

NORTH AMERICAN REGISTRY OF MIDWIVES (NARM) PRACTICE EXAM (SAMPLE) STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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THE FULL VERSION STUDY GUIDE**

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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. What is the cardinal sign of placenta previa?**
 - A. Painful contractions
 - B. Painless bleeding that is usually sudden in onset
 - C. Fetal heart rate abnormalities
 - D. Severe abdominal pain
- 2. What is the effect of prostaglandins on the cervix?**
 - A. Strengthens cervical tissue
 - B. Softens and ripens the cervix
 - C. Increases thickness of cervical mucus
 - D. Decreases cervical dilation
- 3. What does hemoptysis refer to?**
 - A. Passing out blood
 - B. Throwing up blood
 - C. Coughing up a clear liquid
 - D. Experiencing chest pain
- 4. What hemoglobin level indicates anemia in a pregnant woman?**
 - A. Less than 11.0 g per 100 mL
 - B. Less than 10.0 g per 100 mL
 - C. Less than 8.0 g per 100 mL
 - D. Less than 12.0 g per 100 mL
- 5. What is the most prevalent sexually transmitted disease in the United States?**
 - A. Gonorrhea
 - B. Chlamydia
 - C. Syphilis
 - D. Human Papillomavirus (HPV)

- 6. What are the notable signs and symptoms of amnionitis and chorioamnionitis?**
- A. Maternal fever, maternal tachycardia, fetal bradycardia
 - B. Maternal hypotension, fetal tachycardia, tender abdomen
 - C. Maternal fever, maternal tachycardia, fetal tachycardia
 - D. Maternal chills, fetal bradycardia, elevated white blood cell count
- 7. How long should a diaphragm be left in after intercourse to maximize effectiveness?**
- A. 1 hour
 - B. 3 hours
 - C. 6 hours
 - D. 12 hours
- 8. What is the significance of a reactive fetal heart rate pattern during a non-stress test?**
- A. Indicates fetal distress
 - B. Suggests adequate oxygenation
 - C. Shows potential developmental issues
 - D. Equates to fetal movements only
- 9. Can breastfeeding women safely use Depo Provera injections for contraception?**
- A. Yes
 - B. No
 - C. Only after six weeks
 - D. Only on doctor's advice
- 10. Which of the following infections is NOT usually transmitted sexually?**
- A. Candidiasis
 - B. Trichomoniasis
 - C. Gonorrhea
 - D. Chlamydia

Answers

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

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Explanations

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1. What is the cardinal sign of placenta previa?

- A. Painful contractions
- B. Painless bleeding that is usually sudden in onset**
- C. Fetal heart rate abnormalities
- D. Severe abdominal pain

The cardinal sign of placenta previa is characterized by painless bleeding that typically occurs suddenly. This condition arises when the placenta partially or completely covers the cervix, which can lead to bleeding as the pregnancy progresses, particularly in the later stages. In many cases, this bleeding does not come with the typical pain associated with other conditions, making it a distinctive feature of placenta previa. The absence of pain helps differentiate it from other potential causes of bleeding during pregnancy, such as placental abruption, where pain is usually present. Therefore, recognizing this painless bleeding is crucial for prompt diagnosis and management, as it can pose significant risks to both the mother and fetus if not appropriately addressed.

2. What is the effect of prostaglandins on the cervix?

- A. Strengthens cervical tissue
- B. Softens and ripens the cervix**
- C. Increases thickness of cervical mucus
- D. Decreases cervical dilation

Prostaglandins play a crucial role in preparing the cervix for labor. Their primary effect is to soften and ripen the cervix, which involves various physiological changes. When prostaglandins are released, they help to increase the hydration of cervical tissue, leading to its softening. This is vital for cervical effacement (thinning) and dilation (opening), making it easier for the fetus to pass through the birth canal during labor. The process of cervical ripening is one of the key steps that facilitate the onset of labor, and is often a target of medical interventions when induction is necessary. The other options highlight different aspects of cervical physiology but do not accurately reflect the specific action of prostaglandins. For example, strengthening cervical tissue or increasing its thickness would not facilitate labor, while a decrease in cervical dilation would counteract the natural progression toward childbirth. Thus, the effect of prostaglandins on the cervix is correctly identified as softening and ripening, which is essential for labor to commence effectively.

3. What does hemoptysis refer to?

- A. Passing out blood
- B. Throwing up blood**
- C. Coughing up a clear liquid
- D. Experiencing chest pain

Hemoptysis specifically refers to the act of coughing up blood from the respiratory tract, which aligns with the definition provided in the context of the question. This condition can occur due to various underlying health issues, such as infections, tumors, or injuries in the lungs or airways. Recognizing hemoptysis is crucial in clinical practice as it may indicate serious health problems that require immediate attention. The other options describe different medical situations: passing out blood could refer to a range of bleeding issues, throwing up blood is known as hematemesis, and experiencing chest pain is a symptom that could arise from many conditions but is not related to coughing up blood.

4. What hemoglobin level indicates anemia in a pregnant woman?

- A. Less than 11.0 g per 100 mL**
- B. Less than 10.0 g per 100 mL
- C. Less than 8.0 g per 100 mL
- D. Less than 12.0 g per 100 mL

A hemoglobin level of less than 11.0 g per 100 mL is used as a standard threshold to indicate anemia in pregnant women. During pregnancy, a woman's blood volume increases significantly, which often leads to hemodilution. This physiological change can cause a decrease in hemoglobin concentration, making it essential to use the adjusted reference levels specific to this condition. Anemia in pregnancy can adversely affect both maternal health and fetal development, so identifying and managing it is crucial. The threshold of 11 g/dL specifically accounts for the changes in blood volume during pregnancy, making it the appropriate cut-off for assessing anemia in this population. Other levels indicated in different choices are not recognized as the standard for diagnosing anemia in pregnant women within the established medical guidelines.

5. What is the most prevalent sexually transmitted disease in the United States?

- A. Gonorrhea
- B. Chlamydia
- C. Syphilis
- D. Human Papillomavirus (HPV)**

HPV is the most prevalent sexually transmitted infection in the United States. This happens because many HPV infections are asymptomatic, so people can carry and transmit the virus without knowing it. With over 100 types and infections that can last for years, a large number of individuals are living with HPV at any given time, which raises its overall prevalence above other STIs. While vaccines protect against several common and high risk strains, vaccination hasn't eliminated HPV, and routine screening is not universally used for everyone, especially men. In contrast, the other infections, while common and important to screen for, have fewer people currently infected at any moment, which is why HPV remains the most prevalent.

6. What are the notable signs and symptoms of amnionitis and chorioamnionitis?

- A. Maternal fever, maternal tachycardia, fetal bradycardia
- B. Maternal hypotension, fetal tachycardia, tender abdomen
- C. Maternal fever, maternal tachycardia, fetal tachycardia**
- D. Maternal chills, fetal bradycardia, elevated white blood cell count

Amnionitis and chorioamnionitis are infections of the amniotic fluid and membranes surrounding the fetus, which can pose serious risks to both the mother and baby. The notable signs and symptoms are characterized by an elevated maternal temperature, indicating fever, which often suggests an infectious process. Maternal tachycardia, or increased heart rate, is also a common response as the body attempts to fight off the infection and can be indicative of systemic involvement. Additionally, fetal tachycardia can occur due to this maternal infection response, reflecting the fetus's physiological reaction to stress or infection. When the mother has a fever and tachycardia, it can translate to a similar stress response in the fetus, which is why monitoring fetal heart rate is essential in these cases. The combination of these symptoms—maternal fever, maternal tachycardia, and fetal tachycardia—forms the clear clinical picture associated with amnionitis and chorioamnionitis, highlighting the importance of recognizing these signs for timely medical intervention and management.

7. How long should a diaphragm be left in after intercourse to maximize effectiveness?

- A. 1 hour
- B. 3 hours
- C. 6 hours**
- D. 12 hours

A diaphragm should ideally be left in place for at least 6 hours after intercourse to maximize its effectiveness as a method of contraception. This duration is critical because it allows sufficient time for the sperm to be immobilized by the spermicide that is typically used with the diaphragm. If removed too soon, the sperm may still have the opportunity to travel past the diaphragm and lead to fertilization. The recommendation to leave the diaphragm in for 6 hours balances practicality with effectiveness. Leaving it in for shorter periods, such as 1 hour or 3 hours, may not provide adequate time for the contraceptive barrier to complete its work. On the other hand, keeping it in for more than 12 hours does not increase effectiveness and might increase the risk of urinary tract infections or irritation. Understanding this timing helps users plan their contraceptive methods more effectively, ensuring optimal protection against unintended pregnancy.

8. What is the significance of a reactive fetal heart rate pattern during a non-stress test?

- A. Indicates fetal distress
- B. Suggests adequate oxygenation**
- C. Shows potential developmental issues
- D. Equates to fetal movements only

A reactive fetal heart rate pattern during a non-stress test is significant because it suggests adequate oxygenation and overall fetal well-being. This pattern is characterized by an increase in the fetal heart rate in response to fetal movements, demonstrating that the fetus can appropriately respond to stimuli, which is an important indicator of healthy cardiovascular function and oxygen supply. When the fetus is well-oxygenated, it exhibits a healthy heart rate variability and accelerations in heart rate corresponding to movements. These responses reflect normal neurological function and indicate that the fetal environment is supportive. In contrast, a non-reactive pattern might raise concerns about potential distress or insufficient oxygenation, leading to further evaluation. Thus, recognizing a reactive pattern is crucial in prenatal assessments as it confirms that the fetus is thriving.

9. Can breastfeeding women safely use Depo Provera injections for contraception?

- A. Yes**
- B. No
- C. Only after six weeks
- D. Only on doctor's advice

Breastfeeding women can safely use Depo Provera injections for contraception, as confirmed by various health organizations. The active ingredient in Depo Provera, medroxyprogesterone acetate, does not have a negative impact on milk production or infant growth and development. Studies indicate that it is a safe option for postpartum women who are breastfeeding, providing effective contraception without compromising breastfeeding. In addition, Depo Provera offers convenience with its once every three months administration, making it a suitable choice for many new mothers who may find daily contraceptive methods challenging. It's always advisable for women to consult with their healthcare provider to ensure that it aligns with their health needs, but the foundational evidence supports the safety of Depo Provera for breastfeeding mothers.

10. Which of the following infections is NOT usually transmitted sexually?

A. Candidiasis

B. Trichomoniasis

C. Gonorrhea

D. Chlamydia

Candidiasis is primarily caused by an overgrowth of the yeast Candida, which can naturally exist in the body, particularly in warm and moist areas. It is not typically classified as a sexually transmitted infection (STI) because it does not rely on sexual contact for transmission; rather, it can occur due to various factors such as antibiotic use, hormonal changes, or a weakened immune system. While sexual activity may influence the occurrence of Candida infections, it is not a primary transmission route like it is for Trichomoniasis, Gonorrhea, and Chlamydia, which are all definitively considered sexually transmitted infections.

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://narm.examzify.com>

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

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