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Chapter 1

Maternity and Newborn Medications

1) A client diagnosed with vaginal candidiasis is instructed on self-care management techniques and proper administration of the prescribed miconazole vaginal cream. Which statement by the client indicates that **further teaching** is needed?

1. "Each time I use the bathroom, I will wipe myself from the front to the back."
2. "I should choose loose-fitting cotton underwear instead of nylon undergarments."
3. "I will refrain from having sex until my partner is also tested and treated for the infection."
4. "Prior to going to bed at night, I will apply miconazole cream using the vaginal applicator."

✓ Answer: 3

Candida albicans (yeast) can colonize and cause infections of the vulvovaginal region. **Vaginal candidiasis** often causes itching and painful urination due to urine stinging the inflamed areas of the vulva. Assessment shows a **thick, white, curd-like** vaginal discharge and reddened vulvar lesions.

Miconazole (Monistat), an antifungal cream commonly prescribed to treat vaginal candidiasis, is **inserted high into the vagina** using an applicator. It is best applied at **bedtime** so that it will remain in the vagina for an extended period (**Option 4**). Sexual intercourse is avoided until the inflammation is resolved, typically for the duration of treatment, approximately 3-7 days (**Option 3**). However, sexual activity is not a significant cause of infection or reinfection of candida, and partner evaluation is not needed. Trichomoniasis, syphilis, gonorrhea, and HIV are mainly sexually transmitted; therefore, partners should be evaluated and treated.

Other teaching points for this client should include:

- Ensuring proper hygiene of the perineum - cleansing from anterior to posterior (front to back) to prevent accidental introduction of fecal organisms (**Option 1**)
- Wearing loosely fitted cotton underwear and avoiding synthetic undergarments to promote ventilation, decrease friction, and reduce moisture (**Option 2**)
- Refraining from douching, which can introduce organisms higher up into the vaginal canal and cervix

Educational objective:

Miconazole cream is commonly prescribed to treat vaginal candidiasis. Miconazole is best applied at bedtime so that it will remain in the vagina longer. Clients being treated for vaginal candidiasis should wear loose-fitting cotton underwear and refrain from sexual intercourse for the duration of treatment.

2) The registered nurse and practical nurse are conducting a workshop on contraceptive methods for a group of outpatient clients. Which instructions should the nurses include when discussing combined estrogen-progestin oral contraceptives? **Select all that apply.**

1. Consult the health care provider (HCP) if you experience leg pain or swelling
2. Discontinue contraceptives if you experience spotting between menses
3. Do not smoke while taking combined contraceptives
4. Immediately report any breast tenderness to the HCP
5. Seek immediate medical treatment if you experience vision loss

✓ Answer: 1, 3, 5

ACHES with contraceptive use		
ACHES	Symptom	Potential etiology
A	• Abdominal pain	• Ischemic bowel
C	• Chest pain	• Pulmonary embolism or myocardial infarction
H	• Headaches	• Stroke
E	• Eye problems	• Retinal blood vessel ischemia
S	• Severe leg pain	• Deep venous thromboembolism

The use of hormonal contraception (ie, estrogen with or without progestin) places women at a **2- to 4-fold increased risk** for developing **blood clots** due to resulting hypercoagulability. Hormone levels vary among contraceptives, and higher levels of hormone content correlate to an increased risk of adverse thrombotic events (eg, stroke, myocardial infarction). Clients who are prescribed oral contraceptive pills (OCPs) containing estrogen should be educated on potential warning signs (eg, chest pain, vision loss, severe leg pain) (**Options 1 and 5**). In addition, clients should be instructed **not to smoke** while taking combined OCPs due to an increased risk of blood clots (**Option 3**).

(**Option 2**) Irregular bleeding and spotting between menses are common side effects of combined OCPs. These side effects may be bothersome but are not serious and may improve within 3 months of initiation. If the client cannot tolerate side effects, a different OCP may be considered.

(Option 4) Clients should be counseled that breast tenderness is a common side effect of combined OCPs and does not warrant emergent reporting to the health care provider.

Educational objective:

Clients who are prescribed oral estrogen contraceptives (with or without progestin) have an increased risk for developing blood clots. Clients should be educated on warning signs to report to the health care provider (eg, severe leg pain, vision loss) versus common side effects (eg, breast tenderness, spotting).

3) The nurse is conducting a hospital admission history and assessment. The client informs the nurse of taking the herb black cohosh (*Actaea racemosa*) daily. What is the **best** nursing response?

- 1. Ask the client about menopausal symptoms*
- 2. Ask the health care provider to write a prescription for use of the herb during hospitalization*
- 3. Contact the pharmacy to see if the herb interacts with the client's medications*
- 4. Tell the client to stop taking it*

✓ **Answer: 3**

The nurse should follow up regarding the quantity of the herb and how it is used. Black cohosh is used by some clients for menopausal hot flashes. The main side effects are thickening of the uterine lining and potential liver toxicity. Herbs can cause harmful reactions when taken in combination with other drugs. It is most important to determine that an herb does not interfere with other medications. Herbal therapy is usually stopped 2-3 weeks before any surgery.

(Option 1) Although black cohosh is typically used for menopausal symptoms, this is not the most important issue.