

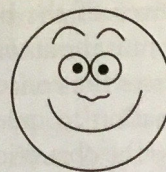
CHAPTER 19

Pediatric Problems

Questions

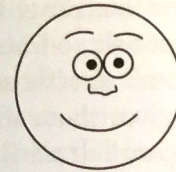
1. A 3-month-old infant arrives at the health center for a scheduled well-child visit. The parents ask the nurse why the infant extends the arms and legs in response to a loud sound. Which response by the nurse is **best**?
 1. Inform the parents that this is a normal reflex that generally disappears by 4 to 6 months of age.
 2. Tell the parents that if the behavior does not change by 6 months, the infant will need further evaluation.
 3. Remind the parents that this is a normal response that indicates the infant's hearing is intact.
 4. Reassure the parents that the behavior is normal and not an indicator of any problem such as cerebral palsy.
2. Which pediatric pain patient should be assigned to a newly graduated RN?
 1. An adolescent who has sickle cell disease and was recently weaned from morphine delivered via a patient-controlled analgesia device to an oral analgesic; he has been continually asking for an increased dose
 2. A child who needs premedication before reduction of a fracture; the child has been crying and is resistant to any touch to the arm or other procedures
 3. A child who is receiving palliative end-of-life care; the child is receiving opioids around the clock to relieve suffering, but there is a progressive decrease in alertness and responsiveness
 4. A child who has chronic pain and whose medication and nonpharmacologic regimen has recently been changed; the mother is anxious to see if the new regimen is successful

3. The nurse caring for a 3-year-old child plans to assess the child's pain using the Wong-Baker FACES[®] Pain Rating Scale. Which accompanying assessment question would be the **most** useful?



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No
Hurt



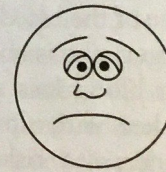
2

Hurts
Little Bit



4

Hurts
Little More



6

Hurts
Even More



8

Hurts
Whole Lot



10

Hurts
Worst

1. "If number 0 (smiling face) were no pain and number 10 (crying face) were a big pain, what number would your pain be?"
2. "Can you point to the face picture with one finger and tell me what that pain feels like inside of you?"
3. "The smiling face has 'no hurting'; the crying face has a 'really big hurting.' Which face is most like your hurting?"
4. "If you look at these faces and I give you a paper and pencil, can you draw for me the face that looks most like your pain?"

4. The nurse is caring for several children with cancer who are receiving chemotherapy. The nurse is reviewing the morning laboratory results for each of the patients. Which patient condition combined with the indicated laboratory result would cause the nurse the **greatest** concern?
1. Nausea and vomiting with a potassium level of 3.3 mEq/L (3.3 mmol/L)
 2. Epistaxis with a platelet count of 100,000/mm³ (100 × 10⁹/L)
 3. Fever with an absolute neutrophil count of 450/mm³ (450 × 10⁹/L)
 4. Fatigue with a hemoglobin level of 8 g/dL (80 g/L)
5. A 7-month-old infant arrives at the health center for a scheduled well-child visit. When the nurse approaches the infant to obtain vital signs, the infant cries vigorously and clings fearfully to the mother. Which of the following phenomena provides the **best** explanation for the infant's behavior?
1. Separation anxiety
 2. Disassociation disorder
 3. Stranger anxiety
 4. Autism spectrum
6. A 6-year-old child who received chemotherapy and had anorexia is now cheerfully eating peanut butter, yogurt, and applesauce. When the mother arrives, the child refuses to eat and throws the dish on the floor. What is the nurse's **best** response to this behavior?
1. Remind the child that foods tasted good today and will help her or his body to get strong.
 2. Allow the mother and child time alone to review and control the behavior.
 3. Ask the mother to leave until the child can finish eating and then invite her back.
 4. Explain to the mother that the behavior could be a normal expression of anger.
7. An 18-month-old child has oral mucositis secondary to chemotherapy. Which task should the nurse delegate to the unlicensed assistive personnel (UAP)?
1. Reporting evidence of severe mucosal ulceration
 2. Assisting the child in swishing and spitting mouthwash
 3. Assessing the child's ability and willingness to drink through a straw
 4. Feeding the child a bland, moist, soft diet
8. The pediatric unit charge nurse is making patient assignments for the evening shift. Which patient is **most** appropriate to assign to an experienced LPN/LVN?
1. A 1-year-old patient with severe combined immunodeficiency disease who is scheduled to receive chemotherapy in preparation for a stem cell transplant
 2. A 2-year-old patient with Wiskott-Aldrich syndrome who has orders for a platelet transfusion
 3. A 3-year-old patient who has chronic graft-versus-host disease and is incontinent of loose stools
 4. A 6-year-old patient who received chemotherapy 1 week ago and is admitted with increasing lethargy and a temperature of 101°F (38.3°C)
9. The pediatric unit charge nurse is working with a new RN. Which action by the new RN requires the **most** immediate action on the part of the pediatric unit charge nurse?
1. Wearing gloves, gowns, and a mask for a neutropenic child who is receiving chemotherapy
 2. Placing a newly admitted child with respiratory syncytial virus (RSV) infection in a room with another child who has RSV
 3. Wearing a N95 respirator mask when caring for a child with tuberculosis
 4. Performing hand hygiene with soap and water after caring for a child with diarrhea caused by *Clostridium difficile*
10. The nurse is preparing to care for a 6-year-old child who has just undergone allogeneic stem cell transplantation. Which nursing tasks should the nurse delegate to the unlicensed assistive personnel (UAP)? **Select all that apply.**
1. Stocking the child's room with standard personal protective equipment items
 2. Teaching the child to perform thorough hand washing after using the bathroom
 3. Reminding the child to wear a face mask outside of the hospital room
 4. Assessing the child's oral cavity for signs and symptoms of infection
 5. Talking to the family members about the methods to reduce risk of infection
11. A 4-month-old infant boy is brought to the emergency department by his parents. He has been vomiting and fussy for the past 24 hours. On exam, there are circular bruises on his back. What **priority** assessment does the nurse anticipate?
1. Chest x-ray examination
 2. Ultrasonography of the head
 3. Electroencephalography
 4. Ophthalmologic examination

12. Which action will the public health nurse take to have the **most** impact on the incidence of infectious diseases in the school?
1. Make soap and water readily available in the classrooms.
 2. Ensure that students are immunized according to national recommendations.
 3. Provide written information about infection control to all parents.
 4. Teach students how to cover their mouths when they cough or sneeze.
13. While working in the pediatric clinic, the nurse receives a telephone call from the parent of a 13-year-old child who is receiving chemotherapy for leukemia. The patient's sibling has chickenpox (varicella). Which action will the nurse anticipate taking **next**?
1. Administer varicella-zoster immune globulin to the patient.
 2. Teach the parent about the correct use of acyclovir.
 3. Educate the parent about contact and airborne precautions.
 4. Prepare to admit the patient to a private room in the hospital.
14. An unimmunized 7-year-old child who attends a local elementary school contracts rubeola (measles). The child has two siblings, ages 9 and 11 years, who also attend the elementary school. Which action by the school nurse is a **priority**?
1. Exclude the child and siblings from attending school for 21 days.
 2. Notify all parents of children attending the school of the exposure.
 3. Recommend that siblings receive the measles vaccine.
 4. Recommend that siblings receive measles immunoglobulin.
15. The school nurse is performing developmental screenings for children who will be entering preschool. A 4-year-old girl excitedly tells the nurse about her recent birthday party. As she relates the details of the event, she frequently stutters. Which action by the nurse is **most** appropriate at this time?
1. Refer the child to an audiologist.
 2. Obtain a detailed birth history from the parents.
 3. Document the findings on the child's school record.
 4. Refer the child to a speech pathologist.
16. An adolescent with cystic fibrosis (CF) is admitted to the pediatric unit with increased shortness of breath and pneumonia. Which nursing activity is **most** important to include in the patient's care?
1. Allowing the adolescent to decide if aerosolized medications are needed
 2. Scheduling postural drainage and chest physiotherapy every 4 hours
 3. Placing the adolescent in a room with another adolescent with CF
 4. Encouraging oral fluid intake of 2400 mL/day
17. The nurse has obtained this assessment information about a 3-year-old patient who has just returned to the pediatric unit after having a tonsillectomy. Which finding requires the **most** immediate follow-up?
1. Frequent swallowing
 2. Hypotonic bowel sounds
 3. Reports of a sore throat
 4. Heart rate of 112 beats/min
18. The nurse is providing nursing care for a newborn infant with respiratory distress syndrome (RDS) who is receiving nasal continuous positive airway pressure ventilation. Which assessment finding is **most** important to report to the health care provider?
1. Apical pulse rate of 156 beats/min
 2. Crackles audible in both lungs
 3. Tracheal deviation to the right
 4. Oxygen saturation of 93%
19. The nurse is assisting with the delivery of a 31-week gestational age premature newborn who requires intubation for respiratory distress syndrome (RDS). Which medication does the nurse anticipate will be needed **first** for this infant?
1. Theophylline
 2. Surfactant
 3. Dexamethasone
 4. Albuterol
20. The nurse obtains this information when assessing a 3-year-old patient with uncorrected tetralogy of Fallot who is crying. Which finding requires **immediate** action?
1. The apical pulse rate is 118 beats/min.
 2. A loud systolic murmur is heard in the pulmonic area.
 3. There is marked clubbing of the child's nail beds.
 4. The lips and oral mucosa are dusky in color.

21. The nurse is observing a preschool classroom of children between the ages of 3 to 4 years of age. When planning actions to ensure that each child meets normal developmental goals, which child will require the **most** immediate intervention?
1. A 3-year-old boy who needs help dressing
 2. A 4-year-old girl who has an imaginary friend
 3. A 4-year-old girl who engages only in parallel play
 4. A 3-year-old boy who draws stick figures
22. After receiving the change-of-shift report, which patient should the nurse assess **first**?
1. An 18-month-old patient with coarctation of the aorta who has decreased pedal pulses
 2. A 3-year-old patient with rheumatic fever who reports severe knee pain
 3. A 5-year-old patient with endocarditis who has crackles audible throughout both lungs
 4. An 8-year-old patient with Kawasaki disease who has a temperature of 102.2°F (38.9°C)
23. The pediatric unit charge nurse is working with a newly graduated RN who has been on orientation in the unit for 2 months. Which patient should the charge nurse assign to the new RN?
1. A 2-year-old patient with a ventricular septal defect for whom digoxin 90 mcg by mouth has been prescribed
 2. A 4-year-old patient who had a pulmonary artery banding and has just been transferred in from the intensive care unit
 3. A 9-year-old patient with mitral valve endocarditis whose parents need teaching about IV antibiotic administration
 4. A 16-year-old patient with a heart transplant who was admitted with a low-grade fever and tachycardia
24. The nurse is obtaining the history and physical information for a child who is recovering from Kawasaki disease and receives aspirin therapy. Which information concerns the nurse the **most**?
1. The child attends a day-care center 5 days a week.
 2. The child's fingers have areas of peeling skin.
 3. The child is very irritable and cries frequently.
 4. The child has not received any immunizations.
25. The RN is working with an LPN/LVN to provide care for a 10-year-old patient with severe abdominal, hip, and knee pain caused by a sickle cell crisis. Which action taken by the LPN/LVN requires the RN to intervene **immediately**?
1. Administering oral pain medication as needed
 2. Positioning cold packs on the child's knees
 3. Encouraging increased fluid intake
 4. Monitoring vital signs every 2 hours