SIR ARTHUR LEWIS COMMUNITY COLLEGE
ACADEMIC YEAR (2024/2025) – SEMESTER TWO
END OF SEMESTER EXAMINATION (Alternate)

COURSE CODE	:	**NUR322**
COURSE TITLE	:	**Nursing Care of the Children and Adolescents**
LECTURER(S)	:	**Mr. David Dupre**
DATE	:	**27 May 2025**
TIME	:	**9:00 am**
DURATION	:	**2 Hours**
STUDENT ID #	:	_____

GENERAL INFORMATION AND INSTRUCTIONS

- Students must sign **IN** and **OUT** on the examination class list.
- Write your ID number on the question paper.
- This paper has 80 Multiple Choice questions.
- Circle the correct answer on the question paper.

DO NOT TURN THIS PAGE UNTIL YOU ARE TOLD TO DO SO

Instructions: Circle the most appropriate answer on the question paper.

1. A supervisor is reviewing documentation of the nurses in the unit. Which client documentation is the most accurate and contains all the required part for a narrative entry?
   a) "1/9/05 2 pm nasogastric tube placement confirmed and irrigated with 30 ml sterile water. Suction set at low, intermittent. Oxygen via nasal canal at 2 L/min. Nares patent, pink, and nonirritated. K. Earnst RN"
   b) "2/2/05 1630 Catheterized using an 8 French catheter, 45 mL clear yellow urine obtained, specimen sent to lab, squirmed and cried softly during insertion of catheter. Quiet in mother's arms following catheter removal. M. May
   c) RN"
   d) c. "4:00 tracheostomy dressing removed with dime-size stain of dry serous exudate. Site cleansed with normal saline. Dried with sterile gauze. New sterile tracheostomy sponge and trach ties applied. Respirations regular and even throughout the procedure. F. Luck RN"
   e) d. "Feb. '05 Port-A-Cath assessed with Huber needle. Blood return present. Flushed with NaCl solution, IV gamma globulins hung and infusing at 30 cc/hr. Child smiling and playful throughout the procedure. P. Potter, RN"

2. A school-age client sustains a basilar skull fracture. Which symptom is a priority for this nurse to assess for when providing care to this client?
   a) Headache
   b) Cerebral spinal fluid leakage from the nose or ears
   c) Periorbital ecchymosis
   d) Transient confusion

3. In the morning, a nurse receives a report on four pediatric clients who have some form of fluid-volume excess. Which client should the nurse assess first?
   a) A client with dependent and sacral edema, regular pulse
   b) A client with periorbital edema, normal respiratory rate
   c) A client with hepatomegaly, normal respiratory rate
   d) A client with tachypnea and pulmonary congestion

4. A 12-year-old pediatric client is in need of surgery. Which member of the healthcare team is legally responsible for obtaining informed consent for an invasive procedure?
   a) Unit secretary
   b) Nurse
   c) Social worker
   d) Physician

5. The nurse is planning care for a school-age client, who is diagnosed with bipolar disorder and is having suicidal ideations. Which nursing diagnosis is the priority for this client?
   a) Impaired Social Interaction
   b) Risk for Injury Related to Suicidal Ideas
   c) Powerlessness Related to Mood Instability
   d) Social Isolation Related to Disorder

6. A 7-year-old child is admitted for acute appendicitis. The parents are questioning the nurse about expectations during the child's recovery. Which information tool would be most useful in answering a parent's questions about the timing of key events?
   a) *Healthy People 2020*
   b) National clinical practice guidelines
   c) Child mortality statistics
   d) Clinical pathways

7. The family of a preschool-age client diagnosed with an intellectual disability is expressing difficulty with managing the care needs of the child. Which nursing diagnosis is most appropriate for this situation?
   a) Impaired Parenting Related to Poor Parenting Skills
   b) Hopelessness Related to Terminal Condition of the Child
   c) Family Processes Dysfunctional, Related to a Child with Intellectual Disability
   d) Compromised Family Coping Related to the Child's Developmental Variations

8. A child diagnosed with acute glomerulonephritis is in the playroom and experiences blurred vision and headache. Which action by the nurse is the most appropriate?
   a) Check the urine to see if hematuria has increased.
   b) Obtain serum electrolytes, and send a urinalysis to the lab.
   c) Obtain a blood pressure on the child; notify the healthcare provider.
   d) Reassure the child, and encourage bed rest until the headache improves.

9. A school-age client is prescribed Adderall (amphetamine mixed salts) for attention deficit hyperactivity disorder (ADHD). At which time is it most appropriate for the nurse to teach the parents to administer this medication?
   a) Early in the morning
   b) Before lunch
   c) With the evening meal
   d) At bedtime

10. A child recently had a kidney transplant and is prescribed cyclosporine. The parents ask the nurse about the reason for the cyclosporine. Which reason will the nurse include in the response for why this medication is prescribed?
    a) To decrease pain
    b) To suppress rejection
    c) To improve circulation
    d) To boost immunity

11. A child is prescribed rifampicin for treatment of tuberculosis. For which length of time will the nurse tell the parents that this child must remain on the medication?
    a) 8 months
    b) 4 months
    c) 6 months
    d) 2 months

12. A nurse is caring for a child who is diagnosed with cerebral palsy. Which goal of therapy is most appropriate for the nurse to include in the plan of care?
    a) Reversing the degenerative processes that have occurred
    b) Curing the underlying defect causing the disorder
    c) Promoting optimum development
    d) Preventing the spread to individuals in close contact with the child

13. Which athletic activity can the nurse recommend for a school-age client with pulmonary-artery hypertension?
    a) Cross-country running
    b) Basketball
    c) Golf
    d) Soccer

14. A child is prescribed Didanosine (Videx), a nucleoside reverse transcriptase inhibitor, for human immunodeficiency virus (HIV). Which lab value will the nurse monitor closely for this child?
    a) Sodium
    b) Potassium
    c) RBC count
    d) Glucose

15. A school-age client diagnosed with autism is admitted to the hospital because of recent vomiting and diarrhea. Which intervention by the nurse is most appropriate upon admission?
    a) Admit the child to a four-bed unit with small children.
    b) Take the child to the playroom immediately for arts and crafts.
    c) Orient the child to the hospital room with minimal distractions.
    d) Take the child on a quick tour of the whole unit.

16. An adolescent client diagnosed with attention deficit hyperactivity disorder (ADHD) is interested in playing the drums in the school band. Which action by the nurse is the most appropriate?
    a) Recommend the child take private lessons and not join the band.
    b) Encourage the child to join the band.
    c) Consult with the healthcare provider about allowing participation in band activities.
    d) Discourage the child from playing in the band.

17. A 12-year-old pediatric client is in need of surgery. Which member of the healthcare team is legally responsible for obtaining informed consent for an invasive procedure?
    a) Nurse
    b) Physician
    c) Social worker
    d) Unit secretary

18. A nurse is caring for a visually impaired 20-month-old who has not begun to walk. Which nursing diagnosis is the most appropriate for this client?
    a) Impaired home maintenance
    b) Impaired physical mobility
    c) Delayed growth and development
    d) Self-care deficit

19. A child is admitted to the hospital for hypercalcemia and is placed on diuretic therapy. Which diuretic would the nurse expect to give?
    a) Hydrochlorothiazide (Aquazide)
    b) Mannitol (Osmitrol)
    c) Furosemide (Lasix)
    d) Spironolactone (Aldactone)

20. The nurse finishes a parent-teaching session on preventing heat-related illnesses for children who exercise. Which statement by a parent indicates understanding of preventive techniques taught?
    a) Water is the drink of choice to replenish fluids.
    b) Wearing dark clothing during exercise is recommended.
    c) During activity, stop for fluids every 15 to 20 minutes.
    d) Hydration should occur at the end of an exercise session.

21. A nurse is preparing to admit a child with possible obstructive uropathy. Which laboratory test should the nurse expect to draw on this child?
    a) Blood culture
    b) Platelet count
    c) Partial thromboplastin time (PTT)
    d) Blood urea nitrogen (BUN) and creatinine

22. A nurse is assessing infants for visually related developmental milestones. Which infant is showing a delay in meeting an expected milestone?
    a) A 4-month-old who has a social smile
    b) A 7-month-old who picks up a raisin by raking
    c) An 8-month-old who has just begun to inspect her own hand
    d) A 12-month-old who stacks blocks

23. A child comes to the clinic for an assessment 20 days post-bone marrow transplant. Which system should receive the highest priority during the nursing assessment?
    a) Respiratory
    b) Cardiovascular
    c) Integumentary
    d) Gastrointestinal

24. With a group of new parents, the nurse is reviewing treatment for viral illnesses such as influenza. Which statement by the parents indicates appropriate understanding of the teaching session?
    a) "Aspirin is acceptable if my child does not have a virus."
    b) "Some over-the-counter medications contain aspirin."
    c) "Acetaminophen is good for treatment of fevers in young children."
    d) "I can use ibuprofen as needed when my child has aches and pains."

25. Despite the availability of Children's Health Insurance Programs (CHIP), many eligible children are not enrolled. Which nursing intervention would be the most appropriate to help children become enrolled in CHIP?
    a) Advocate for the child by encouraging the family to investigate SCHIP eligibility
    b) Case management to limit costly, unnecessary duplication of services
    c) Educate the family about the need for keeping regular well-child-visit appointments
    d) Assess details of the family's income and expenditures

26. A child is scheduled for a kidney transplant. The nurse completes the preoperative teaching to prepare the child and parents for the surgery and postoperative considerations. Which statement by the parents indicates understanding of the teaching session?
    a) "We're happy our child won't have to take any more medicine after the transplant."
    b) "We understand our child won't be at risk anymore for catching colds from other children at school."
    c) "We know it's important to see that our child takes prescribed medications after the transplant."
    d) "We'll be glad we won't have to bring our child in to see the doctor again."

27. A preschool-aged client, diagnosed with croup, has an increased pCO_2, a decreased pH, and a normal HCO_3 blood-gas value. Which documentation in the medical record is the most appropriate?
    a) Uncompensated respiratory acidosis
    b) Uncompensated respiratory alkalosis
    c) Uncompensated metabolic alkalosis
    d) Uncompensated metabolic acidosis

28. Which nursing role is not directly involved when providing family-centered approach to the pediatric population?
    a) Advocacy
    b) Case management
    c) Patient education
    d) Researcher

29. An adolescent client diagnosed with Graves' disease is admitted to the hospital. Which clinical manifestations would the nurse expect on assessment?
    a) Tachycardia, fatigue, and heat intolerance
    b) Dehydration, metabolic acidosis, and hypertension
    c) Weight gain, hirsutism, and muscle weakness
    d) Hyperglycemia, ketonuria, and glucosuria

30. Which statement made by a parent during a well-child visit would cause the nurse to suspect the child has cerebral palsy?
    a) "My 6-month-old baby is rolling from back to prone now."
    b) "My 3-month-old seems to have floppy muscle tone."
    c) "My 8-month-old can sit without support."
    d) "My 10-month-old is not walking."

31. The nurse is teaching the parent of a type 1 diabetic preschool-age client about management of the disease. Which teaching point is appropriate for the nurse to include in this session?
    a) Allowing the client to administer all the insulin injections
    b) Allowing the client to choose which finger to stick for glucose testing
    c) Allowing the client to test blood glucose
    d) Allowing the client to draw up the insulin dose

32. A 12-year-old child is admitted to the unit for a surgical procedure. The child is accompanied by two parents and a younger sibling. What is the level of involvement in treatment decision making for this child?
    a) Assent
    b) None
    c) Mature minor
    d) Emancipated minor

33. A child is admitted to the hospital unit with a diagnosis of minimal-change nephrotic syndrome (MCNS). Which clinical manifestations does the nurse anticipate when conducting the admission assessment?
    a) Gross hematuria, albuminuria, fever
    b) Hematuria, bacteriuria, weight gain
    c) Hypertension, weight loss, proteinuria
    d) Massive proteinuria, hypoalbuminemia, edema

34. The nurse in a pediatric acute care unit is assigned the following tasks. Which task is not appropriate for the nurse to complete?
    a) Provide information to a mother of a newly diagnosed 4-year-old diabetic about local support-group options.
    b) Listen to the concerns of an adolescent about being out of school for a lengthy surgical recovery.
    c) Diagnose a 6-year-old with Diversional Activity Deficit related to placement in isolation.
    d) Diagnose an 8-year-old with acute otitis media and prescribe an antibiotic.

35. The nurse is conducting a health history for a school-age client. The parents of the client tell the nurse that their child has the following behaviors: excessive handwashing, counting objects, and hoarding substances. Based on these assessment findings, which diagnosis does the nurse anticipate for this client?
    a) Separation anxiety disorder
    b) Depression
    c) Obsessive-compulsive disorder
    d) Bipolar disorder

36. A 12-year-old child is admitted to the unit for a surgical procedure. The child is accompanied by two parents and a younger sibling. What is the level of involvement in treatment decision making for this child?
    a) Mature minor
    b) None
    c) Assent
    d) Emancipated minor

37. The nurse is providing instruction to the parents of an infant with a colostomy. Which statement by the parents indicates appropriate understanding of the teaching session?
    a) "We will use adhesive enhancers when we change the bag."
    b) "We will expect a moderate amount of bleeding after cleansing the area around the stoma."
    c) "We will watch for skin irritation around the stoma."
    d) "We will change the colostomy bag with each wet diaper."

38. A pediatric client diagnosed with Turner syndrome tells the nurse, "I feel different from my peers." Which response by the nurse is the most appropriate?
    a) "Tell me more about the feelings you are experiencing."
    b) "You seem to be upset about your disease."
    c) "These feelings are not unusual and should pass soon."
    d) "You'll start to grow soon, so don't worry."

39. The nurse is performing the initial assessment of a child newly diagnosed Kawasaki disease. Which symptoms would the nurse expect to assess with this child?
    a) Nonpalpable lymph nodes
    b) Dry, swollen, fissured lips
    c) Conjunctivitis with exudates
    d) Cyanosis of the hands and feet

40. A child is being prepared for an invasive procedure. The mother of the child has legal custody but is not present. After details of the procedure are explained, who can provide legal consent on behalf of a minor child for treatment?
    a) A cohabitating boyfriend of the child's mother
    b) A babysitter with written proxy
    c) A grandparent who lives in the home with the child
    d) The divorced parent without custody

41. A nurse is taking care of four different pediatric clients. Which client poses the great risk for dehydration?
    a) A 15-year-old working out in a weight room for an hour before football practice
    b) A 5-year-old refusing to eat because of a virus
    c) A newborn under a radiant warmer for an hour after the first bath
    d) A 10-year-old playing baseball outdoors in 85-degree heat

42. A nurse is planning care for a child with hyponatremia. The nurse, delegating care of this child to a new RN on the pediatric unit, cautions the new nurse to be especially alert for which condition in the child?
    a) Seizures
    b) Respiratory distress
    c) Bradycardia
    d) Hyperthermia

43. The telephone triage nurse at a pediatric clinic knows each call is important. Which call would require attentiveness from the nurse because of an increased risk of mortality?
    a) A term 2-week-old infant of American Indian descent with an upper respiratory infection
    b) A 1-week-old infant born at 40 weeks' gestation with symptoms of colic
    c) A 3-week-old infant born at 35 weeks' gestation with gastroenteritis
    d) A postterm 4-week-old infant non-Hispanic black descent with moderate emesis after feeding

44. A neonate has been diagnosed with a herpes simplex viral infection of the eye. Which medication will the nurse prepare to administer?
    a) Parenteral acyclovir (Zovirax) and vidarabine (VIRA-A) ophthalmic ointment
    b) Oral erythromycin
    c) Fluoroquinolone eye drops or ointment
    d) Intravenous penicillin

45. A school-age client is transported to the emergency department by ambulance from the scene of a car accident. The client is alert and oriented × 3; pulse, respirations, and blood pressure are stable; and the neck and back are immobilized on a backboard. The nurse sees no obvious bleeding. The client states, "I can't feel or move my legs." Which injury does the nurse suspect?
    a) Traumatic brain injury
    b) Ruptured spleen
    c) Traumatic shock
    d) Spinal cord injury

46. A child with inflammatory bowel disease is prescribed prednisone daily. At which time is it most appropriate for the family to administer the prednisone?
    a) Between meals
    b) With meals
    c) One hour before meals
    d) At bedtime

47. The nurse is expecting the admission of a child with severe isotonic dehydration. Which intravenous fluid should the nurse anticipate the practitioner to order initially to replace fluids?
    a) D5 0.2 percent (1/4) Normal Saline
    b) Albumin
    c) 0.9 percent Normal Saline (NS)
    d) D5W

48. A child is diagnosed with group A beta-hemolytic streptococcus (GABHS) infection of the throat. Which item will the nurse include in the teaching plan for the parents?
    a) Complete the entire course of antibiotics.
    b) Continue normal activities.
    c) Keep the child NPO (nothing by mouth).
    d) Do not allow the child to gargle with saltwater.

49. The nurse is assessing an infant brought to the clinic with diarrhea. The infant is alert but has dry mucous membranes. Which other sign indicates the infant is still in the early or mild stage of dehydration?
    a) Decreased blood pressure
    b) Tachycardia
    c) Bradycardia
    d) Increased blood pressure

50. A child with human immunodeficiency virus (HIV) also has oral candidiasis. Which type of mouth care solution will the nurse teach the child to use?
    a) Listerine
    b) Normal saline
    c) Scope
    d) Viscous lidocaine

51. The nurse is planning care for a school-age child diagnosed with bacterial meningitis. Which intervention is most appropriate?
    a) Measuring head circumference to assess developing complications
    b) Keeping environmental stimuli at a minimum
    c) Avoiding giving pain medications that could dull sensorium
    d) Having the child move the head from side to side at least every two hours

52. The nurse is teaching the parents of a group of cardiac patients. Which teaching guideline will the nurse include for any child who has undergone cardiac surgery?
    a) The child should be restricted from most play activities.
    b) The child should be evaluated to determine if prophylactic antibiotics for dental, oral, or upper-respiratory-tract procedures are necessary.
    c) The child should not receive routine immunizations.
    d) The child can be expected to have a fever for several weeks following the surgery.

53. A nurse is caring for a visually impaired school-age child. Which nursing intervention is the highest priority for this child during the admission process?
    a) Explaining playroom policies
    b) Orienting the child to where furniture is placed in the room
    c) Taking the child on a tour of the unit
    d) Letting the child touch equipment that will be used during the hospitalization

54. The nurse is checking peripheral perfusion to a child's extremity following a cardiac catheterization. Which assessment finding indicates adequate peripheral circulation to the affected extremity?
    a) A decrease in sensation with a weakened dorsalis pedis pulse
    b) A capillary refill of greater than three seconds
    c) A palpable dorsalis pedis pulse but a weak posterior tibial pulse
    d) A capillary refill of less than three seconds with palpable warmth

55. A nurse is planning care for a child with hyperkalemia. Which clinical manifestation will the nurse plan to assessment this child for based on the diagnosis?
    a) Hyperthermia
    b) Respiratory distress
    c) Bradycardia
    d) Seizures

56. An adolescent client diagnosed with panic disorder is prescribed paroxetine (Paxil), a selective serotonin reuptake inhibitor (SSRI). The client tells the nurse she often takes diet pills because she is trying to lose weight. Which response by the nurse is the most appropriate?
    a) "It is important to stop both the paroxetine (Paxil) and the diet pills."
    b) "You should discuss the safety of these two medications pills with a pharmacist."
    c) "Discontinue using the diet pills while taking the paroxetine (Paxil)."
    d) "You can continue with the paroxetine (Paxil) and the diet pills."

57. The nurse is preparing to ambulate a school-age client who had an appendectomy. In addition to pharmacological pain management, the nurse can use which nonpharmacological pain-management strategy for this client?
    a) A warm, moist pack
    b) A pillow on the abdomen
    c) A heating pad
    d) An ice pack

58. The nurse is planning care for a pediatric client diagnosed with adrenal hyperplasia. Which nursing diagnosis is most appropriate for this client?
    a) Depression Related to Inability to Take in Oral Fluids
    b) Nutrition: Less than Body Requirements due to Nausea and Vomiting
    c) Risk for Deficient Fluid Volume Related to Failure of Regulatory Mechanisms
    d) Impaired Social Interaction Related to Unnatural Facial Features

59. A toddler-age client has a tonic-clonic seizure while in a crib in the hospital. The client's jaw is clamped. Which nursing action is the priority?
    a) Restrain the child to prevent injury.
    b) Stay with the child and observe the respiratory status.
    c) Prepare the suction equipment.
    d) Place a padded tongue blade between the child's jaws.

60. A school-age client experiences a near-drowning episode and is admitted to the pediatric intensive-care unit (PICU). The parents express guilt over the near drowning of their child. Which response by the nurse is most appropriate?
    a) "Tell me more about your feelings related to the accident."
    b) "Why did you let the child almost drown?"
    c) "You will need to watch the child more closely."
    d) "The child will be fine, so don't worry."

61. A nurse is planning preoperative teaching for a school-age client scheduled to have a tonsillectomy. The client has a history of attention deficit hyperactivity disorder (ADHD). Which intervention will the nurse include in the plan of care?
    a) Ask other children who have had this procedure to talk to the child.
    b) Allow the child to lead the session to gain a sense of control.
    c) Play a television show in the background.
    d) Give instructions verbally and use a picture pamphlet, repeating points more than once.

62. The nurse is providing discharge teaching to a school-age client who was recently diagnosed with a latex allergy. Which product will the nurse educate the client and family to avoid?
    a) Chewing gum
    b) Footballs
    c) Plastic bottles
    d) Paper bags

63. Parents of an infant with slow weight gain ask the nurse if they can feed their baby a highly concentrated formula. Which response by the nurse is the most appropriate?
    a) "A higher-concentrated formula could lead to dehydration because of high sodium content; let's discuss other strategies."
    b) "An undiluted formula concentrate could be given to help the child gain weight; let's look at brands."
    c) "Evaporated milk could be given to the infant instead of the current formula you're using."
    d) "A higher-concentrated formula could be given for daytime feedings; let's work on a schedule."

64. A nurse is conducting a postoperative assessment on an infant who has just had a ventriculoperitoneal shunt placed for hydrocephalus. Which assessment finding would indicate a malfunction in the shunt?
    a) Movement of all extremities
    b) Incisional pain
    c) Bulging fontanel
    d) Negative Brudzinski sign

65. A supervisor is reviewing documentation of the nurses in the unit. Which client documentation is the most accurate and contains all the required part for a narrative entry?
    a) "4:00 tracheostomy dressing removed with dime-size stain of dry serous exudate. Site cleansed with normal saline. Dried with sterile gauze. New sterile tracheostomy sponge and trach ties applied. Respirations regular and even throughout the procedure. F. Luck RN"
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66. A 7-year-old child is admitted for acute appendicitis. The parents are questioning the nurse about expectations during the child's recovery. Which information tool would be most useful in answering a parent's questions about the timing of key events?
    a) Clinical pathways
    b) National clinical practice guidelines
    c) Child mortality statistics
    d) Healthy People 2020

67. A nurse is concerned about the safety of a suicidal adolescent client and wants to be prepared for the use of physical restraints, if necessary. Which action by the nurse is the most appropriate in this situation?
    a) Obtain a healthcare provider's order, and follow the institution's policy for use of restraints.
    b) Ask for the child's permission before applying the restraints.
    c) Apply the restraints if parental permission is obtained.
    d) Apply the restraints, and then obtain a healthcare provider's order later.

68. A child is admitted to the hospital with pneumonia. The child's oximetry reading is 88 percent upon admission to the pediatric floor. Which is the priority nursing intervention for this child?
    a) Obtain a blood sample to send to the lab for electrolyte analysis.
    b) Begin oxygen per nasal cannula.
    c) Begin administration of intravenous fluids.
    d) Medicate for pain.

69. The nurse is caring for a child on bed rest who has severe edema in a left lower leg due to blocked lymphatic drainage. Which is the priority diagnosis for this child?
    a) Risk for Activity Intolerance
    b) Risk for Imbalanced Nutrition: Less Than Body Requirements
    c) Risk for Impaired Skin Integrity
    d) Risk for Altered Body Image

70. A 1-month-old client is admitted to the emergency room with severe diarrhea. Which assessment suggests the client is severely dehydrated?
    a) Low specific gravity of urine; skin color pale
    b) Skin moist and flushed; mucous membranes dry
    c) High specific gravity of urine; moist mucous membranes
    d) Fontanels depressed; capillary refill greater than three seconds

71. Pediatric nurses have foundational knowledge obtained in nursing school and add specific competencies related to the pediatric client. Which would be considered an additional specific expected competency of the pediatric nurse?
    a) Physical assessment
    b) Management of healthcare conditions
    c) Nursing process
    d) Anatomical and developmental differences

72. The parents of a client recently diagnosed with Down syndrome relate to the nurse that they "feel guilty about causing the condition." Which response by the nurse is the most appropriate?
    a) "Down syndrome is a condition that is carried on the X chromosome, so it came from the mother."
    b) "Down syndrome is caused by birth trauma, not by genetics."
    c) "Down syndrome is a condition that is genetically transmitted from both the father and the mother."
    d) "Down syndrome is a condition caused by an extra chromosome; the cause of it is unknown."

73. A child is being prepared for an invasive procedure. The mother of the child has legal custody but is not present. After details of the procedure are explained, who can provide legal consent on behalf of a minor child for treatment?
    a) The divorced parent without custody
    b) A babysitter with written proxy
    c) A grandparent who lives in the home with the child
    d) A cohabitating boyfriend of the child's mother

74. A 3-day-old preterm infant is diagnosed with necrotizing enterocolitis. The nurse plans care around the frequent radiographs. How frequently should the nurse anticipate that the radiology staff will bring the portable machine to the nursery?
    a) Every 48 hours
    b) Every 12 hours
    c) Every 24 hours
    d) Every 6 hours

75. A child is admitted to the hospital with the diagnosis of laryngotracheobronchitis (LTB). Which nursing intervention is the priority for this child?
    a) Administer antibiotics and assist with possible intubation.
    b) Swab the throat for a throat culture.
    c) Administer nebulized epinephrine and oral or IM dexamethasone.
    d) Obtain a sputum specimen.

76. The nurse is providing education to a pediatric client diagnosed with diabetes. The client will be playing soccer over the summer. Which change in the client's management will the nurse explore during this education session?
    a) Decreased food intake
    b) Increased need for insulin
    c) Increased food intake
    d) Decreased risk of insulin reaction

77. The nurse is providing care to an adolescent client diagnosed with systemic lupus erythematosus (SLE). Which action by the client indicates acceptance of body changes associated with SLE?
    a) She discusses the body changes with healthcare personnel only.
    b) She discusses the body changes with a peer.
    c) She refuses to attend school.
    d) She doesn't want to attend any social functions.

78. Which nursing intervention is most appropriate when caring for an infant with a myelomeningocele in the preoperative stage?
    a) Appling a heat lamp to facilitate drying and toughening of the sac
    b) Placing infant supine to decrease pressure on the sac
    c) Measuring head circumference every shift to identify developing hydrocephalus
    d) Appling a diaper to prevent contamination of the sac

79. The nurse is admitting an infant diagnosed with supraventricular tachycardia. Which intervention is the priority for this infant?
    a) Perform Valsalva's maneuver.
    b) Apply ice to the face.
    c) Prepare for cardioversion.
    d) Administer a beta blocker.

80. A child experienced a lacerated spleen in a motor vehicle accident. Which is the highest-priority nursing intervention on admission to the pediatric intensive care unit (PICU) following surgery?
    a) Maintaining IV fluids
    b) Administering blood products as ordered
    c) Observing for signs of hypovolemic shock
    d) Implementing strict bedrest

END OF EXAMINATION