

<Q>The nurse knows that the etiology of cerebral palsy is most commonly related to which of the following:

<C+>Existing prenatal brain abnormalities

<C>Maternal asphyxia

<C>Childhood meningitis

<C>Preeclampsia.

<Q>The goal of therapeutic management for the child with cerebral palsy is:

<C>Assisting with motor control of voluntary muscle

<C+>Maximizing the capabilities of the child

<C>Delaying the development of sensory deprivation

<C>Surgically correcting deformities

<Q> After the induction phase of chemotherapy to a child with ALL. WBCs dropped to 1200/m³. Based on this, the nurse should encourage the child:

<C> To limit his activity.

<C+> To stay in his room most of the time and avoid people with infection.

<C> To play and institute bleeding precaution.

<C> Administer oxygen as needed.

<Q> Which of the following laboratory data most likely explains Child with ALL fatigue and

paler.

- <C+> Hemoglobin 4g/dl.
- <C> Platelets count 40,000/mm.
- <C> WBCs count 50,000/mm.
- <C> Non of the above.

<Q> If a father has major thalassemia and the mother has thalassemia trait the chance to have normal children is:

- <C+> Non (Zero %)
- <C> 25%
- <C> 50%
- <C> All children will be normal

<Q> Typical clinical features of pyloric stenosis include all of the following EXCEPT:

- <C> Average age of clinical presentation is 3 weeks
- <C> Progression of bile free vomiting that increases in amount and frequency
- <C+> Presence of a sausage-shaped mass palpated in the upper right quadrant
- <C> A firm, small mobile mass palpated in the upper right of the umbilicus the infant from crying

<Q> A basic understanding of hemophilia is important for the nurse to have, so that principles of care can be taught to the caregiver. Which of the following principles is correct?

- <C> Hemophiliacs should not be given intramuscular injections.
- <C> Hemophiliacs should avoid contact sports.
- <C> Treatment of hemophilic bleeding consists of replacement of deficient factors
- <C+> Regular check for platelets count must be done regularly.

<Q> A chief concern that parents of children with cyanotic heart disease often report is:

- <C> Infant is gaining weight rapidly.
- <C> The baby always seems hungry
- <C+> She seems to have trouble sucking.
- <C> Her baby's face looks pale.

<Q> Tetralogy of Fallot is the most frequently occurring type of cyanotic heart disease. The four anomalies associated with this defect are:

- <C> Atrial septal defect, pulmonary stenosis, left ventricular hypertrophy, overriding aorta.
- <C> Ventricular septal defect, aortic stenosis, mitral stenosis, right-sided aorta.
- <C> Mitral stenosis, right ventricular hypertrophy, pulmonary stenosis, atrial septal defect.
- <C+> Ventricular septal defect and right ventricular hypertrophy, pulmonary stenosis, overriding aorta.

<Q> Suppose an infant with tetralogy of Fallot turns cyanotic and short of breath. Your best action would be:

- <C> Put her head down between her legs.

- <C+>Place her in a knee-chest position.
- <C>Tell her to breathe into a paper bag.
- <C>Hold her upright to lower blood pressure.

<Q>What is a common laboratory finding with children with aortic heart disease?

- <C>Decreased platelet count.
- <C>Elevated erythrocyte sedimentation rate.
- <C+>Elevated total red blood cell count.
- <C>Elevated white blood cell count.

<Q>Digoxin was prescribed for an infant. The action of digoxin is to:

- <C>Increase the heart rate and dilate blood vessels.
- <C+>Slow the heart rate and strengthen heart contractions.
- <C>Decrease the amount of blood that filling ventricles.
- <C>Stimulate angiotensin to increase blood pressure.

<Q>If an infant were born with coarctation of the aorta, this produces few symptoms first. An important finding to assess for to best suggest this defect exists is:

- <C>Excessive newborn crying.
- <C>Presence of a cardiac murmur.
- <C>Elevated body temperature.
- <C+>Lack of femoral pulses.

<Q>Which of the following symptoms is a common symptom of rheumatic fever?

- <C+>Polyarthritis.
- <C>Pain on urination.
- <C>Tingling of extremities.
- <C>Nausea and vomiting.

<Q>What medication will be prescribed for a child with rheumatic fever to take for at least the next 5 years?

- <C>A corticosteroid.
- <C+>An oral penicillin.
- <C>An oral NSAID.
- <C>Acetylsalicylic acid.

<Q>What is the most serious complication of rheumatic fever it is important to remain alert for?

- <C>Chronic headache.
- <C>Necrosis of fingertips.
- <C+>Mitral damage.
- <C>Asthma symptoms.

<Q>An important nursing intervention for a child with congestive heart failure would be to:

- <C>Restrict milk or dairy product intake.
- <C+>Maintain her in a semi-Fowler's position.
- <C>Plan ways to reduce potassium intake.
- <C>Keep her lower extremities elevated.

<Q>What is the usually designated level of pulse rate considered safe for administration of digoxin for a 6-month-old infant?

- <C>40 beats per minute.
- <C>60 beats per minute.
- <C+>100 beats per minute.
- <C>150 beats per minute.

<Q>A child had a streptococcal pharyngitis 2 weeks ago. The chief danger of such an infection is:

- <C>Lymph nodes can swell and obstruct or close the airway.
- <C>The infection frequently spreads and causes a tooth abscess.
- <C+>Rheumatic fever, an autoimmune process, may occur afterward.
- <C>Four offive children develop lung abscesses afterward.

<Q>Ahmad was born with transposition of the great vessels and was prescribed intravenous indomethacin every 4 hours. The purpose of this medication is to:

- <C>Increase blood pressure to reverse blood flow.
- <C>Increase the strength of atrial contractions.
- <C>Decrease and strengthen the usual heart rate.
- <C+>Keep the ductus arteriosus patent and flowing.

<Q>What is a symptom of aortic coarctation of aorta that a school nurse might notice when the child reaches school age?

- <C+>Pain in the legs on physical exercise.
- <C>An especially short attention span.
- <C>Eating little lunch from lack of appetite.
- <C>Abdominal bloating and chronic pain.

<Q>Nursing assessment of a school-age child reveals inflamed joints, rash on the trunk, and aimless movements of the extremities. The nurse recognizes these findings as characteristic of which disorder?

- <C>Infective endocarditis
- <C>Valvular insufficiency
- <C+>Rheumatic fever
- <C>Congestive heart failure

<Q>When a 4-year-old child is admitted to the hospital with an acute sickle cell crisis, to which measure would you give priority?

- <C>Begin active ROM exercise.
- <C>See that he ingests a protein-rich diet.
- <C+>Begin fluid and oxygen therapy.
- <C>Encourage the child to lie flat in bed.

<Q>To prevent further sickle cell crises a child with sickle cell disease, you would want to advise his parents to:

- <C>Encourage him to limit the amount of fluid he drinks on warm days.
- <C+>Notify the nurse if he develops an upper respiratory infection.

- <C>Encourage their son to take up an active sport such as long-distance running.
- <C>Buy over-the-counter iron supplements and give them before bedtime.

<Q>Children who receive an excessive number of blood transfusions can develop hemosiderosis. When this happens, which drug would you expect to see prescribed to reduce hemosiderosis?

- <C>Ferrous or glucose sulfate.
- <C>Acetaminophen (Tylenol)
- <C+>An iron-chelating agent.
- <C>An anti-inflammatory agent.

<Q>A 10-year-old develops aplastic anemia. The cause of aplastic anemia is:

- <C>An allergy to plastic or a plastic product.
- <C>The overproduction of red blood cells.
- <C>Failure of the spleen to function fully.
- <C+>Disruption of blood cells production.

<Q>Which of the following statements is correct regarding thalassemia minor.

- <C+>No treatment will be necessary for her child's condition.
- <C>Restricting the child's activity will decrease any bleeding.
- <C>Her daughter will need to take an anti-inflammatory agent.
- <C>Although the child's life span will be short, she will feel healthy.

<Q>Idiopathic thrombocytopenia purpura is a disease that includes:

- <C>Multiple, "spider-like" lesions on the arms.
- <C+>A platelet count below 150,000/mm³
- <C>A red blood cell count below three million.
- <C>Vesicular lesions along the cranial nerve V.

<Q>Children with glucose-6-phosphate dehydrogenase (G6PD) need to be careful they avoid certain foods or medicine. Which medication would you question for a child with G6PD?

- <C>Penicillin.
- <C+>Acetylsalicylic acid.
- <C>Acetaminophen.
- <C>Allopurinol.

<Q>Ali was diagnosed as having pyloric stenosis. This means

- <C+>Constriction of the valve between the stomach and duodenum.
- <C>Enlargement of the valve between the stomach and esophagus.
- <C>Inflammation of the duodenum from an allergy to milk.
- <C>Necrotic patches forming on the lining of the stomach.

<Q>Which of the following tests is most helpful in diagnosing hemophilia?

- <C>Bleeding time

- <C+>Partial thromboplastin time (PTT)
- <C>Platelet count
- <C>Complete blood count (CBC)

<Q>Which of the symptoms from a child's health history is most representative of pyloric stenosis?

- <C>Refusal to eat food at meals.
- <C>Vomiting 2 hours after feeding.
- <C>Frequent chronic diarrhea.
- <C+>Vomiting immediately after feeding.

<Q>If a child was diagnosed with celiac disease, you would anticipate educating parents about:

- <C>A low-fat, low-carbohydrate diet.
- <C+>A diet free of wheat and barley.
- <C>A diet free of most dairy foods.
- <C>A high-carbohydrate (glucose) diet.

<Q>Hirschsprung's disease is a cause of constipation in infants. This is:

- <C>A form of volvulus that leads to obstruction.
- <C+>Lack of nerve endings in the sigmoid colon.
- <C>Lack of pancreatic enzymes that impair digestion.
- <C>Necrotic patches that form in the large intestine.

<Q>The nurse would prepare the parents of a child with suspected leukemia for which of the following tests that would confirm this diagnosis?

- <C>Lumber puncture
- <C+>Bone marrow aspiration
- <C>Complete blood count (CBC)
- <C>Blood culture

<Q>While assessing a neonate with cleft lip, the nurse would be alert that which of the following will most likely be compromised?

- <C+>Sucking ability
- <C>Respiratory status
- <C>Locomotion
- <C>GI function

<Q>A neonate's failure to pass meconium within the first 24 hours after birth may indicate which of the following?

- <C+>Hirschsprung's disease
- <C>Celiac disease
- <C>Intussusception
- <C>Abdominal wall defect

<Q>Secondary vesicoureteral reflux usually results from which of the following:

- <C>Congenital defects
- <C>Acidic urine
- <C+>Infection

<C>Hydronephrosis

<Q>Which of the following should be avoided if the child has hypospadias?

<C+>Circumcision

<C>Catheterization

<C>Surgery

<C>Intravenous pyelography (IVP)

<Q>All of the following are true about the purpose for elevating the head of the bed when caring for a child with increased ICP EXCEPT

<C>Maintain a neutral position

<C>Help alleviate headache

<C>Reduce intra-abdominal pressure

<C+>Increase intrathoracic pressure

<Q>Which of the following is the most useful tool in diagnosing seizure disorder?

<C+>EEG

<C>Lumbar puncture

<C>Skull radiographs

<C>Brain scan

<Q>Which of the following definitions most accurately describes a meningocele?

<C>Complete exposure of the spinal cord and meninges

<C>Herniation of spinal cord and meninges into a sac

<C+>Sac formation containing meninges and spinal fluid

<C>Spinal cord tumor containing nerve roots

<Q>Diabetic ketoacidosis (DKA) results from an excessive accumulation of which of the following?

<C>Glucose from carbohydrate metabolism

<C+>Ketone bodies from fat metabolism

<C>Potassium from cell death

<C>Sodium bicarbonate from renal compensation

<Q> The sign that indicates increased intracranial pressure (ICP) that can be revealed by fundoscopic exam is:

<C>Preorbital edema

<C> Fixed pupil

<C> Retinal detachment

<C+>Papilledema

<Q>Parents bring a one-year-old to the Emergency Department stating that the child just had her first seizure. The seizure lasted less than five minutes, and involved jerking movements over the entire body. Prior to the seizure, the child had been sick, and started running a fever. Based on the description, the nurse suspects that the child experienced which type of seizure?

<C+>Febrile

<C>Generalized

- <C>Status epileptic
- <C>Simple Partial

<Q>A 5-year-old is admitted to the hospital with suspected meningitis. Which nursing intervention would be included in the child's plan of care?

- <C>Provide high-calorie diet.
- <C>Measure head circumference.
- <C+>Dim lights and quiet room as needed.
- <C>Play music the child enjoys.

<Q>All of the following manifestations are found in most clients with cerebral palsy ~~EXCEPT~~

- <C>Delayed gross motor development.
- <C+>Elevated ESR
- <C>Abnormal muscle performance.
- <C>Subnormal learning abilities and seizures.

<Q>The primary reason for surgical repair of a myelomeningocele is to:

- <C>Correct the neurological defect.
- <C>Prevent hydrocephalus.
- <C>Prevent epilepsy.
- <C+>Decrease the risk of infection.

<Q>Which of the following is utilized in the management of DDH:

- <C>Skeletal Traction
- <C+>Pavlikharness device.
- <C>Milwaukee brace.
- <C>WeeklySerial casting is begun immediately

<Q>The nurse has completed teaching a school aged child with diabetes how to differentiate between hypoglycemia and ketoacidosis. The child demonstrates his understanding of this teaching by stating that he would drink a cup of orange juice if he experienced:

- <C>Decreased appetite
- <C>Excessive urination and tingling in fingertips.
- <C>Flushed skin and fruity breath odor.
- <C+>Drowsiness and hunger.

<Q>Exercise for the child with diabetes mellitus primarily required one of the following:

- <C>To be restricted to non-contact sports.
- <C>Require a decreased intake of food.
- <C>Required an increased insulin dose.
- <C+>Require an increased intake of food

<Q>Which of the following is a priority nursing objective for a child having a seizure disorder (epilepsy)?

- <C>Teach the family about anticonvulsant drug therapy.
- <C>Assess for signs and symptoms of increased ICP.
- <C+>Ensure safety and protection from injury.
- <C>Observe and record all seizures.

<Q>The stool characteristics for a child with celiac disease include:

- <C+>Fatty, frothy, bulky, and foul-smelling.
- <C>Current jelly-appearing.
- <C>Small, frothy, and dark green.
- <C>White with an ammonia-like smell.

<Q>Myelomeningocele may be associated with hydrocephalus. What should the nurse assess to identify an infant with hydrocephalus?

- <C>Upward eye slanting.
- <C>Strabismus.
- <C+>Wide or bulging fontanel.
- <C>Decreased head circumference.

<Q>A child having a complex partial seizure rather than a simple partial seizure is more likely to exhibit:

- <C+>Impaired consciousness.
- <C>Tonicclonic movements.
- <C>A seizure duration of more than 1 minute.
- <C>A continuous seizures for more than 30 minutes

<Q>When a child has a simple febrile seizure, it is important for the parents to know that the child will:

- <C+>Probably not develop epilepsy.
- <C>Most likely develop epilepsy.
- <C>Most likely develop neurologic damage.
- <C>Usually need tepid sponge baths during seizure.

<Q>Sami begins to have seizures characterized by repetition of inappropriate acts. This seizure type is known as:

- <C+>Partial complex.
- <C>Absence.
- <C>Tonicclonic
- <C>Myoclonic.

<Q>The nurse in preparing the long-term care plan for a child with cerebral palsy. Which of the following is included in the plan?

- <C>No delay in gross motor development is expected.
- <C+>The illness is not progressive in nature.
- <C>There will be no persistence of primitive infantile reflexes.
- <C>All children will need genetic counseling as they get older before planning for a family.

<Q>Of the following blood glucose levels, the value that most certainly indicates a diagnosis of diabetes would be a:

- <C>Fasting blood glucose of 120 mg/dl.
- <C>Random blood glucose of 140 mg/dl.
- <C+>Fasting blood glucose of 160 mg/dl
- <C>Glucose tolerance test value of 120 mg/dl for the 2 hour sample.

<Q>Which one of the following types of meningitis is self-limiting and least serious:

- <C>Meningococcal meningitis.
- <C>H. influenza meningitis.
- <C>Tuberculous meningitis.
- <C+>Aseptic meningitis

<Q>The mother interaction with her child who is diagnosed with juvenile rheumatoid arthritis. Which action by the mother would indicate a need for the nurse to intervene?

- <C>Encouraging the child to be as independent as possible, and not doing things which the child is capable of doing for himself.
- <C>Leaving the child alone for rest and sleep periods.
- <C>Encouraging the child to participate in activities that do not cause excessive fatigue.
- <C+>Talk about going to football practice as soon as they are discharged.

<Q>Even with good glucose control, a child with type 1 diabetes may frequently encounter the acute complication of:

- <C>Retinopathy.
- <C>Ketoacidosis.
- <C+>Hypoglycemia.
- <C>Coma.

<Q>Which of the following is correct related to Juvenile Rheumatoid Arthritis?

- <C+>Usually starts with fever and rashes
- <C>Aspirin should be avoided for child with (JRA)
- <C>The peak age of onset between 5-9 years
- <C>JRA will be cured after long dose of anti-rheumatic drugs

<Q>A candidate for bone marrow transplant is the child who:

- <C+>Is unlikely to be cured by other means
- <C>Has acute leukemia
- <C>Has chronic leukemia
- <C>Has a compatible donor in his or her family

<Q>Cryptorchidism refers to:

- <C+>Failure of one or both testes to descend normally through the inguinal canal into the scrotum.
- <C>Complete absence of a testis
- <C>The retrograde flow of urine from the bladder up the ureters
- <C>A condition in which the urethral opening is located below the glans penis

<Q>A lumbar puncture is performed on the child placed in a side-lying, knee-chest position to:

- <C>Prevent further headaches
- <C>Avoid spinal cord injury
- <C+>Afford easier access to the spinal canal
- <C>Prevent accidental injury to nearby organs

<Q>To confirm the diagnosis of Hirschsprung disease, the nurse prepares the child for which one of the following test?

- <C>Barium enema.
- <C>Upper GI series.
- <C+>Rectal biopsy.
- <C>Esophagoscopy.

<Q>All of the following are true about choreoathetoid (Dyskinetic) type of cerebral palsy EXCEPT:

- <C>It involves abnormal involuntary movements.
- <C>Characterized by slow, wormlike movements.
- <C>Involvement of pharyngeal, laryngeal and oral muscles causes drooling and imperfect speech.
- <C+>Involves hypertonicity with poor control of posture, balance and coordinated motion.

<Q>Ataxic type of cerebral palsy characterized by which of the following manifestation?

- <C>Excessive tone in voluntary muscles
- <C+>Disturbed coordination
- <C>Worm-like movements of extremities
- <C>Exaggeration of deep tendon reflexes

<Q>Which of the following clinical manifestations are associated with acute glomerulonephritis?

- <C>Normal blood pressure, generalized edema, oliguria.
- <C+>Periorbital edema, hypertension, dark-colored urine.
- <C>Fatigue, elevated serum lipid level, elevated serum protein level.
- <C>Increase temp, circulatory congestion, normal BUN and creatinine serum level.

<Q>All of the following are intervention protocols related to Juvenile arthritis treatments EXCEPT

- <C>Swimming is encouraged
- <C+>Joint replacements in children are encouraged as soon as the child has the disease
- <C>Non-steroidal anti-inflammatory drug are given
- <C>Rest and regular schedule of exercise are encouraged

<Q>Which of the following signs and symptoms are characteristic of minimal change nephropathy syndrome?

- <C>Gross hematuria , proteinuria, fever
- <C>Hypertension , edema, hematuria
- <C+>Poor appetite , massive proteinuria, edema
- <C>Hypertension, edema, proteinuria

<Q>Urethral meatus opens below the glans penis is related to:

- <C+>Hypospadias
- <C>Cryptorchidism
- <C>Urinary tract infection.
- <C>Hydronephrosis

<Q>The pathophysiological problem in VUR is:

- <C>Reflux of urine from the urethra into the bladder.
- <C+>Back flow of urine from the bladder into the ureters.
- <C>Constriction of the urethra.
- <C>Dilatation of the ureters due to obstruction in the flow of urine.

<Q>Which assessment finding suggests that a neonate has spina bifida occulta?

- <C>Bilateral hip dislocation
- <C>Bulging anterior fontanel
- <C+>Noticeable dimpling on the sacral area that may be covered by a tuft of hair
- <C>No movement in the lower extremities

<Q>A petechial or purpuric rashes commonly occurs in which type of meningitis?

- <C+>Meningococcal meningitis
- <C>Pneumococcal meningitis
- <C>Haemophilus meningitis
- <C>Streptococcal meningitis

<Q>Anopisthotonic posturing may be assumed by the child in which of the following disorders?

- <C>Cerebral palsy
- <C+>Bacterial meningitis
- <C>Generalized seizures
- <C>Rheumatoid arthritis

<Q>The test that provide the most reliable evidence of recent streptococcal infection is the:

- <C>Throat culture
- <C>Mantoux test
- <C>Antinuclear antibody (ANA) test
- <C+>Antistreptolysin-O (ASO) test

<Q>Surgical shunts are often required to provide drainage in treatment of hydrocephalus. Which is the preferred shunt for infants?

- <C+>Ventriculoperitoneal shunt.
- <C>Ventriculoatrial shunt.
- <C>Ventricular bypass.
- <C>Ventriculopleural shunt.

<Q>Increased ICP is best relieved by which nursing intervention?

- <C+>Elevating the head of the bed 30 degree.
- <C>Providing auditory stimulation to decrease sensory deprivation.

- <C>Increasing oxygenation through postural drainage and suctioning.
- <C>Sedating the patient with morphine sulfate, as needed.

<Q>**Which assessment finding is not associated with meningeal irritation?**

- <C+>Babinski's reflex.
- <C>Brudzinski's sign.
- <C>Kernig's sign.
- <C>Nuchal rigidity.

<Q>**Which of the following is the priority nursing intervention assisting with a lumbar puncture on a young child?**

- <C>Provide support and teach parents.
- <C>Provide support and teach child
- <C+>Provide firm, physical restraint of child during the procedure
- <C>Apply the local anesthesia as ordered.

<Q>**When applying a urine specimen bag to an infant boy, it is sometimes necessary to:**

- <C>Oil the surface of the skin
- <C+>Place the scrotum inside the bag
- <C>Remove and replace the bag often
- <C>Restrain all four extremities tightly

<Q>**The cuff size of the sphygmomanometer should cover no less than 1/2 and no more than 2/3 the length of the upper arm or leg.**

- <C+>True
- <C>False

<Q>**The cuff size of the sphygmomanometer that is too narrow will produce an apparent increase in blood pressure.**

- <C+>True
- <C>False

1. All of the following is true regarding Aseptic meningitis EXCEPT:

- a. Strict isolation is not necessary
- b. CSF has normal glucose level and slight elevation in protein
- c. **Meningeal signs are negative**
- d. Signs and symptoms subside within 3-10 days with no residual effects

2. Ahmad is examined for signs of increased ICP. Which cranial nerve is surrounded by cerebrospinal fluid, providing information about pressure within the brain?

- A. Optic nerve**
- B. Vagus nerve
- C. Oculomotor nerve
- D. Trigeminal nerve

3. Increased ICP is best relieved by which nursing intervention?

- A. Elevating the head of the bed 30 degrees**

- B. Providing auditory stimulation to decrease sensory deprivation
 C. Increasing oxygenation through postural drainage and suctioning
 D. Sedating the patient with morphine sulfate, as needed
4. Two days after admission, the patient suffers a generalized (grand mal) seizure. The seizure phase characterized by contraction and apnea lasting about 1 minute is called the:
- A. Aura phase
B. Tonic phase
 C. Clonic phase
 D. Postictal phase
5. Nursing interventions during a generalized seizure include:
- A. Securing physical restraints
 B. Maintaining the patient in a supine position
 C. Inserting an artificial airway
D. Observing seizure activity
6. Mrs Sami's neurological status deteriorates and she begins to have seizures characterized by repetition of inappropriate acts (automatisms). This seizure type is known as:
- A. **Partial complex**
 B. Absence
 C. Partial motor
 D. Myoclonic
7. Which assessment finding is not associated with meningeal irritation?
- A. **Babinski's reflex**
 B. Brudzinski's sign
 C. Kernig's sign
 D. Nuchal rigidity
8. A 4-year-old man with a history of seizure disorders, is admitted to the ICU after having a seizure 30 minutes earlier. His family states he takes phenytoin (Dilantin) and phenobarbital at home. His vital signs are stable, but he grimaces only in response to tactile stimuli. Which statement describes the pathology of seizures?
- A. **The abnormal excessive firing of brain cells causes the clinical signs and symptoms of a seizure**
 B. The entire brain is involved in a seizure
 C. The metabolism of the involved cells is greatly decreased during a seizure
 D. The abnormal firing of the neurons, once initiated, is perpetuated indefinitely until therapy is instituted
- Kareem a 13-year-old male, is admitted to the critical care unit in a comatose state. He has skin turgor, decreased urine output, a blood pressure of 88/50, and a pulse of 30 beats/minute. Diabetic ketoacidosis (DKA) is diagnosed.**
9. Precipitating factors in the development of DKA include:
- 1 Failure to take or resistance to insulin
 - 2 Pancreatitis
 - 3 Surgery or trauma in a patient with diabetes mellitus

4 All of the above

10. One of the main nursing diagnosis related to insulin metabolic control is risk for injury R/T hyperglycemia, which of the following is not associated to hyperglycemia:
- 1 **a. Regular meal-time**
 - b. Failure to consume adequate calories
 - 2 c. Error in insulin administration
 - d. Fatigue and severe weight loss
11. The mother interaction with her child who is diagnosed with juvenile rheumatoid arthritis. Which action by the mother would indicate a need for the nurse to intervene?
- a. Encouraging the child to be as independent as possible, and not doing things which the child is capable of doing for himself.
 - b. Leaving the child alone for rest and sleep periods.
 - c. Encouraging the child to participate in activities that do not cause excessive fatigue.
 - d. Talk about going to football practice as soon as they are discharged**
12. Which of the following ~~is correct~~ related to Juvenile Rheumatoid Arthritis?
- a. Usually starts with fever and rashes**
 - b. Aspirin should be avoided for child with (JRA)
 - c. The peak age of onset between 5-9 years
 - d. JRA will be cured after long dose of anti-rheumatic drugs
13. All of the following manifestations are found in most clients with cerebral ~~paralysis~~ **EXCEPT**:
- 1 Delayed gross motor development.
 - 2 Elevated ESR**
 - 3 Abnormal muscle performance.
 - 4 Subnormal learning abilities and seizures.
14. All of the following are etiology for congenital hypothyroid ~~disease~~ **EXCEPT**
- 1 Goiter inducing substance during pregnancy**
 - 2 Inborn error of thyroid hormone production.
 - 3 Low level of iodine during pregnancy.
 - 4 Auto immune disease.
15. Which of the following statements ~~is correct~~ **wrong** related to ulcerative colitis.
- 1 It is mainly located in rectum and colon.
 - 2 Lesion occurs as a skip.
 - 3 Pattern of lesion is continuous.
 - 4 The most frequent manifestation is bloody diarrhea.
16. Hallmark of Hemophilia is:
- 1 Vaso-occlusive crisis
 - 2 Bleeding oozing in the soft tissue as knee**
 - 3 Joint pain
 - 4 Fever
17. Which of the following statements is correct related to leukemia:

- 1 Proliferation of abnormal cells in the body.
- 2 Lack of normal cells count.
- 3 Acute lymphocytic leukemia is the most common type.
- 4 **All of the above are correct**

18. All of the following are correct regarding phenylketonuria **EXCEPT**:

- 1 Its caused by the absence of the liver enzyme phenylalanine hydroxylase.
- 2 Manifest itself as fair skin, blonde, blue eye and seizure.
- 3 Untreated PKU can cause permanent brain damage.
- 4 **It could be managed by increase phenylalanine diet.**

<Q>Which of the following is the most useful procedure in diagnosing meningitis?

- <C>Electroencephalography.
- <C+>Lumbar puncture.
- <C>Brain scan.
- <C>Skull radiographs.

<Q>The nurse should obtain the vital signs of an infant in what order?

- <C>Measure temperature, then count the pulse, and then count respirations.
- <C>Count the pulse, then count respirations, and then measure the temperature.
- <C+>Count respirations, then count the pulse, and then measure the temperature.
- <C>Measure the temperature, then count respirations, and then count the pulse.

<Q>Increased ICP is best relieved by which nursing intervention?

- <C+>Elevating the head of the bed 30 degree.
- <C>Providing auditory stimulation to decrease sensory deprivation.
- <C>Increasing oxygenation through postural drainage and suctioning.
- <C>Sedating the patient with morphine sulfate, as needed.

<Q>The most immediate threat to the life of the child with acute renal failure is:

- <C>Hypertension crisis.
- <C+>Hyperkalemia.
- <C>Anemia.
- <C>Cardiac failure from hypovolemia.

<Q>Which of the following clinical manifestations are associated with acute glomerulonephritis?

- <C>Normal blood pressure, generalized edema, oliguria.
- <C+>Periorbital edema, hypertension, dark-colored urine.
- <C>Fatigue, elevated serum lipid level, elevated serum protein level.
- <C>Temperature elevation, circulatory congestion, normal BUN and creatinine serum level.

<Q>Which of the following diagnostic findings would suggest failing in renal function?

- <C>Decreased creatinine and elevated BUN.
- <C+>Elevated BUN, creatinine, and uric acid levels.
- <C>Elevated potassium, phosphorus, and calcium.
- <C>Proteinuria and decreased creatinine and BUN.

<Q>Therapeutic management in nephrotic syndrome includes the administration of prednisone. The nurse teaches which of the following as correct administration guidelines?

- <C>Corticosteroid therapy is begun after BUN and serum creatinine elevation.
- <C>Prednisone is administered orally in a dosage of 4mg/kg of body weight.
- <C+>After the child is free of proteinuria and edema, the daily dose of prednisone is gradually decreased over several weeks to months.
- <C>The drug is discontinued as soon as the urine is free from protein.

<Q>To confirm the diagnosis ofirschprungdisease, the nurse prepares the child for which one of the following test?

- <C>Barium enema.
- <C>Upper GI series.
- <C+>Rectal biopsy.
- <C>Esophagoscopy.

<Q>The nurse would expect to see what clinical manifestations in the older infant diagnosed with disease?

- <C>History of bloody diarrhea, fever, and vomiting.
- <C>Irritability, severe abdominal cramps, fecal soiling.
- <C>Decreased hemoglobin, increased serum lipids, and positive stool for O & P (ova & parasites).
- <C+>History of constipation, abdominal distention and passage of ribbon-like, foul-smelling stools.

<Q>While caring for a child withcephalus, the nurse recognizes that which one of the following should be included in the postoperative care of a patient with a shunt?

- <C>Positioning the patient in a head-down position.
- <C>Continuous pumping of the shunt to assess function.
- <C+>Monitoring for abdominal or peritoneal distention.
- <C>Positioning the child on the side of the operative site to facilitate drainage.

<Q>The nurse observes which of the following signs in the infant with developmental hip dysplasia DDH/ congenital dislocation of the hip CDH?

- <C>NegativeOrtolanitest.
- <C+>Asymmetric thigh and gluteal folds.
- <C>Lengthening of the limb on the affected side.
- <C>All of the above.

<Q>The goal of treatment of clubfoot includes:

- <C>Correction of the deformity.
- <C>Maintenance of the correction until normal muscle is gained, often accomplished by casts or orthosis.
- <C>Follow-up observation to detect possible recurrence of the deformity.
- <C+>All of the above.

<Q>Myelomeningocele may be associated with hydrocephalus. What should the nurse assess to identify an infant with hydrocephalus?

- <C>Upward eye slanting.
- <C>Strabismus.
- <C+>Wide or bulging fontanel.
- <C>Decreased head circumference.

<Q>Surgical shunts are often required to provide drainage in treatment of hydrocephalus. What is the preferred shunt for infants?

- <C+>Ventriculoperitoneal shunt.
- <C>Ventriculoatrial shunt.
- <C>Ventricular bypass.
- <C>Ventriculopleural shunt.

<Q>A child having a complex partial seizure rather than a simple partial seizure is more likely to exhibit:

- <C+>Impaired consciousness.
- <C>Clonic movements.
- <C>A seizure duration of more than 1 minute.
- <C>All of the above.

<Q>Emergency care of the child during a seizure includes:

- <C>Giving ice chips slowly.
- <C>Restraining the child.
- <C>Gently open the eyes to observe their movements.
- <C+>loosening restrictive clothing.

<Q>When a child has a simple febrile seizure, it is important for the parents to know that the child will:

- <C+>probably not develop epilepsy.
- <C>Most likely develop epilepsy.
- <C>Most likely develop neurologic damage.
- <C>Usually need tepid sponge baths during seizure.

<Q>Nursing implementation goals directed toward nonsurgical management in a teenager with scoliosis primarily include:

- <C+>promoting self-esteem and positive body image.
- <C>Preventing immobility.
- <C>Promoting adequate nutrition.
- <C>Preventing infection.

<Q>The most common mode of transmission for bacterial meningitis is:

- <C+>vascular dissemination of a respiratory tract infection.
- <C>Direct implantation from an invasive procedure.
- <C>Direct extension from an infection in the mastoid sinuses.
- <C>Direct extension from an skull fractures.

<Q>Which one of the following types of meningitis is self-limiting and least serious:

- <C>Meningococcal meningitis.
- <C>H. influenza meningitis.
- <C>Tuberculous meningitis.
- <C+>Aseptic meningitis

<Q>Increased ICP is best relieved by which nursing intervention?

- <C+>Elevating the head of the bed 30 degree.
- <C>Providing auditory stimulation to decrease sensory deprivation.
- <C>Increasing oxygenation through postural drainage and suctioning.
- <C>Sedating the patient with morphine sulfate, as needed.

<Q>Sami begins to have seizures characterized by repetition of inappropriate acts. This seizure type is known as:

- <C+>Partial complex.
- <C>Absence.
- <C>Partial motor
- <C>Myoclonic.

<Q>Which assessment finding is not associated with meningeal irritation?

- <C+>Babinski's reflex.
- <C>Brudzinski's sign.

<C>Kernig's sign.
<C>Nuchal rigidity.

<Q>One of the main nursing diagnosis related to insulin metabolic control is risk for injury R/T hyperglycemia, which of the following is not associated with hyperglycemia?

<C+>Regular meal-time.
<C>Failure to consume adequate calories.
<C>Error in insulin administration.
<C>Fatigue and severe weight loss.

<Q>The mother interaction with her child who is diagnosed with juvenile rheumatoid arthritis. Which action by the mother would indicate a need for the nurse to intervene?

<C>Encouraging the child to be as independent as possible, and not doing things which the child is capable of doing for himself.
<C>Leaving the child alone for rest and sleep periods.
<C>Encouraging the child to participate in activities that do not cause excessive fatigue.
<C+>Talk about going to football practice as soon as they are discharged.

<Q>All of the following are etiology for congenital hypothyroidism except:

<C+>Goiter inducing substance during pregnancy.
<C>Inborn error of thyroid hormone production.
<C>Low level of iodine during pregnancy.
<C>Auto immune disease.

<Q>Ahmad has been diagnosed with congenital hypothyroidism. The nurse is instructing the parent on how to care for him. Which one of the following is not likely to be included in the plan?

<C>The drug of choice is synthetic levothyroxine sodium.
<C>The drug is tasteless and can be crushed and added to formula, water, or food.
<C>If the dose is missed, twice the dose should be given the next day.
<C+>Signs of over dose of the drug include slow pulse rate, lethargy, and excessive weight gain.

<Q>Diagnostic evaluation testing for congenital hypothyroidism in the newborn includes which of the following?

<C+>A low levels of T3 & T4, and high level of TSH.
<C>A low levels of T3, T4 and TSH.
<C>A high levels of T3 & T4, and low level of TSH.
<C>A high levels of T3, T4 & TSH.

<Q>Exercise for the child with diabetes mellitus may:

<C>Be restricted to non-contact sports.
<C>Require a decreased intake of food.
<C>Necessitate an increased insulin dose.
<C+>Require an increased intake of food.

<Q>The nurse in preparing the long-term care plan for a child with cerebral palsy. Which of the following is included in the plan?

<C>No delay in gross motor development is expected.
<C+>The illness is not progressive in nature.
<C>There will be no persistence of primitive infantile reflexes.
<C>All children will need genetic counseling as they get older before planning for a family.

<Q>Most children with diabetes mellitus tend to exhibit characteristics of:

<C>Maturity-onset diabetes of youth.
<C>Gestational diabetes.
<C+>Type 1 diabetes.
<C>Type 2 diabetes.

<Q>The currently accepted etiology of type 1 diabetes takes into account:

- <C>Genetic factors.
- <C>Autoimmune mechanisms.
- <C>Environmental factors.
- <C+>All of the above.

<Q>Of the following blood glucose levels, the value that most certainly indicates a diagnosis of diabetes would be:

- <C>Fasting blood glucose of 120 mg/dl.
- <C>Random blood glucose of 140 mg/dl.
- <C+>Fasting blood glucose of 160 mg/dl
- <C>glucose tolerance test value of 120 mg/dl for the 2 hour sample.

<Q>Even with good glucose control, a child with type 1 diabetes may frequently encounter the acute complications of:

- <C>Retinopathy.
- <C>Ketoacidosis.
- <C+>Hypoglycemia.
- <C>Coma.

<Q>Milwaukee brace is among the nonoperative treatment for:

- <C>Congenital clubfoot.
- <C>Congenital Hip Dysplasia.
- <C+>Scoliosis.
- <C>Juvenile Rheumatoid Arthritis.

<Q>Which of the following signs would you expect as a beginning sign of acute glomerulonephritis?

- <C>Headache and a macular rash.
- <C>Diuresis and marked pallor.
- <C+>Urine colored dark brown to black.
- <C>Loss of weight and back pain.

<Q>What is the usual cause of acute glomerulonephritis in children?

- <C>An allergic response that occurs in association with dairy products.
- <C+>An autoimmune response to a streptococcal infection.
- <C>A complication of a Hepatitis (either B or A) infection.
- <C>A reaction to diphtheria-pertussis-tetanus vaccine.

<Q>Newborns are occasionally born with hypospadias. Which doctor's order would you question when this occurs?

- <C>Instruct the mother on breast-feeding by discharge.
- <C>Teach the mother how to change diapers by tomorrow.
- <C>Observe to see whether the newborn voids by 24 hours.
- <C+>Prepare the infant for circumcision at 4 o'clock.

<Q>Preschool girls are prone to urinary tract infection. Such infections are usually caused by

- <C>Streptococcus spread throughout the bloodstream.
- <C>Pneumococcal spores spread from the spleen.
- <C+>Escherichia coli that usually ascend from the perineum.
- <C>Pneumococci metastasized from the lungs.

<Q>If a child has a series of urinary tract infection, the child may have a vesicoureteral reflux

This is:

- <C+>Return of urine into the ureters with bladder contraction.
- <C>Incomplete emptying of the urethra from a stenosis.
- <C>Kidney stones that block the urethra cause stasis.
- <C>The bladder lining erodes from acid urine and bleeds.

<Q>A child has type 1 diabetes mellitus. This disorder

- <C+>The pancreas can no longer produce insulin
- <C>Insulin is produced but because of an altered gene it is ineffective
- <C>The pancreas fails to produce insulin but can be forced to do so
- <C>Less insulin is produced so that extreme hypoglycemia occurs

<Q> Which of the following is NOT Diagnostic indicator for DKA?

- <C> Blood glucose greater than 250 mg/dL
- <C> Blood pH less than 7.3
- <C+> Blood bicarbonate more than 15 Eq/L
- <C> Ketones present in blood

<Q>Which of the following is Not true about type I diabetes:

- <C>It is the result of the body's failure to produce insulin.
- <C>Children with type I diabetes must take daily insulin injection.
- <C+>May result from a condition called hyperinsulinism
- <C>It is the most common type of diabetes in children.

<Q>One important injection technique for insulin you would teach parents of a child with DM would be

- <C>Always inject insulin in the exact same spot for consistent absorption
- <C>Never inject insulin in a leg to avoid skin infection at the site
- <C>If she gets tired of injecting insulin, she can take it orally once a day
- <C+>Always rotate sites of injection to avoid fibrotic scarring at the site

<Q>The nurse is assessing a 10-year-old for signs of type 1 diabetes. Which of the following would be most indicative of this problem?

- <C>History of hyperactivity
- <C+>A fasting serum glucose level of 130 mg/dL
- <C>Complaints of dysuria
- <C>A random serum glucose level of 180 mg/dL

<Q>Assessment of a 2-year-old by a nurse in the Emergency Department reveals the following: edema, hematuria, hypertension, and oliguria. Which of the following would the nurse assess as the most likely cause of these symptoms?

- <C+>Acute renal failure
- <C>Vesicoureteral reflux
- <C>Urinary tract infection
- <C>Bladder exstrophy

<Q>Which of the following instructions would the nurse provide to the family of a child who undergone a hypospadias repair?

<C+>Avoid tub baths until the catheter is removed.

<C>Limit fluid intake

<C>Test urine for specific gravity and albumin

<C>Instruct for complete bladder emptying

<Q>A nurse is caring for a child who has just received a cast. Which of the following considerations would be important in providing care for this child?

<C>Apply powder to the inside edges of the cast to help decrease moisture.

<C>When handling the cast in the first 24 hours, use fingertips only.

<C+>Assess the casted extremity every 15-30 minutes the first two hours after cast application.

<C>Give the child a blunt object to help with the itching under the cast.

<Q>The school nurse is screening the sixth-graders for scoliosis. She notes that one of the students has excessive convex curvature of the cervical thoracic spine. Which finding would be indicative of:

<C>Scoliosis.

<C+>Kyphosis.

<C>Lordosis.

<C>Torticollis.

<Q>A nurse is educating a family about the type of fracture their 8-year-old son has experienced. Which description would be an accurate way to explain a closed fracture of the radius to the family?

<C>One of the bones in the arm broke completely and penetrated the skin.

<C>One of the bones in the arm is crushed and broken incompletely.

<C>One of the bones in the arm is broken incompletely, like a green twig.

<C+>One of the bones in the arm broke completely, but did not penetrate the skin.

<Q>A nurse is evaluating a child for compartment syndrome after fracture reduction. Which assessment finding would alert the nurse to the presence of this complication?

<C>Capillary refill under three seconds

<C+>Absence of space between cast and extremity

<C>Pain, relieved by medication

<C>Pink extremities distal to cast

<Q>Parents bring a 3-year-old to the Emergency Department stating that the child just had his first seizure. The seizure lasted less than five minutes, and involved jerking movements over the entire body. Prior to the seizure, the child had been sick, and started running a fever. Based on the description, the nurse suspects that the child experienced which type of seizure?

<C>Status epilepticus

<C>Partial

<C>Generalized

<C+>Febrile

<Q>A 5-year-old is admitted to the hospital with suspected meningitis. Which nursing

intervention would be included in the child's plan of care?

- <C+>Dim lights and quiet room as needed
- <C>Play music the child enjoys
- <C>Provide high-calorie diet.
- <C>Measure head circumference.

<Q>A nurse is providing discharge teaching to the family of a child who just had a ventriculoperitoneal shunt placed. Which statements would indicate the parents understand the teaching?

- <C+>"We should let our doctor know if the child complains of double vision."
- <C>"There is no chance my child will have a seizure as long as the shunt is functioning correctly."
- <C>"We will observe for symptoms of shunt malfunction until our child has had the shunt for six months."
- <C>"Our child does not need to be followed by any early-intervention programs, unless a problem develops"

<Q>When a child injures the epiphyseal plate from a fracture, the damage may result in which of the following?

- <C+>Bone growth disruption
- <C>Rheumatoid arthritis
- <C>Permanent nerve damage
- <C>Osteomyelitis

<Q>Which of the following is a priority-nursing objective for a child having a seizure disorder (epilepsy)?

- <C+>Teach the family about anticonvulsant drug therapy.
- <C>Assess for signs and symptoms of increased ICP.
- <C+>Ensure safety and protection from injury.
- <C>Observe and record all seizures.

<Q>While discussing a plan of care for the neonate with Myelomeningocele, the mother asks if her baby will be at risk for any other defects. The nurse answer would be based on the fact the Myelomeningocele is frequently associated with?

- <C+>An abnormal increase in cerebrospinal fluid within the cranial cavity
- <C>An abnormally small head
- <C>A congenital absence of the cranial vault
- <C>An overriding of the cranial sutures

<Q>An 8-year-old child with juvenile rheumatoid arthritis is unable to feed or bathe herself, comb her hair she cannot use the bathroom unassisted. Given this information, the most appropriate nursing diagnosis for this child would be:

- <C>Pain related to joint inflammation.
- <C>Impaired physical mobility related to joint discomfort and stiffness.
- <C+>Self-Care deficit related to discomfort and impaired joint mobility.
- <C>High risk for body image disturbance.

<Q>Which of the following statement is WRONG related to club foot:

- <C>It is a congenital anomaly
- <C>It might be associated with another congenital anomalies

<C>It is caused by intrauterine compression
<C+>It is treated by casting and should be after one year

<Q>Which of the following is correct related to systemic Juvenile Rheumatoid Arthritis?

<C+>Usually starts with fever and rashes
<C>Aspirin should be avoided for child with (JRA)
<C>The peak age of onset between 5-9 years
<C>JRA will cure after long dose of anti-rheumatic drugs

<Q>All of the following manifestations are found in most clients with cerebral palsy EXCEPT

<C>Delayed gross motor development.
<C+>Elevated ESR
<C>Abnormal muscle performance.
<C>Subnormal learning abilities and seizures.

<Q>All of the following are true about choreoathetoid (Dyskinetic) type of cerebral palsy EXCEPT:

<C>It involves abnormal involuntary movements.
<C>Characterized by slow, wormlike movements.
<C>Involvement of pharyngeal, laryngeal and oral muscles causes drooling and imperfect speech. <C+>Involves hypertonicity with poor control of posture, balance and coordinated motion.

<Q>Enlarge brain ventricles are caused by excess CSF that is unable to be absorbed at a rate equal to that of its production related to:

<C+>Hydrocephalus
<C>Meningitis
<C>Spina bifida
<C>Encephalitis

<Q>Children who develop chronic renal disease often develop anemia. Anemia occurs with chronic renal disease because:

<C+>The kidneys are no longer able to produce erythropoietin.
<C>Kidneys no longer produce aldosterone so red blood cells die.
<C>The spleen is stimulated to destroy red blood cells.
<C>The liver is no longer stimulated to produce red blood cells.

<Q>The nurse has completed teaching a school aged child with diabetes how to differentiate between hypoglycemia and ketoacidosis. The child demonstrates his understanding of this teaching by stating that he would drink a cup of orange juice if he experienced:

<C>Decreased appetite
<C>Excessive urination and tingling in fingertips.
<C>Flushed skin and fruity breath odor.
<C+>Drowsiness and hunger.

<Q>While caring for a child with hydrocephalus, the nurse recognizes that which one of the following should be included in the postoperative care of a patient with a shunt?

- <C>Positioning the patient in a head-down position.
- <C>Continuous pumping of the shunt to assess function.
- <C+>Monitoring for abdominal or peritoneal distention.
- <C>Positioning the child on the side of the operative site to facilitate drainage.

<Q>The nurse observes which of the following signs in the infant with developmental hip dysplasia DDH/ congenital dislocation of the hip CDH?

- <C>Negative Ortolani test.
- <C+>Asymmetric thigh and gluteal folds.
- <C>Lengthening of the limb on the affected side.
- <C>Negative Barlow test.

<Q>Nursing interventions during a generalized seizure include:

- <C>Securing physical restraints
- <C>Maintaining the patient in a supine position
- <C>Resuscitating the child
- <C+>Observing seizure activity

<Q>The decrease in the incidence of Reye syndrome is widely believed to be linked to:

- <C>Improved definitive diagnosis using liver biopsy as a criterion
- <C>Earlier diagnosis and more aggressive therapy
- <C+>Alerting the public about the potential hazard of using aspirin for the treatment of children with viral infections
- <C>Mass immunization programs

<Q>All of the following are purposes of using a traction EXCEPT:

- <C>To realign bone fragments.
- <C>To provide rest for an extremity.
- <C+>To provide mobility of specific areas of the body.
- <C>To fatigue the involved muscle and reduce muscle spasm.

<Q>Cryptorchidism refers to:

- <C+>Failure of one or both testes to descend normally through the inguinal canal into the scrotum.
- <C>Complete absence of a testis
- <C>The retrograde flow of urine from the bladder up the ureters
- <C>A condition in which the urethral opening is located below the glans penis

<Q>A lumbar puncture is performed. The child is placed in a side-lying, knee-chest position to:

- <C>Prevent further headaches
- <C>Avoid spinal cord injury
- <C+>Afford easier access to the spinal canal
- <C>Prevent accidental injury to nearby organs

<Q>The nurse is assessing a neonate in the nursery. She performs Ortolani's test to rule out which defect?

- <C>Neural tube defects
- <C>Congenital clubfoot
- <C+>Developmental dysplasia of the hip
- <C>Osteogenesis imperfecta

<Q>Which assessment finding suggests that a neonate has spina bifida occulta?

- <C>Bilateral hip dislocation
- <C>Bulging anterior fontanel
- <C+>Noticeable dimpling on the sacral area that may be covered by a tuft of hair
- <C>No movement in the lower extremities

<Q>A petechial or purpuric rashes commonly occurs in which type of meningitis?

- <C+>Meningococcal meningitis
- <C>Pneumococcal meningitis
- <C>Haemophilus meningitis
- <C>Streptococcal meningitis

<Q>Anopisthotonic posturing may be assumed by the child in which of the following disorders?

- <C>Cerebral palsy
- <C+>Bacterial meningitis
- <C>Generalized seizures
- <C>Rheumatoid arthritis

<Q>To confirm the diagnosis of Hirschsprung disease, the nurse prepares the child for which one of the following test?

- <C>Barium enema.
- <C>Upper GI series.
- <C+>Rectal biopsy.
- <C>Esophagoscopy.

<Q>Which of the following Laboratory findings, in conjunction with presenting symptoms indicates nephritic syndrome?

- <C+>Hypoalbuminemia
- <C>Low urine specific gravity
- <C>Decreased hemoglobin
- <C>Decreased hematocrit

<Q>Acute glomerulonephritis (AGN) is characterized by all of the following EXCEPT:

- <C>An inflammatory process of the renal glomeruli.
- <C>It can occur as an immune complex disease after infection with nephritogenic streptococcus.
- <C>Relatively common in early school age.
- <C+>Has 3 forms, congenital, idiopathic and secondary.

<Q>Because the child with Nephroblastoma is frequently treated with prednisone, the nurse must monitor the child carefully for possible side effects, including:

- <C>Rounding of the face**
- <C+>Decreased appetite.**
- <C+>Susceptibility to infection and gastric irritation.**
- <C>Sodium excretion, increased urination and proteinuria.**
- <C>Decreased blood pressure and increased pulse and respiratory rate.**

<Q>A 2 year old was admitted to the hospital as a first time UTI. A cystourethrogram (VCUG) revealed that the child has vesicoureteral reflex (VUR) grade 2. The nurse should include all of the following in parent education about VUR:

- <C>The valvular mechanism which result in (VUR) is either congenital or is due to damage by chronic infection**
- <C>The ultimate danger of the reflux is the development of renal atrophy**
- <C+>Surgical management must be considered to the child as soon as possible**
- <C>Urinary tract infection is the most common clinical manifestation**

<Q>A young child is diagnosed with vesicoureteral reflex. The nurse should know that this is usually associated with:

- <C>Incontinence**
- <C>Urinary obstruction**
- <C+>Recurrent urinary infection**
- <C>Infarction of renal vessels**

<Q>External defects of the genitourinary tract, such as hypospadias, are usually repaired as early as possible to do which of the following?

- <C>Prevent Urinary infection**
- <C>Prevent separation anxiety**
- <C>Promote acceptance of hospitalization**
- <C+>Promote development of normal body image**

<Q>Which of the following laboratory findings, in conjunction with presenting symptoms indicates nephrotic syndrome?

- <C+>Hypoalbuminemia**
- <C>Low urine specific gravity**
- <C>Decreased hemoglobin**
- <C>Decreased hematocrit**

<Q>In non-toilet trained child with nephrotic syndrome the best way to detect fluid retention is which of the following?

- <C+>Weigh child daily**
- <C>Test urine for hematuria**
- <C>Measure abdominal girth weekly**
- <C>Count the number of changed diapers**

<Q>When some of the nerve cells that are normally present in the intestine do not form properly while a baby is developing during pregnancy. This is referred to:

- <C+>Hirschsprung's disease
- <C>Cleft palat
- <C>Nephrotic syndrome
- <C>Intussusception

<Q>All of the following is true regarding Aseptic meningitis except:

- <C>Strict isolation is not necessary
- <C>CSF has normal glucose level and slightly elevation in protein level
- <C+>Fever always not present
- <C>Signs and symptoms subside within 3-10 days with no residual effects

<Q>The primary reason for surgical repair of a myelomeningocele is to:

- <C>Correct the neurological defect.
- <C>Prevent hydrocephalus.
- <C>Prevent epilepsy.
- <C+>Decrease the risk of infection.

<Q>Which of the following is utilized in the management of CDH:

- <C>Cast
- <C>Milwaukee brace
- <C>Pavlik harness device
- <C+>Cast and Pavlik harness

<Q>_____ its among neural tube disorders and can be described as a protruding mass (Sac) in orange size at the back. This mass may be covered by skin or clear membrane and contains meninges and spinal fluid.

- <C>Spina bifida occulta
- <C+>Meningocele
- <C>Myelomeningocele
- <C>Anencephaly

<Q>All of the following are etiology for congenital hypothyroidism EXCEPT:

- <C+>Goiter inducing substance during pregnancy
- <C>Inborn error of thyroid hormone production.
- <C>Defective thyroid gland development
- <C> Low level of iodine during pregnancy.

<Q>Ali is an 8-year-old boy recently diagnosed as IDDM, which of the following statement is appropriate to be included in the discharge planning for the family:

- <C>Insulin requirement is affected by growth rate, activity level, diet and illness.
- <C>No type of exercise is restricted for Ali.
- <C>Ali should eat five meals daily.
- <C+>All of the above.

<Q>The nurse has completed teaching a school aged child with diabetes how to differentiate between hypoglycemia and ketoacidosis. The child demonstrates his understanding of this teaching by stating that he would drink a cup of orange juice if he experienced:

- <C>Decreased appetite
- <C>Excessive urination and tingling in fingertips.
- <C>Flushed skin and fruity breath odor.
- <C+>Drowsiness and hunger.

<Q>Exercise for the child with diabetes mellitus primarily required one of the following:

- <C>To be restricted to non-contact sports.
- <C>Require a decreased intake of food.

<C>Required an increased insulin dose.
<C+>Require an increased intake of food

<Q>The developmental accomplishment that would indicate that the child is ready for toilet training:

<C+>Neuromuscular maturation.
<C>Ability to reason.
<C>Washes and dries hands.
<C>Ability to walk

<Q>Which of the following is a priority-nursing objective for a child having a seizure disorder (epilepsy)?

<C>Teach the family about anticonvulsant drug therapy.
<C>Assess for signs and symptoms of increased ICP.
<C+>Ensure safety and protection from injury.
<C>Observe and record all seizures.

<Q>While caring for a child with hydrocephalus, the nurse recognizes that which one of the following should be included in the postoperative care of a patient with a shunt?

<C>Positioning the patient in a head-down position.
<C>Continuous pumping of the shunt to assess function.
<C+>Monitoring for abdominal or peritoneal distention.
<C>Positioning the child on the side of the operative site to facilitate drainage.

<Q>Myelomeningocele may be associated with hydrocephalus. What should the nurse assess to identify an infant with hydrocephalus?

<C>Upward eye slanting.
<C>Strabismus.
<C+>Wide or bulging fontanels.
<C>Decreased head circumference.

<Q>A child having a complex partial seizure rather than a simple partial seizure is more likely to exhibit:

<C+>Impaired consciousness.
<C>Tonicclonicmovements.
<C>A seizure duration of more than 1 minute.
<C>All of the above.

<Q>When a child has a simple febrile seizure, it is important for the parents to know that the child will:

<C+>Probably not develop epilepsy.
<C>Most likely develop epilepsy.
<C>Most likely develop neurologic damage.
<C>Usually need tepid sponge baths during seizure.

<Q>The nurse in preparing the long-term care plan for a child with cerebral palsy. Which of the following is included in the plan?

<C>No delay in gross motor development is expected.
<C+>The illness is not progressive in nature.
<C>There will be no persistence of primitive infantile reflexes.
<C>All children will need genetic counseling as they get older before planning for a family.

<Q>Of the following blood glucose levels, the value that most certainly indicates a diagnosis of diabetes would be:

<C>Fasting blood glucose of 116 mg/dl.
<C>Random blood glucose of 126 mg/dl.
<C+>Fasting blood glucose of 126 mg/dl
<C>Glucose tolerance test value of 110 mg/dl for the 2 hour sample.

<Q>The first sign of meningitis that can be seen in neonates is:

- <C>Kernig sign.
- <C>Burdzinski's sign.
- <C+>Poor sucking.
- <C>Bulging fontanel.

<Q>The nurse observes which of the following signs in the infant with developmental hip dysplasia DDH/ congenital dislocation of the hip CDH?

- <C>Negative Ortolani test.
- <C+>Asymmetric thigh and gluteal folds.
- <C>Lengthening of the limb on the affected side.
- <C>All of the above.

<Q>The goal of treatment of clubfoot includes:

- <C>Correction of the deformity.
- <C>Maintenance of the correction until normal muscle is gained, often accomplished by casts or orthosis.
- <C>Follow-up observation to detect possible recurrence of the deformity.
- <C+>All of the above.

<Q>Which one of the following types of meningitis is self-limiting and least serious:

- <C>Meningococcal meningitis.
- <C>H. influenza meningitis.
- <C>Tuberculous meningitis.
- <C+>Aseptic meningitis

<Q>The mother interaction with her child who is diagnosed with juvenile rheumatoid arthritis. Which action by the mother would indicate a need for the nurse to intervene?

- <C>Encouraging the child to be as independent as possible, and not doing things which the child is capable of doing for himself.
- <C>Leaving the child alone for rest and sleep periods.
- <C>Encouraging the child to participate in activities that do not cause excessive fatigue.
- <C+>Talk about going to football practice as soon as they are discharged.

<Q>Diagnostic evaluation testing for congenital hypothyroidism in the newborn includes which of the following?

- <C+>A low levels of T3 & T4, and high level of TSH.
- <C>A low levels of T3, T4 and TSH.
- <C>A high levels of T3 & T4, and low level of TSH.
- <C>A high levels of T3, T4 & TSH.

<Q>The currently accepted etiology of type 1 diabetes takes into account:

- <C>Genetic factors.
- <C>Autoimmune mechanisms.
- <C>Environmental factors.
- <C+>All of the above.

<Q>Even with good glucose control, a child with type 1 diabetes may frequently encounter the acute complications of:

- <C>Retinopathy.
- <C>Ketoacidosis.
- <C+>Hypoglycemia.
- <C>Coma.

<Q>Nursing interventions during a generalized seizure include:

- <C>Securing physical restraints
- <C>Maintaining the patient in a supine position
- <C>Resuscitating the child
- <C+>Observing seizure activity

<Q>All of the following manifestations are found in most clients with cerebral palsy EXCEPT:

- <C>Delayed gross motor development.
- <C+>Elevated ESR
- <C>Abnormal muscle performance.
- <C>Subnormal learning abilities and seizures.

<Q>The decrease in the incidence of Reye syndrome is widely believed to be linked to:

- <C>Improved definitive diagnosis using liver biopsy as a criterion
- <C>Earlier diagnosis and more aggressive therapy
- <C+>Alerting the public about the potential hazard of using aspirin for the treatment of children with viral infections
- <C>Mass immunization programs

<Q>The most serious consequence in a child with congenital hypothyroidism is:

- <C>Respiratory difficulty
- <C>Awkward movements and abnormal deep tendon reflexes.
- <C>Retarded bone age
- <C+>Mental retardation

<Q>Cryptorchidism refers to:

- <C+>Failure of one or both testes to descend normally through the inguinal canal into the scrotum.
- <C>Complete absence of a testis
- <C>The retrograde flow of urine from the bladder up the ureters
- <C>A condition in which the urethral opening is located below the glans penis

<Q>A lumbar puncture is performed. The child is placed in a side-lying, knee-chest position to:

- <C>Prevent further headaches
- <C>Avoid spinal cord injury
- <C+>Afford easier access to the spinal canal
- <C>Prevent accidental injury to nearby organs

<Q>The nurse is assessing a neonate in the nursery. She performs a test to rule out which defect?

- <C>Neural tube defects
- <C>Congenital clubfoot
- <C+>Developmental dysplasia of the hip
- <C>Osteogenesis imperfecta

<Q>The nurse administers oral thyroid hormone to an infant with hypothyroidism. The nurse should observe the infant for which signs of overdose?

- <C+>Tachycardia, fever, irritability, and sweating
- <C>Bradycardia, cool skin temperature, and dry scaly skin
- <C>Bradycardia, fever, hypotension, and irritability
- <C>Tachycardia, cool skin temperature, and irritability

<Q>Which assessment finding suggests that a neonate has spina bifida occulta?

- <C>Bilateral hip dislocation
- <C>Bulging anterior fontanel
- <C+>Noticeable dimpling on the sacral area that may be covered by a tuft of hair
- <C>No movement in the lower extremities

<Q>A 3-month-old is admitted to the facility with a diagnosis of bacterial meningitis. Which sign of meningeal irritation occurs with this condition?

- <C+>Marked irritability
- <C>Overriding sutures
- <C>Prominent scalp veins

<C>Depressed anterior fontanel

<Q>Which of the following signs would you expect as a beginning sign of acute glomerulonephritis?

- <C>Headache and a macular rash.
- <C>Diuresis and marked pallor.
- <C+>Urine colored dark brown to black.
- <C>Loss of weight and back pain.

<Q>What is the usual cause of acute glomerulonephritis in children?

- <C>An allergic response that occurs in association with dairy products.
- <C+>An autoimmune response to a streptococcal infection.
- <C>A complication of a Hepatitis (either B or A) infection.
- <C>A reaction to diphtheria-pertussis-tetanus vaccine.

<Q>Newborns are occasionally born with hypospadias. Which doctor's order would you question when this occurs?

- <C>Instruct the mother on breast-feeding by discharge.
- <C>Teach the mother how to change diapers by tomorrow.
- <C>Observe to see whether the newborn voids by 24 hours.
- <C+>Prepare the infant for circumcision at 4 o'clock.

<Q>Preschool girls are prone to urinary tract infection. Such infections are usually caused by

- <C>Streptococcus spread throughout the bloodstream.
- <C>Pneumococcal spores spread from the spleen.
- <C+>Escherichia coli that usually ascend from the perineum.
- <C>Pneumococci metastasized from the lungs.

<Q>If a child has a series of urinary tract infection, the child may have a vesicoureteral reflux. This is:

- <C+>Return of urine into the ureters with bladder contraction.
- <C>Incomplete emptying of the urethra from a stenosis.
- <C>Kidney stones that block the urethra cause stasis.
- <C>The bladder lining erodes from acid urine and bleeds.

<Q>A child has type 1 diabetes mellitus. This disorder

- <C+>The pancreas can no longer produce insulin
- <C>Insulin is produced but because of an altered gene it is ineffective
- <C>The pancreas fails to produce insulin but can be forced to do so
- <C>Less insulin is produced so that extreme hypoglycemia occurs

<Q> Which of the following is NOT a diagnostic indicator for DKA?

- <C> Blood glucose greater than 250 mg/L
- <C> Blood pH less than 7.3
- <C+> Blood bicarbonate more than 15 Eq/L
- <C> Ketones present in blood

<Q>Which of the following is Not true about type I diabetes:

- <C>It is the result of the body's failure to produce insulin.
- <C>Children with type I diabetes must take daily insulin injection.
- <C+>May result from a condition called hyperinsulinism
- <C>It is the most common type of diabetes in children.

<Q>One important injection technique for insulin you would teach parents of a child with DM would be

- <C>Always inject insulin in the exact same spot for consistent absorption
- <C>Never inject insulin in a leg to avoid skin infection at the site
- <C>If she gets tired of injecting insulin, she can take it orally once a day
- <C+>Always rotate sites of injection to avoid fibrotic scarring at the site

<Q>The nurse is assessing a 10-year-old for signs of type 1 diabetes. Which of the following would be most indicative of this problem?

- <C>History of hyperactivity
- <C+>A fasting serum glucose level of 130 mg/dL
- <C>Complaints of dysuria
- <C>A random serum glucose level of 180 mg/dL

<Q>Children who develop chronic renal disease often develop anemia. Anemia occurs with chronic renal disease because:

- <C+>The kidneys are no longer able to produce erythropoietin.
- <C>Kidneys no longer produce aldosterone so red blood cells die.
- <C>The spleen is stimulated to destroy red blood cells.
- <C>The liver is no longer stimulated to produce red blood cells.

<Q>Assessment of a 2-year-old by a nurse in the Emergency Department reveals the following: edema, hematuria, hypertension, and oliguria. Which of the following would the nurse assess as the most likely cause of these symptoms?

- <C+>Acute renal failure
- <C>Vesicoureteral reflux
- <C>Urinary tract infection
- <C>Bladder exstrophy

<Q>Which of the following instructions would the nurse provide to the family of a child who has undergone a hypospadias repair?

- <C+>Avoid tub baths until the catheter is removed.
- <C>Limit fluid intake
- <C>Test urine for specific gravity and albumin
- <C>Instruct for complete bladder emptying

<Q>A nurse is caring for a child who has just received a cast. Which of the following considerations would be important in providing care for this child?

- <C>Apply powder to the inside edges of the cast to help decrease moisture.
- <C>When handling the cast in the first 24 hours, use fingertips only.
- <C+>Assess the casted extremity every 15-30 minutes the first two hours after cast application.
- <C>Give the child a blunt object to help with the itching under the cast.

<Q>The school nurse is screening the sixth-graders for scoliosis. She notes that one of the

students has excessive convex curvature of the cervical thoracic spine. Which findings would be indicative of:

- <C>Scoliosis.
- <C+>Kyphosis.
- <C>Lordosis.
- <C>Torticollis.

<Q>A nurse is educating a family about the type of fracture their 8-year-old son has experienced. Which description would be an accurate way to explain a closed fracture of the radius to the family?

- <C>One of the bones in the arm broke completely and penetrated the skin.
- <C>One of the bones in the arm is crushed and broken incompletely.
- <C>One of the bones in the arm is broken incompletely, like a green twig.
- <C+>One of the bones in the arm broke completely, but did not penetrate the skin.

<Q>A nurse is evaluating a child for compartment syndrome after fracture reduction. Which assessment finding would alert the nurse to the presence of this complication?

- <C>Capillary refill under three seconds
- <C+>Absence of space between cast and extremity
- <C>Pain, relieved by medication
- <C>Pink extremities distal to cast

<Q>Parents bring a 3-year-old to the Emergency Department stating that the child just had his first seizure. The seizure lasted less than five minutes, and involved jerking movements over the entire body. Prior to the seizure, the child had been sick, and started running a fever. Based on the description, the nurse suspects that the child experienced which type of seizure?

- <C>Status epilepticus
- <C>Partial
- <C>Generalized
- <C+>Febrile

<Q>A 5-year-old is admitted to the hospital with suspected meningitis. Which nursing intervention would be included in the child's plan of care?

- <C+>Dim lights and quiet room as needed
- <C>Play music the child enjoys
- <C>Provide high-calorie diet.
- <C>Measure head circumference.

<Q>A nurse is providing discharge teaching to the family of a child who just had a ventriculoperitoneal shunt placed. Which statements would indicate the parents understand the teaching?

- <C+>"We should let our doctor know if the child complains of double vision."
- <C>"There is no chance my child will have a seizure as long as the shunt is functioning correctly."
- <C>"We will observe for symptoms of shunt malfunction until our child has had the shunt for six months."
- <C>"Our child does not need to be followed by any early-intervention programs, unless a problem develops"

<Q>When a child injures the epiphyseal plate from a fracture, the damage may result in which of the following?

- Bone growth disruption
- Rheumatoid arthritis
- Permanent nerve damage
- Osteomyelitis

<Q>Which of the following is a priority-nursing objective for a child having a seizure disorder (epilepsy)?

- Teach the family about anticonvulsant drug therapy.
- Assess for signs and symptoms of increased ICP.
- Ensure safety and protection from injury.
- Observe and record all seizures.

<Q>While discussing a plan of care for the neonate with Myelomeningocele, the mother asks if her baby will be at risk for any other defects. The nurse answer would be based on the fact the Myelomeningocele is frequently associated with?

- An abnormal increase in cerebrospinal fluid within the cranial cavity
- An abnormally small head
- A congenital absence of the cranial vault
- An overriding of the cranial sutures

<Q>An 8-year-old child with juvenile rheumatoid arthritis is unable to feed or bathe herself, comb her hair she cannot use the bathroom unassisted. Given this information, the most appropriate nursing diagnosis for this child would be:

- Pain related to joint inflammation.
- Impaired physical mobility related to joint discomfort and stiffness.
- Self-Care deficit related to discomfort and impaired joint mobility.
- High risk for body image disturbance.

<Q>Which of the following statement is WRONG related to club foot:

- It is a congenital anomaly
- It might be associated with another congenital anomalies
- It is caused by intrauterine compression
- It is treated by casting and should be after one year

<Q>Which of the following is correct related to systemic Juvenile Rheumatoid Arthritis?

- Usually starts with fever and rashes
- Aspirin should be avoided for child with (JRA)
- The peak age of onset between 5-9 years
- JRA will cure after long dose of anti-rheumatic drugs

<Q>All of the following manifestations are found in most clients with cerebral palsy EXCEPT

- Delayed gross motor development.
- Elevated ESR
- Abnormal muscle performance.
- Subnormal learning abilities and seizures.

<Q>All of the following are true about choreoid (Dyskinetic) type of cerebral palsy EXCEPT:

<C>It involves abnormal involuntary movements.
<C>Characterized by slow, wormlike movements.
<C>Involvement of pharyngeal, laryngeal and oral muscles causes drooling and imperfect speech.
<C+>Involves hypertonicity with poor control of posture, balance and coordinated motion.

<Q>Enlarge brain ventricles are caused by excess CSF that is unable to be absorbed at a rate equal to that of its production related to:

<C+>Hydrocephalus
<C>Meningitis
<C>Spina bifida
<C>Encephalitis

<Q>Which nursing intervention is directed to the school-age child's independent management of asthma symptoms?

<C+>Encourage the child to use his flow meter and record results every day.
<C>Teach the parents proper use of inhalers.
<C>Discuss with the child how to tell friends about asthma.
<C>Assess the child and family's level of understanding of asthma.

<Q>The nurse has completed teaching a school aged child with diabetes how to differentiate between hypoglycemia and ketoacidosis. The child demonstrates his understanding of this teaching by stating that he would drink a cup of orange juice if he experienced:

<C>Decreased appetite
<C>Excessive urination and tingling in fingertips.
<C>Flushed skin and fruity breath odor.
<C+>Drowsiness and hunger.

<Q>While caring for a child with hydrocephalus, the nurse recognizes that which one of the following should be included in the postoperative care of a patient with a shunt?

<C>Positioning the patient in a head-down position.
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<C>Positioning the child on the side of the operative site to facilitate drainage.

<Q>The nurse observes which of the following signs in the infant with developmental hip dysplasia DDH/ congenital dislocation of the hip CDH?

<C>Negative Ortolani test.
<C+>Asymmetric thigh and gluteal folds.
<C>Lengthening of the limb on the affected side.
<C>Negative Barlow test.

<Q>Nursing interventions during a generalized seizure include:

<C>Securing physical restraints
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<Q>The decrease in the incidence of Reye syndrome is widely believed to be linked to:

- <C>Improved definitive diagnosis using liver biopsy as a criterion
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- <C+>Alerting the public about the potential hazard of using aspirin for the treatment of children with viral infections
- <C>Mass immunization programs

<Q>All of the following are purposes of using a traction EXCEPT:

- <C>To realign bone fragments.
- <C>To provide rest for an extremity.
- <C+>To provide mobility of specific areas of the body.
- <C>To fatigue the involved muscle and reduce muscle spasm.

<Q>Cryptorchidism refers to:

- <C+>Failure of one or both testes to descend normally through the inguinal canal into the scrotum.
- <C>Complete absence of a testis
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<Q>The nurse is assessing a neonate in the nursery. She performs a Romberg test to rule out which defect?

- <C>Neural tube defects
- <C>Congenital clubfoot
- <C+>Developmental dysplasia of the hip
- <C>Osteogenesis imperfecta

<Q>Which assessment finding suggests that a neonate has spina bifida occulta?

- <C>Bilateral hip dislocation
- <C>Bulging anterior fontanel
- <C+>Noticeable dimpling on the sacral area that may be covered by a tuft of hair
- <C>No movement in the lower extremities

<Q>A petechial or purpuric rashes commonly occurs in which type of meningitis?

- <C+>Meningococcal meningitis
- <C>Pneumonococcal meningitis
- <C>Haemophilus meningitis
- <C>Streptococcal meningitis

<Q>Anopisthotonic posturing may be assumed by the child in which of the following disorders?

- <C>Cerebral palsy
- <C+>Bacterial meningitis
- <C>Generalized seizures

<C>Rheumatoid arthritis

<Q>Which of the following interventions represents safe and effective management for the child with sickle cell anemia condition:

<C>Administration of heparin or other anticoagulants to prevent sickling

<C>Health teaching to help reduce the incidence of sickling by avoidance of high oxygen environment.

<C+>Increase fluid intake and the use of narcotics which promote pain reduction

<C>Providing passive-range of motion

<Q>Which of the following statements is related to hemophilia:

<C+>It is inherited as an autosomal recessive manner.

<C>It is transmitted in an x-linked recessive manner.

<C>It occurs as the result of a deficiency in one or more of the clotting factor.

<C>The severity of hemophilia is dependent on the percentage of the functioning factor.

<Q>Pulmonary stenosis involves:

<C>Return of blood to the heart without entry into the left atrium

<C+>Obstruction of blood flow from the right ventricle

<C>Obstruction of blood from the left ventricle

<C>A single vessel arising from both ventricles

<Q>Retraction is defined as:

<C+>The sinking of soft tissues during the respiratory cycle

<C>Proliferation of the tissue near the terminal phalanges

<C>An increase in the end expiratory pressure

<C>Contraction of the sternomastoid muscles

<Q>The foul-smelling frothy character of a child's stool with fibrosis is primarily due to the presence of:

<C>Hydrochloric acid.

<C>Bile salts.

<C+>Undigested fat.

<C>Sodium and chloride.

<Q>The primary problem with tracheoesophageal fistula that the nurse should be concerned about is:

<C+>Aspiration.

<C>Gastric distension.

<C>Poor feeding habits.

<C>Esophageal irritation.

<Q>The nurse instructs the parents of a 4-month-old with gastroesophageal reflux to include which one of the following in infant's care?

<C>Stop breast-feeding since breast milk is too thin and easily leads to reflux.

<C+>Place the infant in the prone position following feeding and at night.

<C>Increase the infant's intake of fruit and citrus juices.
<C>Try to increase feeding volume right before bedtime because this is the time when the stomach is more able to retain foods.

<Q>To confirm the diagnosis ofirschprungdisease, the nurse prepares the child for which one of the following test?

<C>Barium enema.
<C>Upper GI series.
<C+>Rectal biopsy.
<C>Esophagoscopy.

<Q12> Within the GIT, enzymes that are absent in the case of CF are:

<C+>Lipase, trypsin and amylase.
<C>Lipase, trypsin, amylase and ptyalin.
<C>Lipase and amylase only.
<C>Amylase and trypsin.

<Q20>Pneumonia is:

<C+>An inflammation of the pulmonary parenchyma.
<C>An inflammation of the bronchioles and bronchi.
<C>An inflammation in one segment of pulmonary lobes.
<C>Is hyperreactivity and hyperresponsiveness of airways.

<Q>The test that provide the most reliable evidence of recent streptococcal infection is the:

<C>Throat culture
<C>Mantoux test
<C>Antineuclear antibody (ANA) test
<C+>Antistreptolysin-O (ASO) test

<Q>The family of a hospitalized child with leukemia believes the child will be cured by prayer alone, and plans to take the child home. Which of the following nursing interventions will address this barrier to care?

<C>Evaluate the home for wheelchair accessibility.
<C+>Assess the family's understanding of leukemia.
<C>Demonstrate respect for the family's wishes.
<C>Communicate the parents' request to the child's physician.

<Q>Children who have been treated for rheumatic fever:

<C>Do not need additional prophylaxis against bacterial endocarditis
<C>Are immune to rheumatic fever for the rest of their lives
<C>Will have transitory manifestations of chorea for the rest of their lives
<C+>May need antibiotic therapy for years

<Q>Which of the following would alert the nurse to possible ruptured appendix in a child suspected of having appendicitis?

<C>Periumbilical pain that progresses to the lower right quadrant of the abdomen with an elevated WBC
<C>Low grade fever with the child demonstrating difficulty walking

<C+>Fever, sudden relief from abdominal pain and subsequent increase in pain accompanied by rigid guarding of the abdomen
<C>Colicky abdominal pain with elevated ESR level.

<Q>Which of the following Laboratory findings, in conjunction with presenting symptoms indicates nephritic syndrome?

- <C+>Hypoalbuminemia
- <C>Low urine specific gravity
- <C>Decreased hemoglobin
- <C>Decreased hematocrit

<Q>All of the following are correct regarding ulcerative colitis is except:

- <C>It involves large intestine
- <C+>Mainly affects small intestine
- <C>Symptoms include rectal bleeding and anemia
- <C>Currently there is no cure, except through surgical removal of the colon

<Q>Which blood gas analysis results are most indicative of respiratory acidosis?

- <C+>pH= 7.22, PCO₂ = 55 mm Hg, HCO₃ = 30mEq/L
- <C>pH= 7.28, PCO₂ = 45 mm Hg, HCO₃ = 15mEq/L
- <C>pH= 7.34, PCO₂ = 35 mm Hg, HCO₃ = 25mEq/L
- <C>pH= 7.40, PCO₂ = 25 mm Hg, HCO₃ = 40mEq/L

<Q>Which of the following interventions would be most appropriate in evaluating total fluid losses and gains while a dehydrated child is receiving fluid therapy?

- <C+>Weighing the infant daily.
- <C>Measuring the infant's height.
- <C>Determining the infant's birth weight.
- <C>Asking the mother of how much weight she has lost since the onset of vomiting and diarrhea.

<Q>The nurse knows that the etiology of cerebral palsy is most commonly related to which of the following:

- <C+>Existing prenatal brain abnormalities
- <C>Maternal asphyxia
- <C>Childhood meningitis
- <C>Preeclampsia

<Q>The goal of therapeutic management for the child with cerebral palsy is:

<C>Assisting with motor control of voluntary muscle

<C+>Maximizing the capabilities of the child

<C>Delaying the development of sensory deprivation

<C>Surgically correcting deformities

<Q>Diagnostic evaluation is important for early recognition of scoliosis. Which of the following is the correct procedure for the nurse conducting this examination?

<C>View the child, who is standing and walking fully clothed, to look for uneven hanging of clothing

<C>View all children from the left and right side to look mainly for asymmetry of the hip height

<C>Completely undress all children before the exam

<C+>View the child, who is wearing underpants, from behind and when the child bends forward.

<Q>Which of the following organisms is the most common cause of U.T.I in children?

- <C+>Escherichia coli
- <C>Staphylococcus
- <C>Klebsiella
- <C>Pseudomonas

<Q>What is the most likely underlying pathophysiology of primary enuresis?

- <C>UTI
- <C>Psychogenic stress
- <C>Vesicoureteral reflux
- <C+>Delayed bladder maturation

<Q>Secondary vesicoureteral reflux usually results from which of the following:

- <C>Congenital defects
- <C>Acidic urine
- <C+>Infection
- <C>Hydronephrosis

<Q>Which of the following should be avoided if the child has hypospadias?

- <C+>Circumcision
- <C>Catheterization
- <C>Surgery
- <C>Intravenous pyelography (IVP)

<Q>All of the following are true about the purpose for elevating the head of the bed when caring for a child with increased ~~IKPEPT~~ **IKPEPT**

- <C>Maintain a neutral position
- <C>Help alleviate headache
- <C>Reduce intra-abdominal pressure
- <C+>Increase intrathoracic pressure

<Q>Which of the following is the most useful tool in diagnosing seizure disorder?

- <C+>EEG
- <C>Lumbar puncture
- <C>Skull radiographs
- <C>Brain scan

<Q>Which of the following ~~itions~~ **itions** most accurately describe ~~meningocel~~ **meningocel**

- <C>Complete exposure of the spinal cord and meninges
- <C>Herniation of spinal cord and meninges into a sac

- <C+> Sac formation containing meninges and spinal fluid
- <C> Spinal cord tumor containing nerve roots

<Q> Diabetic ketoacidosis (DKA) results from an excessive accumulation of which of the following?

- <C> Glucose from carbohydrate metabolism
- <C+> Ketone bodies from fat metabolism
- <C> Potassium from cell death
- <C> Sodium bicarbonate from renal compensation

<Q> The sign that indicates increased intracranial pressure (ICP) that can be revealed by fundoscopic exam is:

- <C> Preorbital edema
- <C> Fixed pupil
- <C> Retinal detachment
- <C+> Papilledema

<Q> Parents bring a one-year-old to the Emergency Department stating that the child just had her first seizure. The seizure lasted less than five minutes, and involved jerking movements over the entire body. Prior to the seizure, the child had been sick, and started running a fever. Based on the description, the nurse suspects that the child experienced which type of seizure?

- <C+> Febrile
- <C> Generalized
- <C> Status epileptic
- <C> Simple Partial

<Q> A 5-year-old is admitted to the hospital with suspected meningitis. Which nursing intervention would be included in the child's plan of care?

- <C> Provide high-calorie diet.
- <C> Measure head circumference.
- <C+> Dim lights and quiet room as needed.
- <C> Play music the child enjoys.

<Q> All of the following manifestations are found in most clients with cerebral palsy ~~EXCEPT~~

- <C> Delayed gross motor development.
- <C+> Elevated ESR
- <C> Abnormal muscle performance.
- <C> Subnormal learning abilities and seizures.

<Q>The primary reason for surgical repair of a myelomeningocele is to:

- <C>Correct the neurological defect.
- <C>Prevent hydrocephalus.
- <C>Prevent epilepsy.
- <C+>Decrease the risk of infection.

<Q>Which of the following is utilized in the management of DDH:

- <C>Skeletal Traction
- <C+>Pavlik harness device.
- <C>Milwaukee brace.
- <C>Weekly serial casting is begun immediately

<Q>The nurse has completed teaching a school aged child with diabetes how to differentiate between hypoglycemia and ketoacidosis. The child demonstrates his understanding of this teaching by stating that he would drink a cup of orange juice if he experienced:

- <C>Decreased appetite
- <C>Excessive urination and tingling in fingertips.
- <C>Flushed skin and fruity breath odor.
- <C+>Drowsiness and hunger.

<Q>Exercise for the child with diabetes mellitus primarily required one of the following:

- <C>To be restricted to non-contact sports.
- <C>Require a decreased intake of food.
- <C>Required an increased insulin dose.
- <C+>Require an increased intake of food

<Q>Which of the following is priority nursing objective for a child having a seizure disorder (epilepsy)?

- <C>Teach the family about anticonvulsant drug therapy.
- <C>Assess for signs and symptoms of increased ICP.
- <C+>Ensure safety and protection from injury.
- <C>Observe and record all seizures.

<Q>The stool characteristics for a child with celiac disease include:

- <C+>Fatty, frothy, bulky, and foul-smelling.
- <C>Current jelly-appearing.
- <C>Small, frothy, and dark green.
- <C>White with an ammonia-like smell.

<Q>Myelomeningocele may be associated with hydrocephalus. What should the nurse assess to identify an infant with hydrocephalus?

- <C>Upward eye slanting.
- <C>Strabismus.
- <C+>Wide or bulging fontanel.
- <C>Decreased head circumference.

<Q>A child having a complex partial seizure rather than a simple partial seizure is more likely to exhibit:

- <C+>Impaired consciousness.
- <C>Tonicclonicmovements.
- <C>A seizure duration of more than 1 minute.
- <C>A continuous seizures for more than 30 minutes

<Q>When a child has a simple febrile seizure, it is important for the parents to know that the child will:

- <C+>Probably not develop epilepsy.
- <C>Most likely develop epilepsy.
- <C>Most likely develop neurologic damage.
- <C>Usually need tepid sponge baths during seizure.

<Q>Sami begins to have seizures characterized by repetition of inappropriate acts. This seizure type is known as:

- <C+>Partial complex.
- <C>Absence.
- <C>Tonicclonic
- <C>Myoclonic.

<Q>The nurse in preparing the long-term care plan for a child with cerebral palsy. Which of following is included in the plan?

- <C>No delay in gross motor development is expected.
- <C+>The illness is not progressive in nature.
- <C>There will be no persistence of primitive infantile reflexes.
- <C>All children will need genetic counseling as they get older before planning for a family.

<Q>Of the following blood glucose levels, the value that most certainly indicates a diagnosis diabetes would be a:

- <C>Fasting blood glucose of 120 mg/dl.
- <C>Random blood glucose of 140 mg/dl.
- <C+>Fasting blood glucose of 160 mg/dl
- <C>Glucose tolerance test value of 120 mg/dl for the 2 hour sample.

<Q>When planning nursing care for a child with epiglottitis, which of the following interven would be of highest priority?

- <C>Providing adequate psychological support.
- <C+>Preventing respiratory obstruction.
- <C>Preventing cross-contamination of other patients.
- <C>Administering antibiotics as ordered.

<Q>Which one of the following types of meningitis is self-limiting and least serious:

- <C>Meningococcal meningitis.
- <C>H. influenza meningitis.
- <C>Tuberculous meningitis.
- <C+>Aseptic meningitis

<Q>The mother interaction with her child who is diagnosed with juvenile rheumatoid arthritis. Which action by the mother would indicate a need for the nurse to intervene?

<C>Encouraging the child to be as independent as possible, and not doing things which the child is capable of doing for himself.

<C>Leaving the child alone for rest and sleep periods.

<C>Encouraging the child to participate in activities that do not cause excessive fatigue.

<C+>Talk about going to football practice as soon as they are discharged.

<Q>Even with good glucose control, a child with type 1 diabetes may frequently encounter the acute complication of:

<C>Retinopathy.

<C>Ketoacidosis.

<C+>Hypoglycemia.

<C>Coma.

<Q>Which of the following is correct related to Juvenile Rheumatoid Arthritis?

<C+>Usually starts with fever and rashes

<C>Aspirin should be avoided for child with (JRA)

<C>The peak age of onset between 5-9 years

<C>JRA will cured after long dose of anti-rheumatic drugs

<Q>Of the following assessment findings, the one that would most likely be seen in a child with leukemia is:

<C>Weakness of the eye muscle

<C+>Bruising, nosebleeds, paleness, and fatigue

<C>Wheezing and shortness of breath

<C>Abdominal swelling

<Q>A candidate for bone marrow transplant is the child who:

<C+>Is unlikely to be cured by other means

<C>Has acute leukemia

<C>Has chronic leukemia

<C>Has a compatible donor in his or her family

<Q>Hallmark of Hemophilia is:

<C>Vaso-occlusive crisis

<C+>Bleeding oozing in the soft tissue as knee

<C>Joint pain

<C>Fever

<Q>Cryptorchidism refers to:

<C+>Failure of one or both testes to descend normally through the inguinal canal into the scrotum.

<C>Complete absence of a testis

<C>The retrograde flow of urine from the bladder up the ureters

<C>A condition in which the urethral opening is located below the glans penis

<Q>A lumbar puncture is performed. The child is placed in a side-lying, knee-chest position to:

<C>Prevent further headaches

<C>Avoid spinal cord injury

<C+>Afford easier access to the spinal canal

<C>Prevent accidental injury to nearby organs

<Q>To confirm the diagnosis of Hirschsprung disease, the nurse prepares the child for which one of the following test?

<C>Barium enema.

<C>Upper GI series.

<C+>Rectal biopsy.

<C>Esophagoscopy.

<Q>All of the following are true about the choreoathetoid (Dyskinetic) type of cerebral palsy EXCEPT:

<C>It involves abnormal involuntary movements.

<C>Characterized by slow, wormlike movements.

<C>Involvement of pharyngeal, laryngeal and oral muscles causes drooling and imperfect speech.

<C+>Involves hypertonicity with poor control of posture, balance and coordinated motion.

<Q>Ataxic type of cerebral palsy characterized by which of the following manifestation?

<C>Excessive tone in voluntary muscles

<C+>Disturbed coordination

<C>Worm-like movements of extremities

<C>Exaggeration of deep tendon reflexes

<Q>When caring for a child with rheumatic fever who also develops chorea, Which nursing action is appropriate for a child with chorea:

<C+>Keep side rails raised.

<C>Assist the child with all activities of daily living.

<C>Offer the child a fork or knife for meals.

<C>Help the child to do some exercise activities.

<Q>Which of the following clinical manifestations are associated with acute glomerulonephritis?

<C>Normal blood pressure, generalized edema, oliguria.

<C+>Periorbital edema, hypertension, dark-colored urine.

<C>Fatigue, elevated serum lipid level, elevated serum protein level.

<C>Increase temp, circulatory congestion, normal BUN and creatinine serum level.

<Q>If a father has major thalassemia and the mother has thalassemia trait the chance to have affected children is:

- <C>100% are carriers
- <C>25% affected and 75% carriers
- <C+>50% affected and 50% carriers
- <C>100% affected and no carriers.

<Q>All of the following are intervention protocols related to Juvenile arthritis treatments EXCEPT

- <C>Swimming is encouraged
- <C+>Joint replacements in children are encouraged as soon as the child has the disease
- <C>Non-steroidal anti-inflammatory drugs are given
- <C>Rest and regular schedule of exercise are encouraged

<Q>Which of the following signs and symptoms are characteristic of minimal change nephropathy syndrome?

- <C>Gross hematuria, proteinuria, fever
- <C>Hypertension, edema, hematuria
- <C+>Poor appetite, massive proteinuria, edema
- <C>Hypertension, edema, proteinuria

<Q>Nutritional management of the toddler with cystic fibrosis includes:

- <C+>Pancreatic enzyme replacement.
- <C>Gluten-free diet.
- <C>Restrict fat-soluble vitamin supplements.
- <C>Lactose-free diet.

<Q>Urethral meatus opens below the glans penis is related to:

- <C+>Hypospadias
- <C>Cryptorchidism
- <C>Urinary tract infection.
- <C>Hydronephrosis

<Q>The pathophysiological problem in VUR is:

- <C>Reflux of urine from the urethra into the bladder.
- <C+>Back flow of urine from the bladder into the ureters.
- <C>Constriction of the urethra.
- <C>Dilatation of the ureters due to obstruction in the flow of urine.

<Q>Which assessment finding suggests that a neonate has spina bifida occulta?

- <C>Bilateral hip dislocation
- <C>Bulging anterior fontanel
- <C+>Noticeable dimpling on the sacral area that may be covered by a tuft of hair
- <C>No movement in the lower extremities

<Q>A petechial or purpuric rash commonly occurs in which type of meningitis?

- <C+>Meningococcal meningitis
- <C>Pneumococcal meningitis

- <C>Haemophilus meningitis
- <C>Streptococcal meningitis

<Q>Anopisthotonic posturing may be assumed by the child in which of the following disorders?

- <C>Cerebral palsy
- <C+>Bacterial meningitis
- <C>Generalized seizures
- <C>Rheumatoid arthritis

<Q>The primary problem with tracheoesophageal fistula that the nurse should be concerned about is:

- <C+>Aspiration.
- <C>Gastric distension.
- <C>Poor feeding habits.
- <C>Esophageal irritation.

<Q>The test that provide the most reliable evidence of recent streptococcal infection is the:

- <C>Throat culture
- <C>Mantoux test
- <C>Antineuclear antibody (ANA) test
- <C+>Antistreptolysin-O (ASO) test

<Q>Surgical shunts are often required to provide drainage in treatment of hydrocephalus. Which is the preferred shunt for infants?

- <C+>Ventriculoperitoneal shunt.
- <C>Ventriculoatrial shunt.
- <C>Ventricular bypass.
- <C>Ventriculopleural shunt.

<Q>In clients with isotonic fluid volume excess (FVE) and circulatory overload, the potential outcome is:

- <C>Cell swelling
- <C>Cerebral cell dehydration
- <C>Water intoxication
- <C+>Congestive heart failure

<Q>A lumbar puncture is performed. Mr. J is placed in a side-lying, knee-chest position to:

- <C>Prevent further headaches
- <C>Avoid spinal cord injury
- <C+>Afford easier access to the spinal canal
- <C>Prevent accidental injury to nearby organs

<Q>Which of the following is not a priority-nursing objective for a child with a seizure disorder?

- <C>Teach the family about anticonvulsant drug therapy.
- <C+>Assess for signs and symptoms of increased ICP.
- <C>Ensure safety and protection from injury.
- <C>Observe and record all seizures.

<Q>The long-term complications seen in child with thalassemia major are related to:

- <C+>Hemochromatosis (Iron overload)
- <C>Splenomegaly

- <C>Anemia
- <C>Growth retardation

<Q>The following are the clinical manifestation for Beta thalassemia major except:

- <C>Enlarge maxilla bones with misshapen teeth.
- <C+>Growth and development within the normal line
- <C>Pericarditis .
- <C>Bone marrow hypertrophy.

<Q>Clinical manifestations of respiratory acidosis except:

- <C+>Deep, rapid respiration.
- <C>Arterial PH low.
- <C>Peripheral vascular resistance.
- <C>Plasma HCO₃ high

<Q>You would expect find the following manifestation in an infant with non-organic failure to thrive except for:

- <C>Poor hygiene.
- <C>Social, motor, and language delays.
- <C+>Congenital heart problem.
- <C>No eye contact.

<Q>The physician orders Desferal (Desferoxamin) for a client with thalassemia. Which complaint should alert the nurse to notify the physician?

- <C>Skin pigmentation
- <C>Vomiting
- <C>Red urine
- <C+>Increased blood pressure

<Q>The stool characteristics for a child with celiac disease include:

- <C+>Fatty, frothy, bulky, and foul-smelling.
- <C>Current jelly-appearing.
- <C>Small, frothy, and dark green.
- <C>White with an ammonia-like smell.

<Q>The most important therapeutic management for the child with celiac disease is:

- <C>Eliminating wheat, rice, and rye from diet.
- <C>Adding iron, folic acid, and fat-soluble vitamins to the diet.
- <C+>Eliminating wheat, rye, barley and oats from diet.
- <C>Educating the child's parents about the short-term effects of the disease and the necessity of reading all food labels for content until the disease is remission.

<Q>Coarctation of the aorta should be suspected when:

- <C+>The blood pressure in the arms is higher than it is in the legs.
- <C>The blood pressure in the legs is higher than it is in the arms.
- <C>Apical pulse is greater than the radial pulse.
- <C>The blood pressure in the right arm is different from the blood pressure in the left arm.

<Q>Of the following descriptions, the heart sound that would be considered normal in a young child is:

- <C>Splitting of S1.
- <C+>Splitting of S2.
- <C>Splitting of S3.
- <C>Splitting of S4.

<Q>The most immediate threat to the life of the child with acute renal failure is:

- <C>Hypertension crisis.
- <C+>Hyperkalemia.
- <C>Anemia.
- <C>Cardiac failure from hypovolemia.

<Q>Which of the following clinical manifestations are associated with acute glomerulonephritis?

- <C>Normal blood pressure, generalized edema, oliguria.
- <C+>Periorbital edema, hypertension, dark-colored urine.
- <C>Fatigue, elevated serum lipid level, elevated serum protein level.
- <C>Temperature elevation, circulatory congestion, normal BUN and creatinine serum level.

<Q>Which of the following diagnostic findings would suggest failing renal function?

- <C>Decreased creatinine and elevated BUN.
- <C+>Elevated BUN, creatinine, and uric acid levels.
- <C>Elevated potassium, phosphorus, and calcium.
- <C>Proteinuria and decreased creatinine and BUN.

<Q>Therapeutic management in nephrotic syndrome includes the administration of prednisone. The nurse teaches which of the following as correct administration guidelines?

- <C>Corticosteroid therapy is begun after BUN and serum creatinine elevation.
- <C>Prednisone is administered orally in a dosage of 4mg/kg of body weight.
- <C+>After the child is free of proteinuria and edema, the daily dose of prednisone is gradually decreased over several weeks to months.
- <C>The drug is discontinued as soon as the urine is free from protein.

<Q>To confirm the diagnosis of Hirschsprung disease, the nurse prepares the child for which one of the following tests?

- <C>Barium enema.
- <C>Upper GI series.
- <C+>Rectal biopsy.
- <C>Esophagoscopy.

<Q>The nurse would expect to see what clinical manifestations in the older infant diagnosed with Hirschsprung disease?

- <C>History of bloody diarrhea, fever, and vomiting.
- <C>Irritability, severe abdominal cramps, fecal soiling.
- <C>Decreased hemoglobin, increased serum lipids, and positive stool for O & P (ova & parasites).

<C+>History of constipation, abdominal distention and passage of ribbon-like, foul-smelling stools.

<Q>The nurse instructs the parents of a 4-month-old with gastroesophageal reflux to include which one of the following in infant's care?

<C>Stop breast-feeding since breast milk is too thin and easily leads to reflux.

<C+>Place the infant in the prone position following feeding and at night.

<C>Increase the infant's intake of fruit and citrus juices.

<C>Try to increase feeding volume right before bedtime because this is the time when the stomach is more able to retain foods.

<Q>Ali, age 1 month, is brought to the clinic by his mother. The nurse suspects pyloric stenosis. Which of the following symptoms would support this theory?

<C>Diarrhea.

<C+>Projectile vomiting.

<C>Fever and dehydration.

<C>Abdominal distention.

<Q>Hani, age 5 months, is suspected of having Intussusception. What clinical manifestations would he most likely have?

<C+>Crying during abdominal exam; vomiting; green, jelly-appearing stools.

<C>Fever, diarrhea, vomiting, and lowered WBC.

<C>Weight gain, constipation, and refusal to eat.

<C>Abdominal distention, periodic pain, hypotension.

<Q>While caring for a child with hydrocephalus, the nurse recognizes that which one of the following should be included in the postoperative care of a patient with a shunt?

<C>Positioning the patient in a head-down position.

<C>Continuous pumping of the shunt to assess function.

<C+>Monitoring for abdominal or peritoneal distention.

<C>Positioning the child on the side of the operative site to facilitate drainage.

<Q>The nurse observes which of the following signs in the infant with developmental hip dysplasia DDH/ congenital dislocation of the hip CDH?

<C>Negative Ortolani test.

<C+>Asymmetric thigh and gluteal folds.

<C>Lengthening of the limb on the affected side.

<C>All of the above.

<Q>The goal of treatment of clubfoot includes:

<C>Correction of the deformity.

<C>Maintenance of the correction until normal muscle is gained, often accomplished by casts or orthosis.

<C>Follow-up observation to detect possible recurrence of the deformity.

<C+>All of the above.

<Q>Myelomeningocele may be associated with hydrocephalus. What should the nurse assess to identify an infant with hydrocephalus?

- <C>Upward eye slanting.
- <C>Strabismus.
- <C+>Wide or bulging fontanel.
- <C>Decreased head circumference.

<Q>Surgical shunts are often required to provide drainage in treatment of hydrocephalus. Which is the preferred shunt for infants?

- <C+>Ventriculoperitoneal shunt.
- <C>Ventriculoatrial shunt.
- <C>Ventricular bypass.
- <C>Ventriculopleural shunt.

<Q>A child having a complex partial seizure rather than a simple partial seizure is more likely to exhibit:

- <C+>Impaired consciousness.
- <C>Clonic movements.
- <C>A seizure duration of more than 1 minute.
- <C>All of the above.

<Q>Emergency care of the child during a seizure includes:

- <C>Giving ice chips slowly.
- <C>Restraining the child.
- <C>Gently open the eyes to observe their movements.
- <C+>Loosening restrictive clothing.

<Q>When a child has a simple febrile seizure, it is important for the parents to know that the child will:

- <C+>probably not develop epilepsy.
- <C>Most likely develop epilepsy.
- <C>Most likely develop neurologic damage.
- <C>Usually need tepid sponge baths during seizure.

<Q>Nursing implementation goals directed toward nonsurgical management in a teenager with scoliosis primarily include:

- <C+>promoting self-esteem and positive body image.
- <C>Preventing immobility.
- <C>Promoting adequate nutrition.
- <C>Preventing infection.

<Q>The most common mode of transmission for bacterial meningitis is:

- <C+>vascular dissemination of a respiratory tract infection.
- <C>Direct implantation from an invasive procedure.
- <C>Direct extension from an infection in the mastoid sinuses.
- <C>Direct extension from skull fractures.

<Q>Which one of the following types of meningitis is self-limiting and least serious:

- <C>Meningococcal meningitis.
- <C>H. influenza meningitis.

<C>Tuberculous meningitis.

<C+>Aseptic meningitis

<Q>In preparing the parents of a child with cleft palate, the nurse includes which of the following in the long-term family teaching plan?

<C>Explanation that tooth development will be delayed.

<C+>Guidelines to use for speech development.

<C>Use of decongestants and tylenol to care for frequent upper respiratory symptoms.

<C>All of the above.

<Q>The primary nursing goal in the immediate care of a postoperative infant after repair of cleft lip or cleft palate is to:

<C>Keep the infant well hydrated.

<C>Prevent vomiting.

<C+>Prevent trauma to operative site.

<C>Administer medication to prevent infection.

<Q>Increased ICP is best relieved by which nursing intervention?

<C+>Elevating the head of the bed 30 degree.

<C>Providing auditory stimulation to decrease sensory deprivation.

<C>Increasing oxygenation through postural drainage and suctioning.

<C>Sedating the patient with morphine sulfate, as needed.

<Q>Sami begins to have seizures characterized by repetition of inappropriate acts. This seizure type is known as:

<C+>Partial complex.

<C>Absence.

<C>Partial motor

<C>Myoclonic.

<Q>Which assessment finding is not associated with meningeal irritation?

<C+>Babinski's reflex.

<C>Brudzinski's sign.

<C>Kernig's sign.

<C>Nuchal rigidity.

<Q>One of the main nursing diagnosis related to insulin metabolic control is risk for injury I hyperglycemia, which of the following is not associated with hyperglycemia?

<C+>Regular meal-time.

<C>Failure to consume adequate calories.

<C>Error in insulin administration.

<C>Fatigue and severe weight loss.

<Q>The mother interaction with her child who is diagnosed with juvenile rheumatoid arthritis. Which action by the mother would indicate a need for the nurse to intervene?

<C>Encouraging the child to be as independent as possible, and not doing things which the child is capable of doing for himself.

<C>Leaving the child alone for rest and sleep periods.

<C>Encouraging the child to participate in activities that do not cause excessive fatigue.
<C+>Talk about going to football practice as soon as they are discharged.

<Q>All of the following are etiology for congenital hypothyroidism except:

<C+>Goiter inducing substance during pregnancy.
<C>Inborn error of thyroid hormone production.
<C>Low level of iodine during pregnancy.
<C>Auto immune disease.

<Q>Which of the following statements is wrong related to ulcerative colitis:

<C>It is mainly located in rectum and colon.
<C+>Lesions occur as a skip.
<C>Pattern of lesions are continuous.
<C>The most frequent manifestation is bloody diarrhea.

<Q>Which of the following statements is correct related to leukemia:

<C>Proliferation of abnormal cells in the body.
<C>Lack of normal cells count.
<C>Acute lymphocytic leukemia is the most common type.
<C+>All of the above.

<Q>All of the following are correct regarding phenylketonuria except:

<C>It caused by the absence of the liver enzyme phenylalanine hydroxylase.
<C>Manifest itself as fair skin, blonde, blue eyes and seizure.
<C>Untreated PKU can cause permanent brain damage.
<C+>It could be managed by increase phenylalanine diet.

<Q>Ahmad has been diagnosed with congenital hypothyroidism. The nurse is instructing the parent on how to care for him. Which one of the following is not likely to be included in the plan?

<C>The drug of choice is synthetic levothyroxine sodium.
<C>The drug is tasteless and can be crushed and added to formula, water, or food.
<C>If the dose is missed, twice the dose should be given the next day.
<C+>Signs of over dose of the drug include slow pulse rate, lethargy, and excessive weight gain.

<Q>Dietary instructions for the parents of a child with PKU include which of the following?

<C+>Maintain a low-phenylalanine diet.
<C>Increase intake of high-protein foods such as meat and dairy products.
<C>Use soy formula during infancy.
<C>All of the above.

<Q>Diagnostic evaluation testing for congenital hypothyroidism in the newborn includes which of the following?

<C+>A low levels of T3 & T4, and high level of TSH.
<C>A low levels of T3, T4 and TSH.
<C>A high levels of T3 & T4, and low level of TSH.
<C>A high levels of T3, T4 & TSH.

<Q>Exercise for the child with diabetes mellitus may:

- <C>Be restricted to non-contact sports.
- <C>Require a decreased intake of food.
- <C>Necessitate an increased insulin dose.
- <C+>Require an increased intake of food.

<Q>The nurse in preparing the long-term care plan for a child with cerebral palsy. Which of following is included in the plan?

- <C>No delay in gross motor development is expected.
- <C+>The illness is not progressive in nature.
- <C>There will be no persistence of primitive infantile reflexes.
- <C>All children will need genetic counseling as they get older before planning for a family.

<Q>Most children with diabetes mellitus tend to exhibit characteristics of:

- <C>Maturity-onset diabetes of youth.
- <C>Gestational diabetes.
- <C+>Type 1 diabetes.
- <C>Type 2 diabetes.

<Q>The currently accepted etiology of type 1 diabetes takes into account:

- <C>Genetic factors.
- <C>Autoimmune mechanisms.
- <C>Environmental factors.
- <C+>All of the above.

<Q>Of the following blood glucose levels, the value that most certainly indicates a diagnosis diabetes would be a:

- <C>Fasting blood glucose of 120 mg/dl.
- <C>Random blood glucose of 140 mg/dl.
- <C+>Fasting blood glucose of 160 mg/dl
- <C>glucose tolerance test value of 120 mg/dl for the 2 hour sample.

<Q>Even with good glucose control, a child with type 1 diabetes may frequently encounter the acute complication of:

- <C>Retinopathy.
- <C>Ketoacidosis.
- <C+>Hypoglycemia.
- <C>Coma.

<Q>Infants are more vulnerable to fluid and electrolytes imbalances due to:

- <C>Immature kidney function.
- <C>High metabolic rate.
- <C>High body surface area to body mass
- <C+>All of the above.

<Q>Moderate isotonic dehydration correlates with the following clinical features EXCEPT:

- <C>Oliguria.
- <C>Tachycardia.
- <C+>Less than 5% of body weight loss.

<C>Dry skin.

<Q>Milwaukee brace is among the nonoperative treatment for:

<C>Congenital clubfoot.

<C>Congenital Hip Dysplasia.

<C+>Scoliosis.

<C>Juvenile Rheumatoid Arthritis.

<Q>Laila is to have chest physiotherapy and postural drainage. The primary reason for Laila having this type of therapy is to help:

<C+>Clean the lungs of mucopurulent material

<C>Promote better use of the diaphragm

<C>Improve circulation in the chest cavity

<C>Dilate the bronchioles

<Q>When planning nursing care for a child with epiglottitis, which of the following interventions would be of highest priority?

<C>Providing adequate psychological support.

<C+>Preventing respiratory obstruction.

<C>Preventing cross-contamination of other patients.

<C>Administering antibiotics as ordered.

<Q>What is the preferred time at which MMR vaccine should be given?

<C>3 months.

<C>12 months.

<C+>15 months

<C>When exposed to rubella.

<Q>The loss of all 20 primary teeth and their replacement by 28 permanent teeth occur in:

<C>Infancy period.

<C+>School-age period.

<C>Adolescence period.

<C>Toddler period.

<Q>Otitis media occurs more frequently in infants and young children than in older children and adults. This is because of the unique anatomic features of the infant/young Child's:

<C>Nasopharynx.

<C+>Eustachian tubes.

<C>Extrahlear canals.

<C>Tympanic membranes.