

NARM Certified Professional Midwife (CPM) Practice Exam (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 condition is characterized by a swayback posture often seen in late pregnancy?**
 - A. Kyphosis**
 - B. Scoliosis**
 - C. Lordosis**
 - D. Spondylosis**

- 2. What developmental benefit does DHA supplementation in pregnancy provide?**
 - A. Improves maternal blood flow**
 - B. Reduces risk of hypertension**
 - C. Helps in baby's eye and brain development**
 - D. Increases energy levels for the mother**

- 3. What is the typical outcome for infants with neonatal varicella regarding mortality?**
 - A. 0% mortality rate**
 - B. 10% mortality rate**
 - C. 20% mortality rate**
 - D. 30% mortality rate**

- 4. Which complication can arise from bacterial vaginosis?**
 - A. Increased fetal weight**
 - B. Preeclampsia**
 - C. Puerperal infections**
 - D. Gestational diabetes**

- 5. In which circumstance would vaccination for Hepatitis B be recommended for a neonate?**
 - A. When the mother shows positive for HIV**
 - B. When the mother tests positive for Hepatitis B**
 - C. If the mother has no previous vaccinations**
 - D. When the neonate shows symptoms of jaundice**

- 6. What are some causes of Large for Gestational Age (LGA) status?**
- A. Single fetus, Gestational diabetes, Hypertension**
 - B. Twins, Gestational diabetes, Polyhydramnios**
 - C. Preterm labor, Obesity, Dehydration**
 - D. Low birth weight, Fetal infections, Genetic disorders**
- 7. What is the normal variation in fetal heart rate (FHR)?**
- A. 10-20 BPM**
 - B. 5-15 BPM**
 - C. 15-25 BPM**
 - D. 20-30 BPM**
- 8. What is erythema toxicum neonatorum?**
- A. A swelling on the fetal scalp**
 - B. A benign red papular rash on a baby's torso**
 - C. A type of tongue tied condition**
 - D. A defect in the anal opening**
- 9. What are potential consequences of untreated syphilis in pregnancy?**
- A. Increased energy levels**
 - B. Fetal malformation or death**
 - C. Improved maternal wellbeing**
 - D. No impact on pregnancy**
- 10. In pediatric health assessments, what can the presence of acrocyanosis indicate?**
- A. Possible infection**
 - B. Respiratory distress**
 - C. Normal physiological response**
 - D. Jaundice status**

Answers

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

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Explanations

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1. Which condition is characterized by a swayback posture often seen in late pregnancy?

- A. Kyphosis**
- B. Scoliosis**
- C. Lordosis**
- D. Spondylosis**

The condition characterized by a swayback posture, particularly noticeable in late pregnancy, is indeed lordosis. This postural change occurs as the body's center of gravity shifts due to the growing uterus, leading to an increased lumbar curve. In this context, lordosis refers specifically to the exaggeration of the natural curvature of the lumbar spine, creating that swayback appearance. During pregnancy, this adjustment helps to accommodate the weight of the fetus and maintain balance. As the uterus expands, it affects the biomechanics of the spine, resulting in this characteristic posture. Understanding this condition is crucial for midwives as they monitor and support the physical changes their clients experience throughout pregnancy. The other conditions mentioned have distinct characteristics and do not specifically relate to the swayback posture seen in late pregnancy. Kyphosis involves an exaggerated thoracic curvature, scoliosis is a lateral spinal curvature, and spondylosis refers to degenerative changes in the spine.

2. What developmental benefit does DHA supplementation in pregnancy provide?

- A. Improves maternal blood flow**
- B. Reduces risk of hypertension**
- C. Helps in baby's eye and brain development**
- D. Increases energy levels for the mother**

DHA, or dokosahexaenoic acid, is an omega-3 fatty acid that plays a crucial role in fetal development, particularly in the development of the brain and eyes. Research indicates that adequate levels of DHA during pregnancy are associated with enhanced cognitive and visual outcomes in infants. The increase in omega-3 fatty acids, especially DHA, in a mother's diet supports the formation and functionality of neural tissues and retinal structures in the developing fetus. This specific benefit underscores the importance of ensuring that pregnant individuals obtain sufficient DHA through diet or supplementation. While other options may seem pertinent to maternal health in various contexts, they do not directly encapsulate the essential role that DHA plays in the specific developmental processes related to the baby's eye and brain development.

3. What is the typical outcome for infants with neonatal varicella regarding mortality?

- A. 0% mortality rate
- B. 10% mortality rate
- C. 20% mortality rate**
- D. 30% mortality rate

Infants who develop neonatal varicella, which occurs when a mother has varicella (chickenpox) around the time of delivery, face significant health risks. The correct answer indicates a 20% mortality rate, which reflects the serious implications of this condition. Neonatal varicella is particularly concerning because it can lead to severe complications such as pneumonia, encephalitis, and disseminated infection, particularly in infants who are less than a month old. The mortality rate is significantly higher in infants who are born to mothers who develop varicella in the late stages of pregnancy, especially within a few days before delivery or immediately after delivery, due to their lack of passive immunity. The other stated mortality rates suggest an underestimation of the risks associated with this condition. There are documented cases and studies that establish the 20% mortality rate as a more accurate reflection of the potential outcomes for infants affected by neonatal varicella. Hence, while it is of utmost importance to prevent maternal varicella through vaccination and effective management of exposure, understanding the mortality risk is crucial for clinical practice and guiding patient care in the context of pregnancy and neonatal health.

4. Which complication can arise from bacterial vaginosis?

- A. Increased fetal weight
- B. Preeclampsia
- C. Puerperal infections**
- D. Gestational diabetes

Bacterial vaginosis (BV) is an imbalance of the normal bacteria found in the vagina, and it is known to be associated with several complications during pregnancy. One of the significant complications that can arise from bacterial vaginosis is an increased risk of puerperal infections. Puerperal infections refer to infections that occur after childbirth, particularly during the postpartum period, and they can arise from various factors, including pre-existing vaginal infections like BV. The presence of BV can create an environment that fosters bacterial growth and may lead to uterine infections or infections in the surrounding tissues after delivery. This can result in adverse outcomes for both the mother and the newborn, necessitating careful monitoring and management. The other options, while they pertain to pregnancy complications, are not directly linked to bacterial vaginosis. For instance, increased fetal weight and gestational diabetes relate to metabolic and nutritional factors rather than infections. Preeclampsia, characterized by high blood pressure and damage to other organ systems, has different etiology involving placental factors and vascular issues, making it separate from the complications associated with bacterial vaginosis.

5. In which circumstance would vaccination for Hepatitis B be recommended for a neonate?

- A. When the mother shows positive for HIV**
- B. When the mother tests positive for Hepatitis B**
- C. If the mother has no previous vaccinations**
- D. When the neonate shows symptoms of jaundice**

Vaccination for Hepatitis B is recommended for a neonate in the circumstance when the mother tests positive for Hepatitis B. This is crucial because Hepatitis B is a viral infection that can be transmitted from an infected mother to her baby during childbirth. Protecting the neonate with the Hepatitis B vaccine, ideally within 12 hours of birth, significantly reduces the risk of the infant becoming infected and subsequently developing chronic hepatitis B, which can have serious long-term health consequences. In cases where the mother tests positive for the virus, the vaccination not only helps to prevent infection but is also part of a comprehensive strategy that often includes administering hepatitis B immunoglobulin (HBIG) to further decrease the risk of transmission. This timely intervention is a critical aspect of neonatal care and public health strategies aimed at controlling Hepatitis B in populations at risk.

6. What are some causes of Large for Gestational Age (LGA) status?

- A. Single fetus, Gestational diabetes, Hypertension**
- B. Twins, Gestational diabetes, Polyhydramnios**
- C. Preterm labor, Obesity, Dehydration**
- D. Low birth weight, Fetal infections, Genetic disorders**

Large for Gestational Age (LGA) status can occur due to several factors, particularly maternal health and pregnancy conditions. Among those factors, gestational diabetes is a significant contributor, as it can lead to higher levels of glucose in the mother's bloodstream, which in turn can result in the fetus growing larger than average due to excess nutrient availability. The presence of twins generally doesn't lead to LGA in the way a single fetus might, as twin pregnancies often result in smaller individual birth weights due to shared resources. However, in the context of the question, the presence of gestational diabetes is a key factor that increases the size of one or both twins significantly when present. Polyhydramnios, an excess of amniotic fluid, can also be associated with LGA, often indicating conditions such as gestational diabetes or fetal anomalies that can contribute to increased fetal size. Therefore, the combination of gestational diabetes and polyhydramnios makes a strong case for why this answer is correct in identifying causes of LGA status and emphasizes the role of maternal conditions in fetal growth. The other answer choices include conditions that do not typically lead to LGA. For example, preterm labor is often related to low birth weight rather than large size.

7. What is the normal variation in fetal heart rate (FHR)?

- A. 10-20 BPM**
- B. 5-15 BPM**
- C. 15-25 BPM**
- D. 20-30 BPM**

In assessing the normal variation in fetal heart rate (FHR), a typical range is recognized as 5 to 15 beats per minute (BPM). This range indicates the degree of fluctuation in the fetal heart rate that occurs due to the autonomic nervous system's regulation in response to various stimuli. Variability is crucial as it reflects fetal oxygenation and well-being; adequate variability is often a sign that the fetus is healthy and that there are no signs of distress. The normal variation is an important indicator for healthcare providers during labor and delivery, helping them assess fetal health through continuous monitoring. Variability that falls within the established range is associated with strong fetal neurodevelopment and a well-functioning autonomic nervous system, which is essential for fetal health. Assessing variability is a standard practice in intrapartum care, making the understanding of this specific range critical for midwives and other healthcare practitioners involved in labor and birth.

8. What is erythema toxicum neonatorum?

- A. A swelling on the fetal scalp**
- B. A benign red papular rash on a baby's torso**
- C. A type of tongue tied condition**
- D. A defect in the anal opening**

Erythema toxicum neonatorum is indeed characterized as a benign red papular rash that typically appears on a newborn's torso, although it can also be found on other parts of the body. This condition is quite common in neonates and usually manifests within the first few days of life. The rash features small red bumps, often with a yellowish or white pustule at the center, and it usually resolves on its own without any treatment in a week or two. This condition arises during the transitional period after birth and is thought to be related to the maturation of the skin and the immune system. While it may look concerning to new parents, it is a natural occurrence and does not usually indicate any underlying health issues. In the context of the other options, the conditions described do not fit the definition of erythema toxicum neonatorum. Some describe localized issues or anatomical concerns rather than a benign rash that is typical in healthy newborns.

9. What are potential consequences of untreated syphilis in pregnancy?

- A. Increased energy levels**
- B. Fetal malformation or death**
- C. Improved maternal wellbeing**
- D. No impact on pregnancy**

Untreated syphilis during pregnancy can lead to severe adverse outcomes for both the mother and the fetus. One of the most serious consequences is fetal malformation or death, which occurs because the syphilis bacteria can cross the placenta and infect the fetus. This can result in complications that include miscarriage, stillbirth, preterm labor, and congenital syphilis, which can manifest in the baby as various health issues after birth. In contrast, increased energy levels, improved maternal wellbeing, and no impact on pregnancy do not reflect the reality of untreated syphilis. These aspects downplay the significant risks that syphilis poses to both the mother and the developing fetus. Therefore, the key concern regarding untreated syphilis in pregnancy lies in the potential for severe health complications, making the understanding of these risks vital for effective prenatal care and intervention.

10. In pediatric health assessments, what can the presence of acrocyanosis indicate?

- A. Possible infection**
- B. Respiratory distress**
- C. Normal physiological response**
- D. Jaundice status**

The presence of acrocyanosis in pediatric health assessments is typically considered a normal physiological response. Acrocyanosis refers to a bluish discoloration of the hands and feet, which is common in newborns, particularly during the first few days after birth. This condition occurs due to the maturation of the circulatory system, as the blood flow to peripheral tissues can be less efficient, especially when a newborn is exposed to cooler temperatures. In many cases, acrocyanosis will resolve on its own as the infant's body adjusts to life outside the womb, and it does not usually indicate an underlying health issue. The newborn's core body temperature is typically stable, and it's important for healthcare providers to differentiate between normal variations like acrocyanosis and more concerning symptoms. Other options, such as signs of possible infection, respiratory distress, or jaundice status, are associated with different clinical presentations and systems in the body that would likely require a more comprehensive assessment of the infant's overall health and behavior. Understanding these distinctions is crucial in pediatric healthcare to provide appropriate care and reassurance to families.

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://narmcpm.examzify.com>

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

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