

Relias Nursing Care of Patient with Obstetric (OB) & Postpartum Hemorrhage (PPH) Assessment 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

- 1. What condition often contributes to secondary PPH?**
 - A. Improper maternal nutrition**
 - B. Retained products of conception**
 - C. Excessive lactation**
 - D. Normal blood loss during delivery**
- 2. Which intervention should not be performed before other assessments in the case of postpartum hemorrhage?**
 - A. Placing vaginal packing.**
 - B. Fundal massage.**
 - C. Evaluating vital signs.**
 - D. Notifying the provider.**
- 3. What is a common indication for using medications in PPH management?**
 - A. To treat infections post-delivery**
 - B. To promote uterine contraction and reduce bleeding**
 - C. To manage patient anxiety**
 - D. To improve mother-infant bonding**
- 4. In what circumstances might a nurse recommend a CT scan in relation to postpartum hemorrhage (PPH)?**
 - A. To evaluate for internal bleeding or trauma if PPH is unusual or severe**
 - B. To assess for uterine involution**
 - C. To evaluate for placental position**
 - D. To confirm effective fluid replacement**
- 5. Which factor is critical for a nurse to monitor during the immediate recovery period after PPH?**
 - A. Patients' dietary intake**
 - B. Monitoring for signs of shock and overall hemodynamic status**
 - C. Setting goals for future pregnancies**
 - D. Normalizing emotional responses**

- 6. What is a potential complication of untreated retained placenta?**
- A. Ovarian cysts**
 - B. Severe hemorrhage and infection**
 - C. Neuropathy**
 - D. Postpartum anxiety**
- 7. What role does uterine massage play in managing PPH?**
- A. It increases the risk of hemorrhage**
 - B. It helps to stimulate uterine contractions**
 - C. It reduces the need for transfusions**
 - D. It aids in pain management**
- 8. What nursing interventions are important when managing a patient with PPH?**
- A. Encouraging oral intake of solids**
 - B. Monitoring vital signs and administering fluids**
 - C. Providing physical therapy**
 - D. Discharging the patient early**
- 9. What constitutes the "lethal triad" in hemorrhage management?**
- A. Hypothermia, acidosis, and coagulopathy.**
 - B. Hypotension, bradycardia, and fluid overload.**
 - C. Bleeding, diuresis, and hypotension.**
 - D. Acidosis, shock, and rapid heart rate.**
- 10. Which of the following is a risk factor for developing secondary PPH?**
- A. Normal delivery**
 - B. Retained placental fragments**
 - C. High blood pressure during pregnancy**
 - D. Complete uterus recovery**

Answers

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

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Explanations

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1. What condition often contributes to secondary PPH?

- A. Improper maternal nutrition**
- B. Retained products of conception**
- C. Excessive lactation**
- D. Normal blood loss during delivery**

Retained products of conception are a significant contributor to secondary postpartum hemorrhage (PPH). This condition occurs when placental or fetal tissue remains in the uterus after delivery, which can cause the uterus to fail to contract properly. As a result, the retained tissue can lead to ongoing bleeding, often occurring more than 24 hours after delivery, and sometimes as late as six weeks postpartum. Proper uterine contraction is essential for hemostasis, and any retained tissue can disrupt this process. The presence of these products can also increase the risk of infection, further complicating the situation and leading to increased bleeding. Understanding the implications of retained products of conception helps healthcare providers monitor for signs of secondary PPH and intervene appropriately.

2. Which intervention should not be performed before other assessments in the case of postpartum hemorrhage?

- A. Placing vaginal packing.**
- B. Fundal massage.**
- C. Evaluating vital signs.**
- D. Notifying the provider.**

In the context of managing postpartum hemorrhage, it is essential to prioritize interventions based on their effectiveness and the urgency of the situation. Placing vaginal packing should be considered a subsequent intervention after other critical assessments and actions have been taken. The primary focus during an active postpartum hemorrhage is to assess the patient's overall condition, which includes evaluating vital signs, performing fundal massage, and notifying the provider promptly. Vital signs provide crucial information about the patient's hemodynamic status, enabling healthcare providers to recognize the severity of the hemorrhage and the need for immediate interventions, such as volume resuscitation. Fundal massage is another vital step that directly addresses uterine atony, one of the most common causes of postpartum hemorrhage. This intervention helps stimulate uterine contractions, which can reduce bleeding. By first ensuring that vital signs are stable and addressing any uterine atony via fundal massage, the healthcare provider can gather important data and take immediate measures to manage the hemorrhage effectively. Vaginal packing might be necessary in some cases, but it should not take precedence over these other critical assessments and interventions that can directly affect the patient's outcome. Hence, placing vaginal packing is not the initial action to take in the face of postpartum hemorrhage.

3. What is a common indication for using medications in PPH management?

- A. To treat infections post-delivery**
- B. To promote uterine contraction and reduce bleeding**
- C. To manage patient anxiety**
- D. To improve mother-infant bonding**

In the management of postpartum hemorrhage (PPH), a primary indication for using medications is to promote uterine contraction and reduce bleeding. After delivery, it is crucial to ensure that the uterus effectively contracts to minimize blood loss. Medications such as oxytocin are often administered for this purpose, as they help stimulate uterine contractions. When the uterus contracts adequately, it compresses the blood vessels at the placental site, thereby reducing the risk of excessive bleeding. This intervention is vital for the safety of the mother, as uncontrolled PPH can lead to severe complications, including shock or even death. While treating infections, managing anxiety, and improving mother-infant bonding are important considerations in postpartum care, they are not directly related to the immediate management of PPH. The focus in PPH is centered on addressing the underlying cause of the hemorrhage and facilitating the physiological processes that help control bleeding.

4. In what circumstances might a nurse recommend a CT scan in relation to postpartum hemorrhage (PPH)?

- A. To evaluate for internal bleeding or trauma if PPH is unusual or severe**
- B. To assess for uterine involution**
- C. To evaluate for placental position**
- D. To confirm effective fluid replacement**

Recommending a CT scan in the context of postpartum hemorrhage (PPH) is primarily indicated when there is a suspicion of internal bleeding or trauma that is unusual or severe. This imaging modality allows healthcare professionals to obtain detailed cross-sectional images of the abdomen and pelvis to investigate potential sources of hemorrhage that are not apparent through standard clinical assessments. In cases where the amount of bleeding is significant or the cause cannot be quickly identified, a CT scan can help determine if there are conditions such as lacerations, hematomas, or other complications that could lead to further blood loss. Other options do not necessitate a CT scan; for example, assessing uterine involution and placental position can typically be done through ultrasonography or physical examination. A CT scan is not the standard approach for monitoring fluid replacement either, as clinical assessment and laboratory values are usually sufficient to evaluate fluid status and recovery in these instances. Thus, the correct response focuses on the use of CT scanning to ensure accurate diagnosis and management of potentially life-threatening conditions associated with PPH.

5. Which factor is critical for a nurse to monitor during the immediate recovery period after PPH?

A. Patients' dietary intake

B. Monitoring for signs of shock and overall hemodynamic status

C. Setting goals for future pregnancies

D. Normalizing emotional responses

Monitoring for signs of shock and overall hemodynamic status is critical during the immediate recovery period after postpartum hemorrhage (PPH) because PPH can lead to significant blood loss and a subsequent decrease in circulating blood volume. This can result in shock, characterized by symptoms such as tachycardia, hypotension, and altered mental status. It is vital for the nurse to assess vital signs frequently, evaluate the patient for any signs of continued bleeding, and monitor laboratory values such as hemoglobin and hematocrit to detect any deterioration in the patient's condition. Providing timely interventions can prevent further complications and promote recovery, making this monitoring an essential responsibility of the nursing team following PPH.

6. What is a potential complication of untreated retained placenta?

A. Ovarian cysts

B. Severe hemorrhage and infection

C. Neuropathy

D. Postpartum anxiety

Retained placenta refers to the condition where the placenta or parts of it remain in the uterus after childbirth. If this situation is untreated, it can lead to serious complications, particularly severe hemorrhage and infection. Severe hemorrhage occurs due to the uterus's inability to contract effectively when the placenta is not expelled. This can result in significant blood loss, leading to postpartum hemorrhage, which is a critical emergency situation in the postpartum period. Furthermore, the retained tissue can serve as a medium for bacterial growth, increasing the risk of uterine infection, commonly known as endometritis. The combination of these factors highlights why prompt identification and management of retained placenta are crucial for maternal health and safety. In contrast, the other options mentioned do not directly relate to the immediate physical risks posed by untreated retained placenta, making them less relevant in this context.

7. What role does uterine massage play in managing PPH?

- A. It increases the risk of hemorrhage
- B. It helps to stimulate uterine contractions**
- C. It reduces the need for transfusions
- D. It aids in pain management

Uterine massage plays a significant role in the management of postpartum hemorrhage (PPH) by helping to stimulate uterine contractions. After childbirth, the uterus needs to contract effectively to reduce blood loss and minimize the risk of hemorrhage. Uterine atony, which is the failure of the uterus to contract, is one of the leading causes of PPH. By performing a massage on the uterus externally, healthcare providers encourage it to contract and clamp down on blood vessels that may be bleeding, thereby helping to prevent excessive bleeding. This technique can be particularly effective in the immediate postpartum period when quick intervention is necessary to stabilize the mother and promote uterine tone. While enhancing uterine contractions is its primary role, uterine massage may indirectly affect other areas, such as reducing the need for transfusions, as effective contractions can diminish blood loss. However, the primary mechanism through which uterine massage is beneficial in the context of PPH is its stimulation of uterine contractions.

8. What nursing interventions are important when managing a patient with PPH?

- A. Encouraging oral intake of solids
- B. Monitoring vital signs and administering fluids**
- C. Providing physical therapy
- D. Discharging the patient early

Monitoring vital signs and administering fluids are crucial nursing interventions when managing a patient with postpartum hemorrhage (PPH). This condition can lead to significant blood loss, which poses a risk of hypovolemic shock and can rapidly affect a patient's hemodynamic stability. By regularly checking vital signs, such as heart rate, blood pressure, and respiratory rate, the healthcare team can quickly identify changes that indicate worsening status and manage potential complications effectively. Administering intravenous fluids is essential to restore and maintain blood volume, ensuring adequate perfusion to vital organs. It helps counteract the effects of blood loss, supports blood pressure, and can stabilize the patient until further treatment, such as blood transfusions, is initiated if necessary. These interventions are fundamental to ensuring the safety and stability of the patient experiencing PPH, allowing healthcare providers to manage the situation with appropriate urgency. The other options, while they may have their place in overall patient care, do not directly address the immediate needs of a patient experiencing PPH. For instance, encouraging oral intake of solids is not appropriate in an acute situation where intravenous access and monitoring are prioritized. Providing physical therapy also does not correlate with the urgent medical needs during a hemorrhagic crisis, and discharging the patient early

9. What constitutes the "lethal triad" in hemorrhage management?

A. Hypothermia, acidosis, and coagulopathy.

B. Hypotension, bradycardia, and fluid overload.

C. Bleeding, diuresis, and hypotension.

D. Acidosis, shock, and rapid heart rate.

The "lethal triad" in hemorrhage management is composed of hypothermia, acidosis, and coagulopathy. Each of these components contributes significantly to the body's inability to effectively manage and respond to severe blood loss. Hypothermia can hinder the body's normal physiological responses, impairing clotting mechanisms and worsening coagulopathy. When a patient loses significant amounts of blood, they can become exposed to lower temperatures, particularly in a medical setting where active interventions are underway. This drop in temperature can exacerbate coagulation issues, leading to increased bleeding. Acidosis, particularly metabolic acidosis, occurs when the body undergoes significant stress due to blood loss, resulting in tissue hypoxia and the buildup of acid in the bloodstream. This condition further complicates coagulopathy, as the acid-base balance is critical for optimal enzyme function in the clotting cascade. Coagulopathy refers to the impaired ability to form clots, which is especially problematic during hemorrhage situations. As the body becomes more acidotic and potentially hypothermic, the clotting factors and platelets are less effective, leading to further difficulty in controlling bleeding. Together, these three conditions create a dangerous cycle that can lead to increased mortality if not addressed promptly and effectively in hemorrhage.

10. Which of the following is a risk factor for developing secondary PPH?

A. Normal delivery

B. Retained placental fragments

C. High blood pressure during pregnancy

D. Complete uterus recovery

Retained placental fragments are a significant risk factor for developing secondary postpartum hemorrhage (PPH). This condition can occur when pieces of the placenta remain in the uterus after childbirth, leading to continued bleeding and potential complications. The presence of these fragments can prevent the uterus from contracting effectively, which is essential for stopping the bleeding once the placenta has been delivered. In contrast, normal delivery typically does not have an inherent risk for secondary PPH, as it suggests that the delivery process was uncomplicated and the placenta was delivered correctly. High blood pressure during pregnancy may lead to other complications, but it is not directly identified as a major risk factor for secondary PPH. Complete recovery of the uterus would indicate that it is functioning properly and is less likely to contribute to complications like secondary PPH. Thus, retained placental fragments are recognized as a direct cause of this condition, making it the correct choice in identifying a risk factor for secondary PPH.

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://reliasnursingcareobpphassmt.examzify.com>

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