FEUER NURSING REVIEW

# WOMEN'S HEALTH & MATERNAL/NEWBORN NURSING STUDY BOOK NCLEX®-RN/LPN

2023 EDITION

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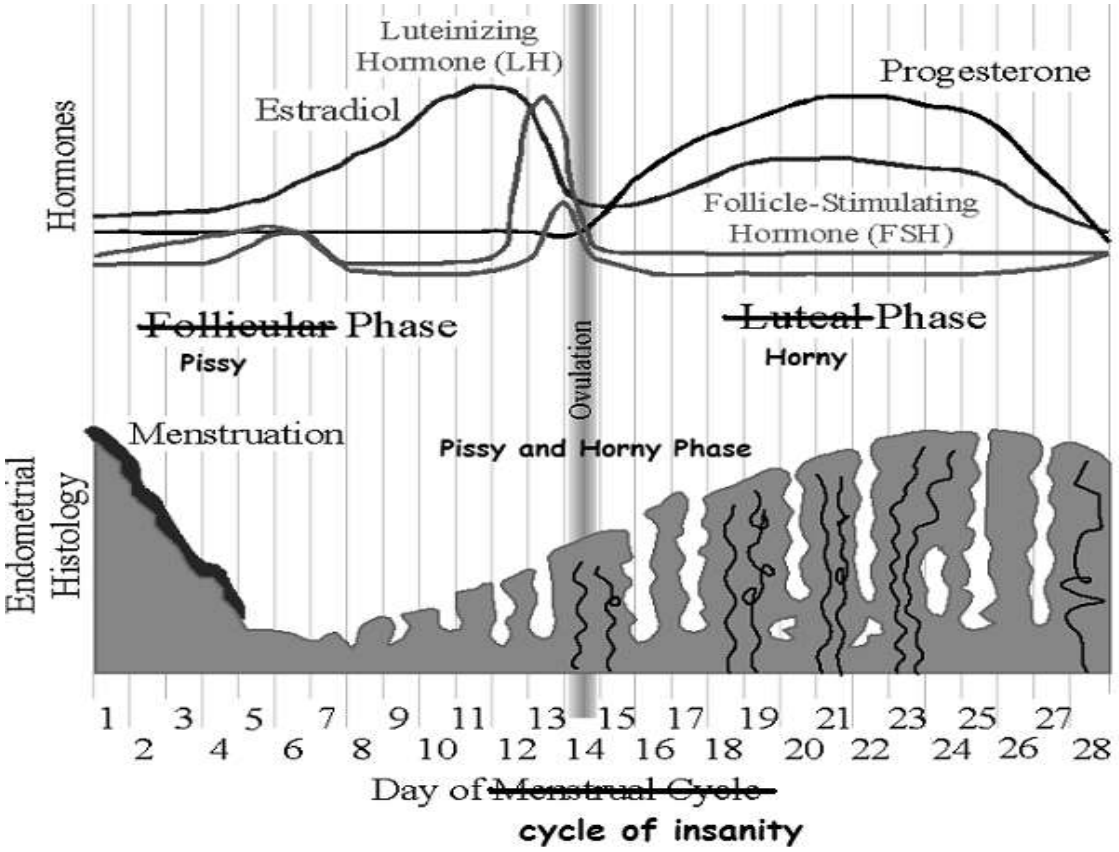
# I. THE MENSTRUAL CYCLE

- Series of changes a woman's body goes through to prepare for a pregnancy
    - Follicular Phase - day 1 to 14, incorporating menstrual cycle (menses) and proliferative phase (beginning of endometrial thickening).
    - Luteal Phase - day 15 to 28 of cycle and includes the secretory phase (endometrium secretes glycogen to prepare for implantation of fertilized ovum). This phase is always 12 to 14 days long.
    - Ischemic Phase - beginning of endometrial breakdown after no fertilization.

- Hormones estrogen and progesterone play the biggest roles in how the uterus changes in each cycle.
- During each cycle the brain's hypothalamus and pituitary gland send signals back and forth with your ovaries. These signals get the uterus ready for a pregnancy.
- An average cycle is 28 days- it is also normal to have a shorter or longer cycle.
- Pregnancy is the most common cause of a missed period.



# 1 FAMILY PLANNING AND CONTRACEPTION

## Goal of Family P lanning

- Assist the client with reproductive decision making; enable client control to prevent pregnancy, limit the number of children, space time between children, and /or voluntarily interrupt pregnancy as desired.

- Legal issues related to family planning and contraception – laws regarding provision of contraceptive care for minors without parental consent, consent from client's spouse for sterilization and voluntary interruption of pregnancy.

- Due to potentially serious complications associated with many contraceptive methods, informed consent is obtained; document information provided and client's understanding of information.

## Family Planning and Contraception Memory Aid

B is for Benefits: information about advantages
R is for Risks: information about disadvantages
A is for Alternatives: information about other available methods
I is for Inquiries: opportunity for client to ask questions
D is for Decisions: opportunity for client to make or change a decision
E is for Explanations: information about selected method and its use
D is for Documentation: information given and client understanding

**Methods of Contraception**

| TYPE | NURSING CONSIDERATIONS |
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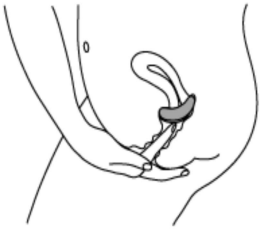
| **Abstinence** (Celibacy) | Avoiding sexual intercourse. 100% protection from STI's and pregnancy |
| **Barrier Methods provide a physical or chemical barrier to block sperm from entering the cervix. Methods include condoms, diaphragm, cervical cap and vaginal sponge.** | |
|  <br>**Diaphragm** | - A round, flexible spring covered with a domelike latex rubber cup (or silicone if latex allergy); a spermicide is used to coat the concave side of the diaphragm before it is inserted deep into the vagina.<br>- Client Teaching for Self Care:<br>o Must be fitted by a qualified health care provider and replaced annually<br>o Inspect for holes or tears by holding it up to a light source, or fill it with water and check for a leak<br>o Refit for weight gain or loss of 10 to 15 lbs and after childbirth<br>o Diaphragm may be inserted up to 4 hours before coitus and should be left in place for at least 6 hours after<br>o **Contraindications:** H/O toxic shock syndrome and UTI's |
| **Cervical Cap**<br>  <br>Cervical Cap | - Cervical Cap is much smaller than the diaphragm and fits more snugly over the cervix; held in place by suction.<br>- Cervical cap is very similar to the diaphragm. It is smaller and tends to be more difficult for women to insert and remove.<br>- The recommendation is to remove the cervical cap in 24 hours however, it may be left in place for 48 hours. |
| **Vaginal Sponge**<br>  | - Vaginal Sponge is a pillow – shaped soft, absorbent synthetic sponge containing a spermicide.<br>- Made with a concave or cupped area to one side, which is designed to fit over the cervix. It also has a loop to permit easy removal.<br>- The vaginal sponge is moistened with water prior to use to activate the spermicide. It is inserted into the vagina so that the cupped side is snugly against the cervical os.<br>- May be worn for up to 24 hours. Should be left in place for at least 6 hours after intercourse and then removed and discarded. |

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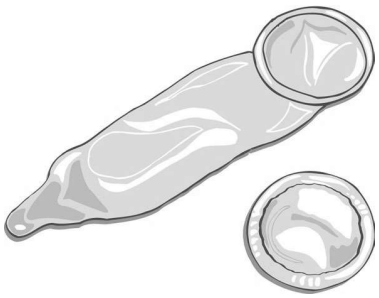
| **Male Condoms**<br>  | - A sheath made of latex, plastic, or natural membranes which is placed over the erect penis to collect semen.<br><br>- **Advantages:**<br>o Small, lightweight, disposable, and inexpensive<br>o Provides some protection against sexually transmitted infections.<br>o Requires no medical exam or supervision<br><br>- **Disadvantages:**<br>o Risk of breakage or displacement<br>o Possible perineal or vaginal irritation<br>o Some dulling of sensation<br>o Oil based lubricants can decrease condom's effectiveness<br>o Condoms are for single use only<br>o Penis must be erect before placing condom |
| **Female Condoms**<br>  | - A thin, polyurethane sheath with flexible rings at each end, which covers the cervix, lines vagina, and partially shields the perineum<br><br>- **Advantages :**<br>o May be inserted up to 8 hours before intercourse.<br>o Both partners are protected from STI'S during intercourse.<br>o Use of lubricants will not decrease effectiveness.<br><br>- **Disadvantages :**<br>o May twist or slip during intercourse.<br>o Initially, insertion may be difficult or awkward.<br>o High cost, noise produced with intercourse, or altered sensation may be a factor for some couples. |

| Hormonal Methods of Contraception | |
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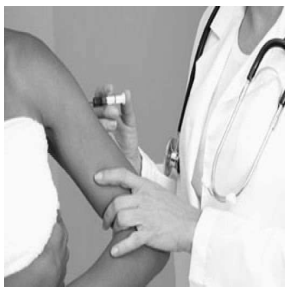
| **Depo Provera**<br>  | - Depo Provera – Medroxyprogesterone acetate is a long acting progestin that blocks LH hormone surge, suppresses ovulation and thickens cervical mucus to prevent penetration of sperm.<br>- **Advantages:**<br>o Almost 100 % effective. Long term (3 months) reliability without the estrogen related side effects of oral contraceptives.<br>o Safe for lactating women.<br>o Disadvantages:<br>o Injection must be repeated within 80-90 days to maintain effectiveness. (12 weeks)<br>o Clients with cardiovascular disorders or breast cancer are not candidates for use.<br>o Return of fertility may be delayed for up to one year after stopping method.<br>- **Adverse effects:** irregular bleeding, headaches, weight gain, depression, bone loss – Start on Calcium with Vitamin D<br>- 2 negative Pregnancy tests 2 weeks apart – no sex during those 2 weeks<br>- No protection against STI's |
| **NuvaRing**<br>  | - Low dose sustained release hormonal contraceptive (flexible ring)<br>- One size fits all<br>- Left in place for 3 weeks. Remove during week of menses<br>- **Advantages :**<br>o Exact position is not important to be effective.<br>o Does not need to be taken daily<br>o Due to the low and steady hormone delivery, the ring has fewer hormonal ups and downs<br>o It usually cannot be felt by you or your partner.<br>o It does not need to be fitted by a health care provider<br>o Can lead to regular, lighter, and shorter periods.<br>o Completely reversible – the ability to become pregnant returns quickly after stopping use.<br>o Does not interfere with having sex and can allow for more spontaneity.<br>- **Disadvantages :**<br>o Breast tenderness<br>o Headaches<br>o Weight gain or loss<br>o Nausea<br>o Changes in mood<br>o Breakthrough bleeding<br>o Increased vaginal discharge and vaginal irritation or infection<br>o A diaphragm, cervical cap or vaginal sponge cannot be used as a backup method when using the Nuvaring |

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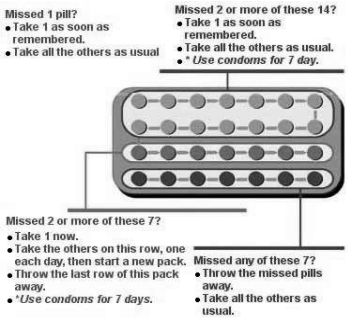
| **Combined Oral Contraceptives (COC)**<br>  <br> | - COC's or birth control pills act by inhibiting release of an ovum, blocking cyclical release of gonadotropin- releasing hormone, and changing cervical mucus.<br><br>- Typical combined oral contraceptives contain both estrogen and progestin and are available in 21 day & 28 day packages.<br><br>- Extended oral contraceptives (Seasonique, Seasonale) are 91 day regimens in which client takes active pills daily for 84 days, followed by inactive pills for 7 days, during which client has menses.<br><br>- Progestin- only pill (minipill) – contains progesterone only; does not allow endometrium to develop fully, so implantation will not take place.<br><br>- **Advantages:**<br>o Use of method is not directly related to act of sexual intercourse<br>o Menstrual periods are usually more regular and predictable; amount of menstrual flow and premenstrual symptoms are decreased<br>o Are safe throughout reproductive years for women who do not smoke<br>o Non-contraceptive benefits include-decreased risk of ectopic pregnancy, fibrocystic breast disease and ovarian and endometrial cancers; improvement of acne; and some protection against development of functional ovarian cysts.<br><br>- **Disadvantages:**<br>o Absolute contraindications for COC's - Coronary Artery Disease, thromboembolic disease<br>o Relative contraindications - migraines, hypertension, immobility for 4 weeks or more<br>o Effectiveness decreased if taken during use of barbiturates, phenytoin and antibiotics<br>o No protection against STI's |

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| **Emergency Contraception Plan B**<br>  | - Indicated when there is a concern about pregnancy because of unprotected intercourse or when a contraceptive method fails.<br>- Levonorgestrel, the only one currently available in the U.S., should be initiated as soon as possible.<br>- **Post-coital IUD –** insertion of a copper bearing IUD within 5 days of unprotected intercourse; mechanism of action is unknown but is thought to interfere with fertilization.<br>- No protection against STI's<br>- 98% effective if used within 72 hours of intercourse<br>- Common side effect: nausea<br>- 1 pill now then in 12 hours OR 2 pills together |

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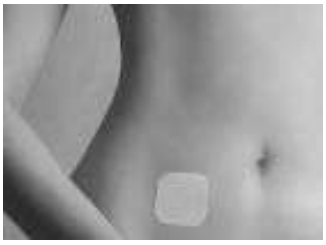
| **Transdermal Hormonal Contraception**<br>  | - Transdermal patch that slowly and continuously releases a combination of estrogen and progesterone, applied once a week for three weeks; 4th week patch free to allow for menstruation.<br>- Applied to abdomen, buttocks, upper outer arm, or truck (excluding breasts).<br>- Safe and effective as COC'S and has a better rate of user compliance.<br>- Failure rate < 1%<br>- No protection against STI's<br>- May cause skin irritation and may fall off and not be noticed<br>- Less effective in women > 200 lbs. |