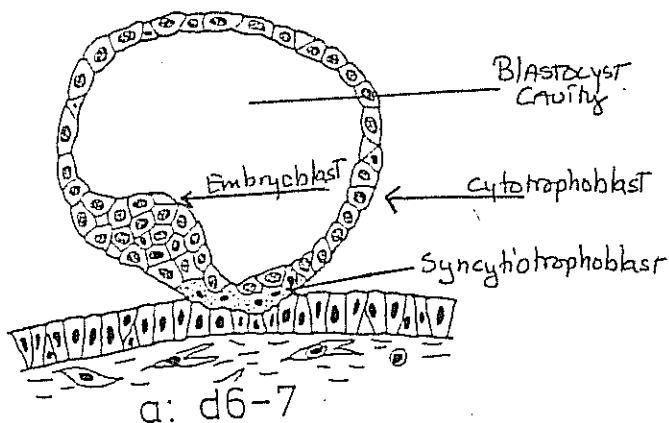
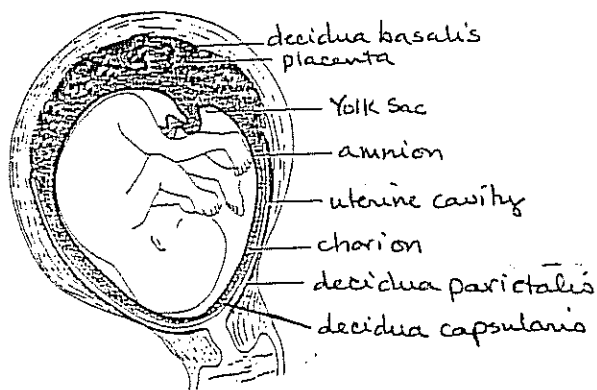


# Placenta Quiz Answers

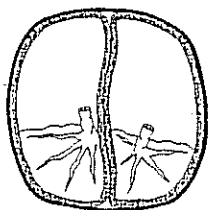
1. Label the following:



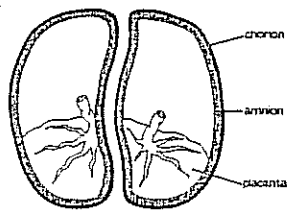
Blastocyst



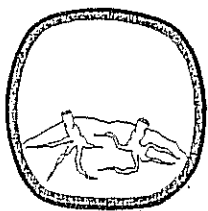
Uterus with placenta



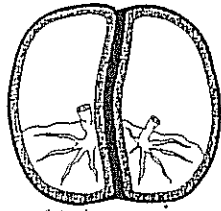
A. Di Amniotic  
Mono chorionic



B. Di Amniotic  
Di chorionic



C. Mono Amniotic  
Di chorionic



D. Di Amniotic  
Di chorionic

Twin placentas

which are monozygotic? A, C, D

which are dizygotic? B, D Placenta quiz answers page 1

2. LMP is July 16, 1996; what is the EDC?  
April 23, 1997

3. Define:

Immature - 500-1000 gram fetus; 20 to less than 28 weeks gestational age

Premature - 1000-2500 gram fetus; 28 up to 37 weeks gestational age

Preterm - 21-37 weeks gestational age

Term - at least 37 weeks gestational age

Postdates - at least 42 weeks gestational age

4. What are the components of the biophysical profile?

1) standard nonstress test, 2) fetal breathing movements, 3) gross fetal body movements, 4) fetal tone and 5) volume of amniotic fluid

5. Briefly describe:

First stage of labor - onset of true labor to complete (10 cm) cervical dilatation

Second stage of labor - from complete cervical dilatation to the birth of the baby

Third stage of labor - from birth of the baby to the delivery of the placenta

Fourth stage of labor - from birth of the placenta until the postpartum condition is stabilized

6. What are "dirty duncan" and "shiny schultz"?

**Methods of placental expulsion.** Dirty duncan - lower placental edge comes out first, with the maternal and fetal surfaces appearing together with membranes in *in-utero* position. Shiny schultz - the placenta comes out like an inverted umbrella, with the fetal surface first and the membranes trailing.

What is their significance? none

7. First trimester ends after 14 weeks gestation. Second trimester ends after 28 weeks gestation.

8. The conceptus is an embryo through 7-9 weeks gestation, after which it is considered a fetus.

9. Amnioinfusion is: **Infusion of saline into the uterus in response to variable decelerations of fetal heart rate during delivery**

Amnioinfusion may be a treatment for: Cord prolapse, cord compression, cord entrapment

# Placenta Quiz Answers

10. Define:

Couvellaire uterus - **Uteroplacental apoplexy; complication of abruptio placenta with extensive extravasation of blood into the myometrium**

Parturition - **Labor**

Dystocia - **Abnormal labor**

Tocolysis - **Drug therapy for preterm labor**

11. Match the following:

- |                           |                         |
|---------------------------|-------------------------|
| H. Polyhydramnios         | A. Short umbilical cord |
| L. Oligohydramnios        | B. Long umbilical cord  |
| I. Premature              | C. Villitis             |
| D. Postdates              | D. Meconium staining    |
| K. Incompetent cervix     | E. Abruptio placentae   |
| B. Nuchal cord            | F. Infarcts             |
| C. Maternal fever         | G. Circumvallate        |
| A. Fetal gastroschisis    | H. Chorioangioma        |
| M. Maternal diabetes      | I. Pale placenta        |
| F. Pre-eclampsia          | J. Bilobed placenta     |
| J. 1st trimester bleeding | K. Chorioamnionitis     |
| G. 2nd trimester bleeding | L. Amnion nodosum       |
| E. 3rd trimester bleeding | M. Small placenta       |

12. Which of the following is not a risk factor for premature rupture of membranes?

- a. Maternal cigarette smoking
- b. Maternal HIV infection**
- c. Trauma
- d. Chorioamnionitis
- e. Polyhydramnios

13. Which of the following is not associated with 2-vessel umbilical cord?

- a. Maternal cigarette smoking
- b. Alcohol use
- c. Maternal diabetes
- d. Ascending infection during early pregnancy**
- e. Oligohydramnios

14. Which of the following does not have a higher incidence in hypertensive states of pregnancy?

- a. Small placenta
- b. Circumvallate placenta
- c. Hydropic placenta**
- d. Infarcts
- e. Intervillous thrombi

15. With a clinical history of polyhydramnios in a twin pregnancy, you should rule out which of the following?

- a. 2-vessel umbilical cord
- b. Vascular anastomoses
- c. Acardiac twin
- d. Chorioangioma
- e. All of the above**

16. With a clinical history of fetal distress, it is important to rule out all except which of the following?

- a. Intervillous thrombi**
- b. Chorioamnionitis
- c. Meconium staining
- d. Infarcts
- e. Umbilical cord knot

17. Which of the following is not associated with maternal diabetes mellitus?

- a. Large placenta
- b. Small placenta
- c. Meconium staining**
- d. Infarcts
- e. Fetal stem artery thrombosis

18. Which of the following is true of amnion nodosum?

- a. Nodules are commonly seen on the reflected membranes, chorionic plate and umbilical cord
- b. Has other causes besides oligohydramnios
- c. Is due to vernix caseosa being physically rubbed into the amnion
- d. When present in twins, involves both amnionic sacs
- e. Nodules may be rubbed off**

19. With a clinical history of preterm labor, it is important to rule-out all except which of the following?

- a. Maternal floor calcification**
- b. Abruptio placentae
- c. Circumvallate placenta
- d. Chorioamnionitis
- e. Infarcts

# Placenta Quiz Answers

20. With a clinical history of intrauterine growth retardation, it is important to rule out all except which of the following?
- a. Chronic abruption, circumvallate placenta
  - b. Large placenta, chorioamnionitis**
  - c. SUA, short umbilical cord
  - d. Meconium, chorioamnionitis
  - e. Circumvallate placenta, increased number of septal cysts
21. Which 2 of the following are more common in a placenta from an Rh incompatible pregnancy?
- a. Increased number of septal cysts**
  - b. Chorioamnionitis
  - c. Intervillous thrombi**
  - d. Infarcts
  - e. Maternal floor infarction
22. Small placentas may be seen in all but which one of the following?
- a. Rh incompatibility**
  - b. Low maternal pregravid body weight
  - c. Maternal diabetes mellitus
  - d. Pre-eclampsia
  - e. Maternal alcohol use
23. There is a higher incidence of velamentous insertion of the umbilical cord with which of the following?
- a. Multifetal placentas
  - b. Maternal cigarette smoking
  - c. Advanced maternal age
  - d. Certain congenital anomalies
  - e. All of the above**
24. "Disruption and hemorrhage at the edge of the placenta with old laminated, brown, friable and loose to partly decomposed blood clot, that is focally green" classically describes which of the following?
- a. Meconium stained, fragmented placenta
  - b. Placenta accreta
  - c. Abruptio placenta
  - d. Placenta previa**
  - e. Placenta fenestrata
25. Vascular anastomoses are common in which of the following:
- a. Monoamniotic monochorionic placenta
  - b. Diamniotic monochorionic placenta**
  - c. Diamniotic dichorionic placenta
  - d. Monoamniotic monochorionic and diamniotic monochorionic placentas
  - e. Diamniotic monochorionic and diamniotic dichorionic placentas
26. Which of the following is true about umbilical cords?
- a. Length is determined by fetal activity**
  - b. Twist direction and twist severity is related to handedness
  - c. Infection is associated with lack of Wharton's jelly
  - d. Barber pole cord (calcification) is related to maternal floor calcification
  - e. Minimum cord length of 25 cm is necessary for vaginal delivery