

Kaplan Obstetrics (OB) Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Which Apgar score reflects a good cry and active motion in an infant?**
 - A. 0**
 - B. 1**
 - C. 2**
 - D. Both 1 and 2**

- 2. What should be done if uterine hyperstimulation occurs during Oxytocin administration?**
 - A. Increase the Oxytocin dosage**
 - B. Continue monitoring without change**
 - C. Discontinue Oxytocin and administer O2**
 - D. Start a secondary IV line**

- 3. What is the first nursing action immediately following a normal vaginal delivery?**
 - A. Check for fetal heart tones**
 - B. Assess maternal blood loss**
 - C. Check lochia flow**
 - D. Monitor maternal vital signs**

- 4. What action does oxytocin perform on the muscles of the uterus?**
 - A. Relaxation of the uterine muscles**
 - B. Contraction of the uterine myofibrils**
 - C. Prevention of uterine contractions**
 - D. Inhibition of estrogen production**

- 5. What is a key component of newborn cord care implementation?**
 - A. Apply lotion to the cord stump regularly**
 - B. Ensure the diaper edge is above the cord area**
 - C. Monitor the cord area frequently for signs of infection**
 - D. Remove the cord clamp immediately after birth**

- 6. What is the definition of "Primipara"?**
- A. A woman who is pregnant for the first time**
 - B. A woman who has borne 1 child in past 20 weeks**
 - C. A woman who has had multiple children**
 - D. A woman who has never delivered a child**
- 7. What is the normal expected weight gain of the fetus during the fourth month of gestation?**
- A. Weight quadruples**
 - B. Weight doubles**
 - C. Weight remains constant**
 - D. Weight increases by 50%**
- 8. What should be the nurse's action if contractions occur less than 2 minutes apart while administering oxytocin?**
- A. Continue the infusion**
 - B. Stop the infusion and turn the client to the left side**
 - C. Administer pain relief immediately**
 - D. Increase the infusion rate**
- 9. What happens during the fourth stage of labor?**
- A. Delivery of the neonate**
 - B. Delivery of the placenta**
 - C. Recovery period after the placenta delivery**
 - D. Engagement of fetus in the birth canal**
- 10. What is one purpose of breastfeeding?**
- A. Enhances the mother's physical strength**
 - B. Protects against breast cancer in the mother**
 - C. Allows for longer sleep periods for the infant**
 - D. Reduces the need for vaccinations**

Answers

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1. C
2. C
3. C
4. B
5. C
6. B
7. A
8. B
9. C
10. B

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Explanations

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1. Which Apgar score reflects a good cry and active motion in an infant?

- A. 0
- B. 1
- C. 2**
- D. Both 1 and 2

The Apgar score is a quick assessment method developed to evaluate the physical condition of a newborn immediately after birth. It consists of five criteria: heart rate, respiratory effort, muscle tone, reflex response, and skin coloration, each scored from 0 to 2, with a maximum total score of 10. A score of 2 is awarded for a good cry and active motion, indicating that the newborn is not only breathing but doing so effectively, showing signs of vitality and responsiveness. Active motion coupled with a strong cry signifies that the infant is in good condition, showcasing both adequate respiratory function and muscle tone. In contrast, scores of 0 or 1 indicate significantly lower levels of responsiveness and physical activity. A score of 0 reflects the absence of both respiratory and muscular activity, while a score of 1 might indicate a weak or irregular cry and limited movement. Therefore, the presence of a good cry and active motion clearly aligns with the highest score of 2 in the Apgar evaluation.

2. What should be done if uterine hyperstimulation occurs during Oxytocin administration?

- A. Increase the Oxytocin dosage
- B. Continue monitoring without change
- C. Discontinue Oxytocin and administer O₂**
- D. Start a secondary IV line

When uterine hyperstimulation occurs during Oxytocin administration, the most appropriate action is to discontinue the use of Oxytocin and administer oxygen. Uterine hyperstimulation is characterized by excessively frequent or strong contractions that can compromise fetal well-being and lead to complications such as fetal distress. Discontinuing Oxytocin immediately helps to decrease the intensity and frequency of the contractions, fostering a safer environment for the fetus. Administering oxygen can help improve fetal oxygenation, especially if there are signs of fetal distress or decreased heart rate due to the effects of hyperstimulation. This response is critical in managing the potential risks associated with overstimulation, ensuring both maternal and fetal health. Continuing monitoring without making changes is insufficient in the context of hyperstimulation, as it does not directly address the potential risks posed by the strong contractions. Increasing the Oxytocin dosage would exacerbate the situation, leading to further complications. Starting a secondary IV line is not typically necessary in the immediate management of hyperstimulation; instead, stopping the Oxytocin and providing oxygen are prioritized interventions to stabilize the situation.

3. What is the first nursing action immediately following a normal vaginal delivery?

- A. Check for fetal heart tones**
- B. Assess maternal blood loss**
- C. Check lochia flow**
- D. Monitor maternal vital signs**

Following a normal vaginal delivery, the first nursing action involves monitoring the lochia flow, which is the vaginal discharge that occurs post-delivery consisting of blood, mucus, and uterine tissue. Assessing lochia is crucial as it provides immediate information about the woman's recovery and can quickly indicate complications such as hemorrhage if the flow is excessively heavy or if there are clots present. Lochia assessment allows for the detection of potential problems early on, ensuring timely interventions can be made if necessary. The consistency, color, and amount of lochia are vital signs of uterine involution, and monitoring these parameters forms a critical part of post-delivery care. While checking maternal vital signs and assessing maternal blood loss are also important actions following delivery, lochia assessment is prioritized to ensure that any issues with uterine atony or retained products of conception are addressed as quickly as possible.

4. What action does oxytocin perform on the muscles of the uterus?

- A. Relaxation of the uterine muscles**
- B. Contraction of the uterine myofibrils**
- C. Prevention of uterine contractions**
- D. Inhibition of estrogen production**

Oxytocin plays a crucial role in the reproductive process, particularly during labor and childbirth. It acts primarily on the smooth muscle cells of the uterus, specifically inducing contraction of the uterine myofibrils. This action is pivotal for facilitating the process of labor, as the rhythmic contractions of the uterus help to expel the fetus through the birth canal. The mechanism of action involves oxytocin binding to its receptors on the myometrial cells, which leads to an increase in intracellular calcium concentrations, resulting in muscle contraction. This is why oxytocin is often used in clinical settings to induce or augment labor, as it effectively enhances the intensity and frequency of uterine contractions, promoting the progression of labor. In contrast, other options suggest actions that are not aligned with oxytocin's known functions; for instance, relaxation of the uterine muscles or prevention of uterine contractions contradict the hormone's primary role of stimulating contractions. Additionally, inhibiting estrogen production does not pertain to oxytocin's function in uterine muscle activity and is more related to other hormonal pathways.

5. What is a key component of newborn cord care implementation?

- A. Apply lotion to the cord stump regularly**
- B. Ensure the diaper edge is above the cord area**
- C. Monitor the cord area frequently for signs of infection**
- D. Remove the cord clamp immediately after birth**

Monitoring the cord area frequently for signs of infection is essential as it helps in identifying any potential complications early. Newborns are particularly vulnerable to infections, and the umbilical cord stump is a potential entry point for pathogens. Regular monitoring enables caregivers to observe for symptoms such as redness, swelling, discharge, or foul odor, which may indicate an infection. Detecting these signs promptly can lead to timely intervention and treatment, preventing further health issues for the newborn. In contrast, applying lotion to the cord stump is not recommended as it can create a moist environment that is conducive to infection. Ensuring that the diaper edge is above the cord area is important for preventing irritation and exposure to fecal matter, which helps maintain cleanliness but does not specifically involve infection monitoring. Removing the cord clamp immediately after birth poses a risk as it may compromise the cord's healing process and increase the chance of bleeding or infection, thus underscoring the importance of proper care and observation of the cord stump.

6. What is the definition of "Primpipara"?

- A. A woman who is pregnant for the first time**
- B. A woman who has borne 1 child in past 20 weeks**
- C. A woman who has had multiple children**
- D. A woman who has never delivered a child**

The term "Primpipara" refers specifically to a woman who has been pregnant for the first time and who has borne a child in the past 20 weeks. This term encompasses both the experience of a woman's first pregnancy and the delivery outcome, indicating that she has successfully carried a pregnancy to a stage where the fetus could potentially survive outside the womb (usually considered to be around 20 weeks gestation). This definition is grounded in obstetric classification systems, which use specific terms to define a woman's obstetric history, including her number of pregnancies and deliveries. The term captures an important aspect of obstetric care, focusing not only on pregnancy status but also related outcomes within a specific timeframe. Other options do not accurately reflect this definition; for instance, a woman who is pregnant for the first time aligns more closely with the term "Primigravida," and being a woman who has never delivered a child would be referred to as "Nulliparous." Meanwhile, a woman with multiple previous births would be considered "Multiparous," which also does not fit within the definition of "Primpipara."

7. What is the normal expected weight gain of the fetus during the fourth month of gestation?

- A. Weight quadruples**
- B. Weight doubles**
- C. Weight remains constant**
- D. Weight increases by 50%**

The expected weight gain of the fetus during the fourth month of gestation is most accurately described by the option indicating that the weight doubles. By the end of the fourth month, the fetus undergoes considerable growth, but it typically does not quadruple its weight. Instead, from months one to four, the fetal weight generally increases significantly, with weight doubling as the fetus develops its essential organs and structures. Fetal development is characterized by rapid growth, particularly in the second trimester, and while the fourth month marks a critical time in growth, the doubling of weight reflects the more realistic biological changes during this period. By contrast, options suggesting quadrupling or a weight increase by a specific percentage may misrepresent the typical physiological changes observed. In summary, recognizing that weight gain is substantial but not excessively so captures the expected development trajectory during this stage of pregnancy.

8. What should be the nurse's action if contractions occur less than 2 minutes apart while administering oxytocin?

- A. Continue the infusion**
- B. Stop the infusion and turn the client to the left side**
- C. Administer pain relief immediately**
- D. Increase the infusion rate**

When contractions occur less than 2 minutes apart during the administration of oxytocin, the most appropriate action is to stop the infusion and turn the client to the left side. This approach is rooted in the understanding of uterine hyperstimulation, which can occur with oxytocin administration, leading to inadequate relaxation between contractions. By stopping the infusion, the nurse alleviates the potential for excessive uterine activity, which can compromise fetal well-being and increase the risk of complications. Turning the client to the left side is particularly effective as it enhances uteroplacental blood flow and can decrease any pressure on the umbilical cord, thus promoting better fetal oxygenation during periods of frequent contractions. Other actions, such as continuing the infusion or increasing the rate, would exacerbate the situation, potentially leading to severe fetal distress due to insufficient recovery time between contractions. Administering pain relief, while important for patient comfort, does not address the underlying concern of hyperstimulation and may delay appropriate management of the situation. Therefore, stopping the infusion and positioning the client appropriately are critical steps to ensure both maternal and fetal safety.

9. What happens during the fourth stage of labor?

- A. Delivery of the neonate
- B. Delivery of the placenta
- C. Recovery period after the placenta delivery**
- D. Engagement of fetus in the birth canal

The fourth stage of labor refers to the recovery period after the delivery of the placenta. This stage typically begins immediately after the placenta is expelled and can last for several hours. During this time, the mother's body undergoes significant adjustments as it transitions from labor to recovery. Key aspects of the fourth stage include monitoring for complications such as excessive bleeding, ensuring that the mother is stable, and facilitating bonding between the mother and the newborn. The healthcare provider will observe the mother's vital signs, uterine tone, and the amount of lochia (vaginal discharge) to ensure that the uterus is contracting appropriately and minimizing the risk of postpartum hemorrhage. This period is crucial for establishing early feeding practices, as well as addressing any immediate comfort and emotional needs of the mother, helping her to begin the process of bonding with the newborn.

10. What is one purpose of breastfeeding?

- A. Enhances the mother's physical strength
- B. Protects against breast cancer in the mother**
- C. Allows for longer sleep periods for the infant
- D. Reduces the need for vaccinations

One of the significant purposes of breastfeeding is that it provides numerous health benefits for both the infant and the mother. Specifically, breastfeeding is associated with a reduced risk of breast cancer in the mother. This protective effect is thought to be related to hormonal changes that occur during lactation, including reduced exposure to estrogen, which can contribute to the development of breast cancer. Furthermore, breastfeeding offers infants the optimal nutritional composition for growth and development, supports their immune system, and may have long-term benefits in reducing the risk of chronic diseases. While other benefits, such as bonding between mother and child, enhanced emotional connection, and convenience of feeding, are also important, the relationship between breastfeeding and a decreased risk of breast cancer is a scientifically supported advantage for maternal health that underscores the importance of breastfeeding.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://kaplanobstetrics.examzify.com>

We wish you the very best on your exam journey. You've got this!

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