit, but I am determined to breastfeed my newborn."
C. "Putting my newborn to sleep on their back seems to be working fine."
D. "We have joined a new parent support group in our neighborhood."

8. A nurse is reviewing the medical record of a pregnant client who has come for a follow-up visit. The nurse notes that the client entered the pregnancy with a body mass index higher than 30. Based on this information, the nurse determines that the client is at risk for which condition(s)? Select all that apply.
A. thromboembolism
B. gestational hypertension
C. preeclampsia
D. postterm birth
E. precipitous labor

9. A nurse is reading an article about key historical events associated with childbirth in the United States. Place the events in the order that demonstrates the nurse's understanding of the article. Use all options.
A. First cesarean birth completed.
B. Family-centered maternity care introduced.
C. Birth control pills becoming available.
D. Widespread proliferation of many types of childbirth classes.

10. The nurse is teaching a client about umbilical cord blood banking. Which statement made by the client demonstrates an understanding of the teaching?
A. "The banked umbilical cord could be a source of stem cells used to treat certain disorders."
B. "It is routine practice for the health care provider to preserve a piece of the umbilical cord after delivery."
C. "It costs a lot of money to utilize umbilical cord blood banking."
D. "If I donate my cord blood, I will not be able to have delayed cord clamping during my delivery."

11. A nurse is working as part of a community group working to develop programs to address disparities and maternal mortality. Which area should be a primary focus of this group to promote optimal outcomes?
A. widespread access to prenatal care
B. education about pregnancy complications
C. mental health treatment
D. screening for cardiovascular disease

12. A nurse is teaching a pregnant client about the Women, Infants and Children (WIC) program. Which statement by the client demonstrates an understanding of the program?
A. "This program will help me and my baby get the proper foods to eat."
B. "If my baby has a disability, this program will provide special services."
C. "Now, I will be able to get my baby free day care services."
D. "This program will allow me to get health insurance for my baby."

13. A nurse is developing a program to address the major health issues affecting women. When describing appropriate measures to address the leading cause of mortality, which client action will the nurse emphasize as critical for women?
A. heart-healthy diet
B. human papillomavirus (HPV) immunization
C. mammography screening
D. weight maintenance

14. A nurse is conducting an in-service presentation about stem cell research. One of the participants asks, "I am confused. Isn't this type of therapy really helpful?" Which response by the nurse is appropriate?
A. "There is a controversy over how the stem cells are obtained."
B. "There is a controversy over whether or not to use stems cells."
C. "Stem cells are helpful but only for a certain few."
D. "There is a question of whether the benefits outweigh the costs."

15. A nurse is creating a timeline for a class presentation that reviews the key events that occurred in the history of maternal, newborn, and child health care. Place the events in the order they occurred. Use all options.
A. first cesarean birth
B. use of twilight sleep for births

C. first birth control pills available
D. use of Lamaze method for birth
E. re-emergence of the use of nurse midwives

16. A nurse is supporting a project that aims to reduce childhood mortality in the region. Which intervention would **most** effectively support the goal of mortality reduction?
A. providing free bicycle helmets for children
B. providing free exercise classes for children
C. providing education about healthy nutrition for families
D. providing first aid kits for families

17. A 16-year-old adolescent, living in a state with mature minor consent, comes to the clinic requesting contraception and testing for sexually transmitted infections (STIs). The client asks that their parents **not** be informed of the clinic visit. How does the nurse **best** address this request?
A. Assess the adolescent's understanding of their requests and implications of these decisions.
B. Inform the adolescent that they require parental consent for all medical care until 18 years of age.
C. Refer the adolescent to child protection services agency for determination of consent.
D. Notify the parent of the adolescent's request for sexual health services.

18. A 13-year-old client requires nonemergency surgery. The parents have signed the consent form for the surgery. How should the nurse proceed related to assent for this client?
A. Explain the procedure and confirm the client's agreement to proceed.
B. Assume the parents will discuss the consent with the client.
C. Proceed with surgery with the written consent; no further documentation is required.
D. Clarify with the client that the surgery will proceed based on parental consent.

19. An 8-year-old child presents to the emergency department with a fractured humerus that requires surgical repair. The child is accompanied by their grandparent while the parents (legal guardians) are away on vacation. What should be the nurse's **next** step in obtaining consent for this procedure?
A. The parents should be contacted to obtain consent for the surgery.
B. The grandparent can provide legal consent for the child as the temporary guardian.
C. A guardian *ad litem* will need to be temporarily appointed to provide consent.
D. The child must assent to the surgical procedure.

20. The nurse is preparing a presentation about preventing unintentional injuries like drowning and bicycle accidents that result in fatalities. The population attending the presentation are parents of children ages 1 to 14. Which group(s)

of parents should the nurse target when preparing this presentation? Select all that apply.
A. parents with a low level of support within the family
B. parents who live in government-subsidized housing
C. single parents
D. parents of female children
E. parents who both work outside the home

21. A nurse is providing care to a 3-year-old child who is scheduled for a bone marrow biopsy. The nurse is responsible for which action(s) related to informed consent? Select all that apply,
A. determining if the parents understand what they are signing
B. acting as a witness to the signing of the consent form
C. explaining the procedure in detail to the child and parents
D. describing the potential risks and benefits of the procedure
E. informing the parents of alternative available methods

22. A nurse is providing care to an 11-year-old child brought to the emergency department by their grandparent. The child reports ankle pain and states falling and twisting their ankle during a fall. The grandparent says, "I think the ankle might be broken." Further assessment reveals that the ankle is fractured and requires surgery. The grandparent tells the nurse, "The child's parents are divorced, but my son has legal custody." Which person is responsible for giving consent?
A. child's father
B. child's mother
C. grandparent accompanying the child
D. legally appointed guardian

23. A nurse is providing care to a family living below the federal poverty level with two children, ages 1 year and 2 1/2 years. As part of the care, the nurse is working to help promote the children's readiness for school. The nurse will refer the family to which program?
A. Head Start
B. Women, Infants and Children (WIC)
C. National School Lunch
D. Healthy Mothers, Healthy Babies Coalition

24. A nurse is conducting a class for a group of adolescents. The focus is on describing situations for which they may receive confidential care without including their parents. The nurse determines that the teaching was successful when the group identifies which condition(s) as possibly being confidential? Select all that apply.
A. contraception
B. testing for sexually transmitted infections (STIs)
C. treatment for communicable diseases
D. mental health counseling
E. medication use for weight management

25. A nurse is conducting a program focusing on health promotion and disease prevention in children for a community group consisting of parents with toddlers and preschool-aged children. Part of the program includes a discussion about measures to reduce childhood mortality and morbidity. Which measure(s) will the nurse likely emphasize? Select all that apply.
A. safety in and around the water
B. use of protective bicycle gear
C. car and booster seat use
D. recommended immunizations
E. storage of household chemicals

Test Bank Answer Key, Chapter 1: Perspectives on Maternal and Child Health Care

1. **A**. Advocating for policies that provide equal access to prenatal care aligns with the systemic goals of Healthy People 2030 to address health disparities and promote health equity. Implementing screenings for diseases focuses on individual health monitoring, not disparities. Providing breastfeeding education and ensuring adherence to hospital policies are important, but do not address health disparities.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Caring

2. **A**. Having an open and nonjudgmental conversation with the client promotes trust and fosters the nurse–client relationship. All the other statements place the nurse at the center of the decision-making, when the client should be the one informed and allowed to determine their course of treatment.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Caring

3. **A**. Socioeconomic factors such as living below the poverty level can create barriers to accessing quality health care services for clients and their families. Women are more likely to be uninsured than men. Cultural, linguistic, and gender bias are all factors that can place barriers between all clients and receiving health care. Health literacy is defined as the degree to which individuals have the capacity to obtain, process, and understand basic health information and the services needed to make appropriate health decisions. Low health literacy is most often seen in vulnerable populations such as older adults, immigrants, minorities, and populations living below the poverty level.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Nursing Process

4. **A, B, C, D, E**. Access to care can be jeopardized by lower incomes and greater responsibilities when juggling work and family. Lack of finances or transportation, geographic misdistribution of health care providers, no babysitters, language or cultural barriers, distrust of health care providers,

inconvenient clinic hours, and the poor attitudes of health care workers often discourage clients from seeking health care.

Format: Multiple Selection
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Nursing Process

5. **A**. When obtaining assent, the nurse will first help the child understand their health condition, depending on the child's developmental level. Next, they will inform the child of the treatment planned and discuss what the child should expect. Then, the nurse will determine what the child understands about the situation and make sure the child is not being unduly influenced to make a decision one way or another. Lastly, the nurse will ascertain the child's willingness to participate in the treatment.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Nursing Process

6. **A**. Although physical illness and school environment can affect a child's mental health, the U.S. Surgeon General issued an advisory to call the American people's attention to the increasing concerns regarding the mental health of the country's youth and the negative effects of social media on their mental health. Peer support would most likely provide a positive effect.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Psychosocial Integrity
Cognitive Level: Understand
Integrated Process: Teaching/Learning

7. **A**. After birth, health promotion strategies can significantly improve a newborn's health and chances of survival. However, parents and caregivers should **not** share a bed with a newborn due to the increased risk for sleep-related infant death. Breastfeeding has been shown to reduce rates of infection in newborns and to improve their long-term health. Human milk also reduces the risk for certain chronic diseases such as allergic conditions, celiac disease, and inflammatory bowel disease (IBD),) as well as the risk of obesity and its complications. Placing a newborn on their back to sleep will reduce the incidence of sudden unexpected infant death (SUID). Encouraging the client to join support groups to prevent postpartum depression and learn sound child-rearing practices will improve the health of both the client and the newborn.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care

Client Needs: Health Promotion and Maintenance
Cognitive Level: Apply
Integrated Process: Teaching/Learning

8. **A, B, C**. Over the last few decades, the incidence of obesity has risen to epidemic proportions worldwide, which has led to obesity during pregnancies. Pregnant clients categorized as obese (BMI higher than 30) are at increased risk for blood clots, surgical births, long labors as opposed to precipitous labors, preterm birth as opposed to postterm birth, macrosomia, shoulder dystocia, intrauterine birth (stillbirth), gestational diabetes, congenital defects, preeclampsia, gestational hypertension, and postpartum infections.

Format: Multiple Selection
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Nursing Process

9. **A, B, C, D**. The first surgical birth (cesarean birth) was performed in Boston in 1894. The idea of family-centered maternity care was introduced by Sister Mary Stella in 1950. The first oral contraceptive pills (OCPs) became available in the 1960s. During the 2000s, childbirth classes of many types abound in most communities.

Format: Ordered Response
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Remember
Integrated Process: Nursing Process

10. **A**. Umbilical cord blood is the blood remaining in the umbilical cord at birth; it can be collected at birth and be used to produce healthy new cells, replace damaged cells, and treat over 70 diseases, including genetic disorders; immune system conditions; cancers; and hematologic, neurologic, or malignant disorders. Umbilical cord blood banking is not routine practice and is only done with the client's request and consent. Umbilical cord blood banking does not have to be expensive. Public cord blood banks (nonprofit) store stem cells for free that can be used by anyone needing them (in a manner similar to the way public blood banks work). Currently, it is recommended that delaying the clamping and cutting of the umbilical cord constitutes the best evidence-based practice. Therefore, cord blood stem cell collection should not alter the timing of umbilical cord clamping.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Teaching/Learning

11. **A**. Maternal mortality rates have steadily increased over the years, despite that fact that 80% of maternal deaths are preventable. The leading causes of pregnancy-related death are mental health conditions, hemorrhage, and cardiovascular problems. However, lack of care during pregnancy is a major factor contributing to a poor outcome. Prenatal care prevents complications of pregnancy and supports the birth of healthy infants. Therefore, widespread access to prenatal care should be a priority. Although education, treatment of mental health conditions and cardiovascular disease screening are important, these areas would be addressed with widespread access to prenatal care.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Apply
Integrated Process: Nursing Process

12. **A**. The Women, Infants and Children (WIC) program focuses on nutrition and provides nutritional supplementation and education to pregnant, postpartum, and lactating clients as well as infants and children up to age 5 if the whole family has an income at or below 185% of the federal poverty income guidelines. WIC does not provide special services for children with disabilities, day care, or health insurance.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Teaching/Learning

13. **A**. In the United States, the leading cause of mortality in women is cardiovascular disease (CVD). Nurses have a major role in empowering clients to engage in a heart-healthy lifestyle to prevent CVD. Cancer is the second leading cause of death among women. Although mammography screening would be appropriate to address breast cancer (the most common malignancy in women, second only to lung cancer as a cause of cancer mortality), the priority health issue is CVD. Weight reduction, not weight maintenance, would be appropriate for breast cancer because a higher body weight is considered a controllable risk factor for the disease. Human papillomavirus (HPV) immunization helps protect individuals against diseases caused by nine types of HPV, including cervical, vaginal, and vulvar cancers in females; anal cancer; certain head and neck cancers (such as throat and back-of-mouth cancers); and genital warts in both males and females. However, it would have no effect on addressing CVD.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Teaching/Learning

14. **A**. The controversy is not about whether stem cells should be used; it is about the source of stem cells and how they are obtained. The process of obtaining embryonic stem cells results in the destruction of the embryo. Some people argue that the destruction of the human embryo constitutes the killing of a human being, and they reject this practice on moral or religious grounds. The goal of stem cell research is the relief of human suffering, which is positive ethically. Benefits of stem cell research are many and include providing therapies for Parkinson disease and diabetes, regenerating diseased body tissues, repairing spinal cord injuries, growing organs for transplant, and numerous other therapies. Cost may be an issue, but it is the source of the stem cells that is at question.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Understand
Integrated Process: Teaching/Learning

15. **A, B, C, D, E**. Historically, the first cesarean birth was performed in 1894. The use of twilight sleep occurred during the 1940s. The first oral contraceptive pills (OCPs) became available in the 1960s. Dr. Fernand Lamaze published the book entitled "Painless Childbirth: The Lamaze Method" in 1984. Nurse midwives re-emerged during the 2000s.

Format: Ordered Response
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Remember
Integrated Process: Nursing Process

16. **A**. Unintentional injuries are the leading cause of morbidity and mortality in children. Providing bicycle helmets is an intervention to reduce the risk for head injury in bicycle crashes, which will address one of the leading causes of mortality. Free exercise classes and nutrition education do not address leading mortality causes. Providing first aid kits would assist with minor unintentional injuries but would have less impact on major injuries and mortality.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Apply
Integrated Process: Nursing Process

17. **A**. *Mature minor consent* permits adolescents to receive confidential health care services without parental knowledge, if the minor is determined to be sufficiently mature and intelligent. Assessing this adolescent's understanding is the first step to determining mature minor consent. The nurse should not notify the parents or child protective services, because these are not required if the

mature minor is able to consent. The age of consent varies depending on legislation but, with mature minor consent, adolescents can consent to medical procedures despite not being 18 or older.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Communication and Documentation

18. **A**. Assent involves obtaining the child's agreement and acknowledging their age-appropriate understanding of the plan for treatment and care. By explaining the procedure and confirming this client's agreement, the nurse is supporting their assent, in addition to the family's consent. The nurse should not assume that the parents have discussed this with the adolescent; obtaining assent is the responsibility of the health care team. Although the signed legal consent is important, the nurse should not proceed without assent from the 13-year-old client as well.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Communication and Documentation

19. **A**. In this case, the parents are the legal guardians and they must be contacted to provide consent for the procedure. Although assent from the child is important, this does not provide legal consent. The grandparent cannot provide legal consent. If the parents are not able to be contacted, a guardian *ad litem* might be appointed, but contact with the legal guardians should first be attempted.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Apply
Integrated Process: Communication and Documentation

20. **A, B, C**. Unintentional injuries are the number one cause of death in children between the ages of 1 and 14 in the United States. Risk factors associated with childhood injuries include young age, male sex, low socioeconomic status, parents who are unmarried or single, low maternal education level, poor housing, parental substance use disorder or alcohol use disorder, and low support within the family.

Format: Multiple Selection
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Safety and Infection Control
Cognitive Level: Understand

Integrated Process: Nursing Process

21. **A, B**. The nurse's responsibility related to informed consent includes:
- Determining whether the client or parents or legal guardians understand what they are signing by asking them pertinent questions
- Ensuring that the consent form is signed by the client (or parents or legal guardians if the client is a child)
- Serving as a witness to the signature process

The physician or advanced practitioner providing or performing the treatment and/or procedure is responsible for informing the child and family about the procedure and obtaining consent by providing a detailed description of the procedure or treatment, the potential risks and benefits, and alternative methods available.

Format: Multiple Selection
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Understand
Integrated Process: Nursing Process

22. **A**. The right to give consent for health care rests with the parent who has legal custody by divorce decree. In this situation, it would be the child's father, not the child's mother or grandparent. Obtaining consent from a legal guardian would be appropriate if the child was not living with biological or adoptive parents, such as in foster care, with potential adoptive parents, or with a relative.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Management of Care
Cognitive Level: Understand
Integrated Process: Nursing Process

23. **A**. Head Start provides child development programs to pregnant people, families, and children from birth to age 5 with the overarching goal of increasing school readiness for children from families with low incomes. Women, Infants and Children (WIC) provides nutritional supplementation and education to families with low incomes; pregnant, postpartum, and lactating people; and infants and children up to age 5. The National School Lunch Program provides nutritious, well-balanced lunches to children each day at school for free or at low cost and provides meal supplements for children in afterschool care and nutrition programs for children experiencing homelessness. Healthy Mothers, Healthy Babies Coalition raises public awareness of prenatal care, good nutrition, and avoidance of drugs, and promotes breastfeeding.

Format: Multiple Choice
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance

Cognitive Level: Understand
Integrated Process: Nursing Process

24. **A, B, C, D**. Many states do not require the consent or notification of parents or legal guardians when providing specific care to minors. Depending on the state law, health care may be provided to minors for certain conditions in a confidential manner without including the parents. These types of care may include pregnancy counseling, prenatal care, contraception, testing for and treatment of STIs and communicable diseases (including HIV), substance use disorders, and mental health counseling and treatment. These exceptions allow minors to seek help in a confidential manner; they might otherwise avoid care if they were required to inform their parents or legal guardians. Medication use for weight management is not a condition that is typically included.

Format: Multiple Selection
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Health Promotion and Maintenance
Cognitive Level: Understand
Integrated Process: Teaching/Learning

25. **A, B, C, E**. The leading cause of death in children between the ages of 1 and 4 is unintentional injuries. Despite continued research into the preventable nature of childhood injuries, unintentional injury, such as from motor vehicle collisions, fires, drowning, bicycle or pedestrian collisions, poisoning, and falls, remains a leading cause of mortality and morbidity in children. Therefore, measures to address these conditions, such as water safety, bicycle and car safety, and safe storage of household chemicals to prevent poisoning, will be key. Although immunizations are important, they would not address the issue of unintentional injuries.

Format: Multiple Selection
Chapter 1: Perspectives on Maternal and Child Health Care
Client Needs: Safe, Effective Care Environment: Safety and Infection Control
Cognitive Level: Apply
Integrated Process: Teaching/Learning