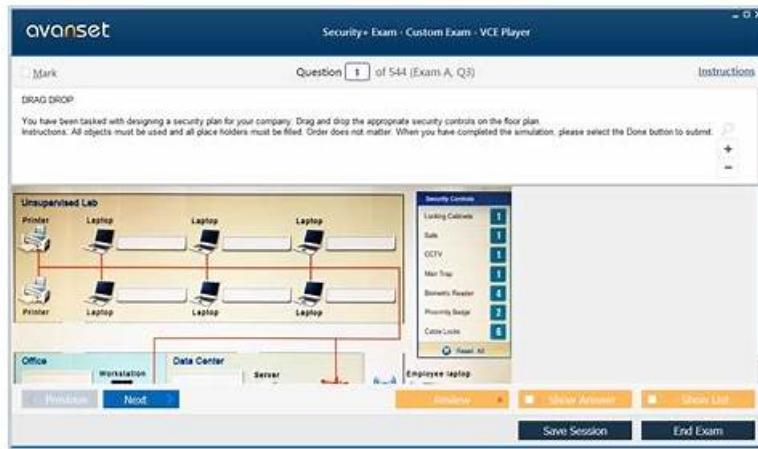


Fast Download Best EFM Vce & Leader in Qualification Exams & Excellent EFM: Certified - Electronic Fetal Monitoring



You can easily assess yourself with the help of our EFM practice software, as it records all your previous results for future use. You can easily judge whether you can pass Certified - Electronic Fetal Monitoring (EFM) on the first attempt or not, and if you don't, you can use this software to strengthen your preparation.

Our EFM study materials are willing to stand by your side and provide attentive service, and to meet the majority of customers, we sincerely recommend our EFM practice guide to all customers, for our rich experience and excellent service are more than you can imagine. Here are several advantages of EFM training guide for your reference: we have free demos for you to download before payment, and we offer one year free updates of our EFM exam questions after payment and so on.

>> **Best EFM Vce** <<

EFM Exam Pattern - Best EFM Preparation Materials

We believe that the best brands are those that go beyond expectations. They don't just do the job – they go deeper and become the fabric of our lives. Our product boosts many merits and functions. You can download and try out our EFM test question freely before the purchase. You can use our product immediately after you buy our product. We provide 3 versions for you to choose and you only need 20-30 hours to learn our EFM Training Materials and prepare the exam. The passing rate and the hit rate are both high.

NCC Certified - Electronic Fetal Monitoring Sample Questions (Q24-Q29):

NEW QUESTION # 24

A woman with hypertension at 38-weeks gestation has a biophysical profile. The result is 4/10 with decreased amniotic fluid volume. The next step should be to:

- A. Repeat the biophysical profile in 24 hours
- **B. Admit for delivery**
- C. Discharge home on bedrest

Answer: B

Explanation:

Comprehensive and Detailed Explanation From NCC-Aligned BPP Management Standards:

NCC, AWHONN, and maternal-fetal medicine guidelines state:

* A BPP score of 4/10 at term is abnormal.

* A low score indicates hypoxia-related CNS suppression.

* Oligohydramnios is an additional high-risk finding, especially in hypertension.

* At # 37 weeks, a BPP score of # 4/10 warrants immediate delivery.

Repeating the test is acceptable at preterm gestations (e.g., < 32-34 weeks), but not at 38 weeks.

Why the other answers are incorrect:

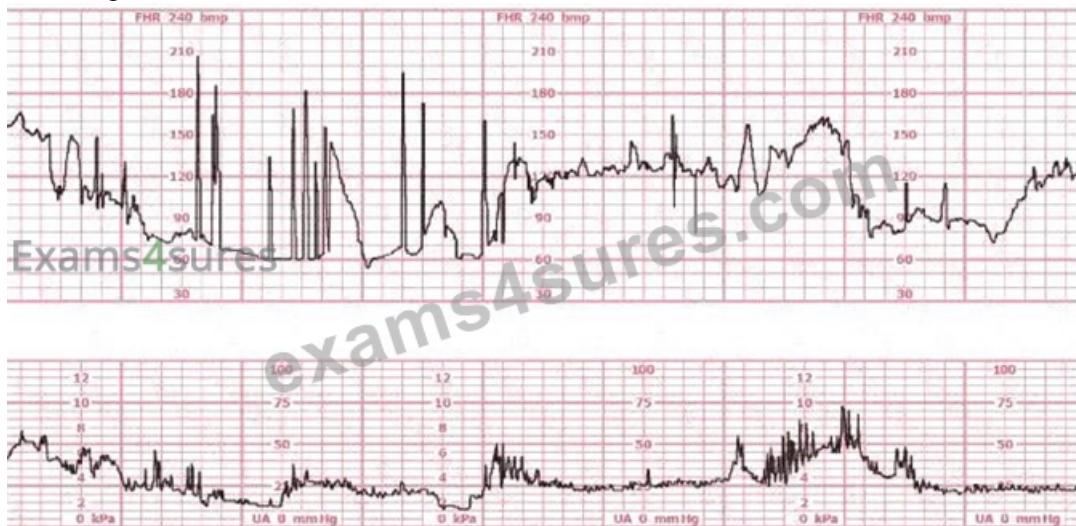
- * B. Discharge home - Contraindicated with abnormal BPP.
- * C. Repeat in 24 hours - Not recommended at term with a score of 4.

Correct answer: A. Admit for delivery

References:NCC C-EFM Candidate Guide; AWHONN FHMPP; Creasy & Resnik MFM; Simpson & Creehan; Menihan.

NEW QUESTION # 25

This tracing demonstrates:



- A. Bradycardia
- B. Category III tracing
- C. Prolonged deceleration

Answer: C

Explanation:

Comprehensive and Detailed Explanation From NCC-Aligned Sources:

A prolonged deceleration is defined by NICHD and NCC as:

- * A deceleration lasting #2 minutes but <10 minutes
- * Decrease in FHR of #15 bpm
- * Can occur with or without uterine contractions

This tracing shows:

- * A deep drop in FHR down to ~60-70 bpm
- * Duration lasting several minutes
- * Recovery back to baseline
- * Moderate variability present afterward

Because variability remains present and the tracing does not show:

- * Absent variability
- * Recurrent late decelerations
- * Recurrent variable decelerations with absent variability
- * Bradycardia for #10 minutes

...it does not meet criteria for Category III.

It is also not bradycardia, because bradycardia requires:

- * Baseline <110 bpm for 10 minutes or longer

Therefore the correct interpretation is a prolonged deceleration.

References:NCC C-EFM Candidate Guide; NICHD FHR Definitions; AWHONN FHMPP; Menihan; Simpson & Creehan.

NEW QUESTION # 26

When evaluating a baseline fetal heart rate change, the fetal heart rate is assessed for a minimum of:

- A. 30 minutes
- **B. 10 minutes**
- C. 15 minutes

Answer: B

Explanation:

Comprehensive and Detailed Explanation From Exact Extract-Based NCC C-EFM References:

NCC and NICHD define baseline FHR as the mean FHR rounded to increments of 5 bpm during a minimum of a 10-minute window, excluding:

- * Accelerations
- * Decelerations
- * Marked variability

If a segment shorter than 10 minutes is used, it cannot be called a "baseline".

Thus the required minimum is 10 minutes.

References:NICHD Definitions; NCC C-EFM Candidate Guide; AWHONN; Miller's Pocket Guide.

NEW QUESTION # 27

The pattern on the fetal heart rate tracing shown is likely due to



- A. placental insufficiency
- **B. umbilical cord compression**
- C. fetal head compression

Answer: B

Explanation:

Comprehensive and Detailed Explanation From Exact Extract Sources:

The tracing demonstrates an abrupt-onset, sharp, V-shaped deceleration, occurring simultaneously with or slightly after a contraction-classic for variable decelerations, which are caused by umbilical cord compression.

According to AWHONN Fetal Heart Monitoring Principles & Practices, variable decelerations are defined by:

- * "Abrupt decreases in FHR below baseline of at least 15 bpm, lasting at least 15 seconds and less than 2 minutes."
- * "Most commonly associated with umbilical cord compression, whether transient or recurrent." Physiology reference (Simpson & Miller, Pocket Guide):

- * Compression of the umbilical vein causes a brief acceleration.
- * Compression of the umbilical arteries triggers a vagal response, producing a rapid deceleration.
- * This creates the characteristic sharp 'V', 'U', or 'W' shape on the monitor.

Placental insufficiency (Choice B) produces late decelerations, which are gradual, not abrupt.

Fetal head compression (Choice A) produces early decelerations, which mirror contractions and have a gradual pattern.

Thus, the tracing is most consistent with variable decelerations caused by umbilical cord compression.

References:AWHONN Fetal Heart Monitoring Principles & Practices;Simpson - Fetal Monitoring;Menihan

- Electronic Fetal Monitoring;Miller's EFM Pocket Guide;NCC C-EFM Content Outline - Pattern Recognition Domain.

NEW QUESTION # 28

The baseline heart rate of a 28-week fetus is 170 bpm. The next step is to:

- A. Assess maternal vital signs
- B. Perform a biophysical profile
- C. Continue observation

Answer: A

Explanation:

Comprehensive and Detailed Explanation From Exact Extract Without Any URLs or Links:

NCC references (AWHONN, Simpson, Menihan) and the Physiology domain emphasize that baseline fetal heart rate is higher at earlier gestational ages due to predominant sympathetic tone and immature parasympathetic modulation. For a 28-week fetus, a baseline between 150-170 bpm may fall within the upper normal/mild tachycardic range.

Before classifying fetal tachycardia, recommended by AWHONN and Simpson, clinicians must first assess maternal contributors:

- * Fever
- * Tachycardia
- * Infection
- * Dehydration
- * Medications (e.g., beta-agonists)
- * Anxiety

This matches NCC's required first-line action: evaluate maternal status before escalating fetal assessment.

A biophysical profile (BPP) is not the immediate next step unless maternal status and fetal environment do not explain the finding.

Continuing observation without maternal evaluation is contrary to perinatal safety standards.

References: AWHONN Fetal Monitoring Principles | Simpson & Miller Fetal Monitoring | Menihan EFM Interpretation Guide | NCC C-EM Exam Content Domains 2025

NEW QUESTION # 29

.....

Individuals who work with NCC affiliations contribute the greater part of their energy working in their work spaces straightforwardly following accomplishing Certified - Electronic Fetal Monitoring certification. They don't get a lot of opportunity to spend on different exercises and regarding the NCC EFM Dumps, they need assistance to scrutinize accessible.

EFM Exam Pattern: <https://www.exams4sures.com/NCC/EFM-practice-exam-dumps.html>

We can tell you that 99% of those who use EFM exam questions have already got the certificates they want, NCC Best EFM Vce As the social situation changes, these pressures will only increase, With the Certified - Electronic Fetal Monitoring (EFM) certification you can gain several benefits such as validation of skills, career advancement, competitive advantage, continuing education, and global recognition of your skills and knowledge, EFM candidates can have the foremost valid EFM exam PDF at any time when needed.

Learning the Visual Basic Environment, Incrementally EFM Exam Questions Vce introduce good practices into individual workspaces and throughout the organization, We can tell you that 99% of those who use EFM Exam Questions have already got the certificates they want.

Free PDF Quiz Pass-Sure NCC - Best EFM Vce

As the social situation changes, these pressures will only increase, With the Certified - Electronic Fetal Monitoring (EFM) certification you can gain several benefits such as validation of skills, career advancement, EFM competitive advantage, continuing education, and global recognition of your skills and knowledge.

EFM candidates can have the foremost valid EFM exam PDF at any time when needed, The old version of the EFM study guide will not be sold to customer.

- EFM Valid Study Notes □ Free EFM Study Material □ EFM Pdf Torrent □ [www.vceengine.com] is best website to obtain "EFM" for free download □ EFM Exam Topic
- Best EFM Vce | Pass-Sure Certified - Electronic Fetal Monitoring 100% Free Exam Pattern □ Download 「 EFM 」 for free by simply searching on ▷ www.pdfvce.com ◁ □ Exam Discount EFM Voucher

