MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

1) A nurse is providing information to a group of new mothers. The nurse would explain that newborns and young infants are more susceptible to infection because they have:  
   A) Been exposed to microorganisms during the birth process.  
   B) Passive transplacental immunity from maternal immunoglobulin G.  
   C) Immune systems that are not fully mature at birth.  
   D) High levels of maternal antibodies to diseases to which the mother has been exposed.

2) The hospital has just provided its nurses with information about biologic threats and terrorism. After completing the course, a group of nurses are discussing their responsibility in relation to terrorism. The nurses who correctly understood the presentation are the ones who identify their action to be:  
   A) Notifying the Centers for Disease Control and Prevention (CDC) if a large number of persons with the same life-threatening infection present to the Emergency Department.  
   B) Separating clients according to cultural, religious, or ethnic group.  
   C) Disposing of blood-contaminated needles in the sharps container.  
   D) Initiating isolation precautions for a hospitalized client with methicillin-resistant *Staphylococcus aureus* (MRSA).

3) The hospital has instructed its nurses that they must participate in disease surveillance associated with infectious agents. The nurses are warned that, of the following diseases, which is/are likely to be weapons of terrorists?  
   A) Rocky Mountain spotted fever, Lyme disease  
   B) Rubella, mumps, chickenpox  
   C) Severe acute respiratory syndrome (SARS)  
   D) Plague, anthrax, smallpox

4) The school nurse is trying to prevent the spread of a flu virus through the school. Infection control strategies that may be employed include: (Select all that apply.)  
   A) Separating children with infections from well children.  
   B) Teaching parents safe food-preparation and storage techniques.  
   C) Sanitizing toys, telephones, and doorknobs to kill pathogens.  
   D) Teaching children to wash their hands after using the bathroom.  
   E) Withholding immunizations for children with compromised immune systems.

5) A mother brings her 4-month-old infant in for a routine checkup and vaccinations. The mother reports that the 4-month-old was exposed to a brother who has the flu. In this case, the nurse will:  
   A) Withhold the DTaP vaccination, but give the others as scheduled.  
   B) Withhold the vaccinations.  
   C) Give the vaccinations as scheduled.  
   D) Give the infant the flu vaccination, but withhold the others.
6) A mother refuses to have her child immunized with the measles, mumps, and rubella (MMR) vaccine because she believes that letting her infant get these diseases will help him fight off other diseases later in life. The nurse's most appropriate response to this mother is to:
   A) Tell her that not immunizing her infant might protect pregnant women.
   B) Explain that antibodies can fight many diseases.
   C) Honor her request because she is the parent.
   D) Explain that if her child contracts measles, mumps, or rubella, he could have very serious and permanent complications from these diseases.

7) The nurse prepares the second diphtheria, tetanus toxoid, and acellular pertussis (DTAP) and second inactivated polio vaccine (IPV) immunization injections for an infant who is 4 months old. Provided a separate injection site is used for all injections, the nurse also may give which of the following immunizations during the same well child care appointment?
   A) Influenza (TIV)
   B) Haemophilus influenzae type B (Hib)
   C) Varicella (Var)
   D) Measles, mumps, rubella (MMR)

8) The nurse prepares a DTaP (diphtheria, tetanus toxoid, and acellular pertussis) immunization for a 6-month-old infant. To administer this injection safely, the nurse chooses which of the following needles (size and length), injection type, and injection site?
   A) 25 gauge ½-inch needle, IM (intramuscular), anterolateral thigh
   B) 25 gauge ½-inch needle, ID (intradermal), deltoid
   C) 22 gauge 1—2 inch needle, IM (intramuscular), ventrogluteal
   D) 25 gauge ¾-inch needle, SQ (subcutaneous), anterolateral thigh

9) A goal of Healthy People 2010 is full immunization of 95% of children in kindergarten and first grade in the United States. To help reach this goal, the school nurse can teach families about which of the following?
   A) A minor illness with a low-grade fever is a contraindication to receiving an immunization.
   B) Vaccines should be given one at a time for optimum active immunity.
   C) The risks of communicable diseases and the risks and benefits of vaccines from vaccine information statements as required by the National Vaccine Injury Act of 1986 and 1993
   D) Premature infants and low-birth-weight infants should receive half-doses of vaccines for protection from communicable diseases.

10) The nurse is planning equipment needs for a new health provider office in which immunizations will be given among other services. Which indicates the priority consideration?
   A) A new office is not allowed to have vaccines for at least one year.
   B) A medication refrigerator is necessary for vaccine storage.
   C) Cabinet space should be allocated specifically for the vaccines.
   D) At least one refrigerator for cold storage is needed in this office.

11) A 3-year-old child is lying in a fetal position. The child has pale skin, glassy eyes, and a flat affect. The child is irritable, and refuses food and fluids. The child's vital signs are a temperature of 40.1°C (104.2°F), pulse of 120/minute, and respirations of 28/minute. The best, most comprehensive description of this child's condition is:
   A) Feverish.
   B) Toxic.
   C) Tired.
   D) Flushed.
12) A parent reports that her 5-year-old child, who has had all recommended immunizations, had a mild fever 1 week ago, and now has bright red cheeks and a lacy red rash on the trunk and arms. The nurse recognizes that this child might have:

A) German measles (rubella).  
B) Chickenpox (varicella).  
C) Roseola (Exanthem subitum).  
D) Fifth disease (Erythema infectiosum).

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

13) A parent is given a prescription of amoxicillin for his 1-year-old son. The prescription reads "amoxicillin 125mg/5mL PO t.i.d. ×10 days." What is the total volume in milliliters of amoxicillin that must be dispensed? _____

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

14) The hospital admitting nurse is taking a history on a child’s illness from the parents. The nurse concludes that the parents treated their 6-year-old child appropriately for a fever when they report that they:

A) Used aspirin.  
B) Put the child in a tub of cold water.  
C) Alternated acetaminophen with ibuprofen.  
D) Offered generous amounts of fluids frequently.

15) A 2-year-old child with a fever is prescribed amoxicillin clavulanate 250 mg/5 cc t.i.d. PO ×10 days for otitis media. To guard against antibiotic resistance, the nurse instructs the parent to:

A) Stop the antibiotic if the child is afebrile.  
B) Administer a loading dose for the first dose.  
C) Measure the prescribed dose in a household teaspoon.  
D) Give the antibiotic for the full 10 days.

16) A preschool-age child diagnosed with AIDS has developed respiratory compromise. Which technique would the nurse utilize to encourage effective lung expansion?

A) Chest physiotherapy  
B) Bubble blowing  
C) Coughing and deep breathing  
D) Incentive spirometry

17) A nurse has begun an infusion of intravenous immunoglobulin (IVIG) to a child who has combined immunodeficiency disease. The infusion should be stopped if the child:

A) Experiences a mild headache.  
B) Complains of being thirsty.  
C) Voids clear yellow urine.  
D) Develops severe shaking, chills, and fever.

18) A nurse is administering an intramuscular vaccination to an infant who has Wiskott-Aldrich syndrome. Because of this syndrome, this infant is at higher risk for:

A) Pain at the injection site.  
B) Redness and swelling at the injection site.  
C) Bleeding at the injection site.  
D) Mild rash at the injection site.
19) Children with severe combined immune deficiency (SCID) often receive blood products. Any blood products administered to children with SCID who have T-cell deficiencies should be irradiated and cytomegalovirus-negative because of the risk of:
   A) Transfusion reaction from lymphocytes and platelets in the donor blood.
   B) Infection and graft-versus-host disease from lymphocytes in the donor blood.
   C) Infection and graft-versus-host disease from erythrocytes in the donor blood.
   D) Transfusion reaction and infection from lymphocytes in the donor blood.

20) The nurse is counseling the parents of a teen with HIV. Parents need to understand which of the following? Select all that apply.
   A) The necessity of discussing the diagnosis with the teen
   B) Support groups available for themselves and their child
   C) That their teen is dying and needs hospice care
   D) How the teen got HIV
   E) Where to find emotional supports and outlets for fears, anxieties, and concerns

21) A nurse is planning care for a child with human immunodeficiency virus (HIV). The highest-priority nursing problem for this child is:
   A) Ineffective thermoregulation.
   B) Ineffective tissue perfusion, peripheral.
   C) Risk for infection.
   D) Risk for fluid volume deficit.

22) A child is receiving didanosine, a nucleoside reverse transcriptase inhibitor, for human immunodeficiency virus (HIV). The lab value the nurse should monitor is:
   A) Sodium.
   B) Potassium.
   C) Red blood cell count.
   D) Glucose.

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

23) A child with the human immunodeficiency virus is started on sulfamethoxazole and trimethoprim (Bactrim) for Pneumocystis carinii pneumonia (PCP) prophylaxis. The recommended dose is based on the trimethoprim (TMP) component, and is 15—20 mg TMP/kg/day in divided doses every 6—8 hours. The child weighs 6.8 kg. What is the highest dose of TMP he can receive a day? ________

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

24) A child with human immunodeficiency virus (HIV) also has oral candidiasis. Mouth care for this child should be with:
   A) Scope.
   B) Listerine.
   C) Normal saline.
   D) Viscous lidocaine.

25) A problem the nurse anticipates for a family who has a child with acquired immunodeficiency syndrome (AIDS) is:
   A) Risk for impaired parenting.
   B) Family coping, compromised.
   C) Anticipatory grieving.
   D) Parental role conflict.
26) An adolescent has systemic lupus erythematosus (SLE). An action by the adolescent that indicates acceptance of body changes with SLE would be that the teen:
   A) Discusses the body changes with health care personnel only.
   B) Discusses the body changes with a peer.
   C) Doesn't want to attend any social functions.
   D) Refuses to attend school.

27) A school-age child is being seen in the oncology clinic for possible Hodgkin's disease. During the course of the nursing assessment, which findings would be expected? Select all that apply.
   A) Complaints of night sweats
   B) Fever
   C) Painless cervical nodes
   D) Painful cervical nodes
   E) Poor appetite

28) A child has been diagnosed with Wilms' tumor, and is being treated with chemotherapy. Because many chemotherapeutic agents cause bone marrow depression, before administering the chemotherapy, the nurse will determine if this child has any infection-fighting capability by monitoring the:
   A) Hemoglobin.
   B) Absolute neutrophil count (ANC).
   C) Red blood cell count.
   D) Platelets.

29) A child has cancer, and has been treated with chemotherapy. The latest lab value indicates the white blood cell count is very low. The nurse would expect to administer:
   A) Epoetin (human recombinant erythropoietin).
   B) Ondansetron (Zofran).
   C) Oprelvekin (Neumega).
   D) Filgrastim (Neupogen).

30) A child has thrombocytopenia secondary to chemotherapy treatments. The nurse should not:
   A) Perform oral hygiene.
   B) Monitor intake and output.
   C) Administer intramuscular (IM) injections.
   D) Use palpation as a component of assessment.

31) The child is receiving chemotherapy for acute lymphocytic leukemia. The nurse should monitor the child for which of the following signs of tumor lysis syndrome?
   A) Respiratory distress and cyanosis
   B) Thrombocytopenia and leukocytosis
   C) Upper-extremity edema and neck vein distension
   D) Oliguria and altered levels of consciousness

32) The nurse is monitoring the urine-specific gravity and pH of a child receiving chemotherapy. The nurse will try to maintain the urine values at:
   A) Specific gravity 1.030; pH 7.5.
   B) Specific gravity 1.005; pH 7.5.
   C) Specific gravity 1.005; pH 6.
   D) Specific gravity 1.030; pH 6.
33) A child undergoing chemotherapeutic treatment for cancer is being admitted to the hospital for fever and possible sepsis. Cultures, antibiotics, and acetaminophen (Tylenol) have been ordered for this child. Which order should the nurse do first?
   A) Administer the Tylenol.       B) Obtain the cultures.
   C) Administer the antibiotics.    D) Any of the three

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

34) The nurse is admitting a client with an infratentorial brain tumor. The nurse is teaching the parents about the tumor. Identify the area of the brain the nurse should show the parents where this type of tumor occurs.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

35) A child has been diagnosed with Wilms' tumor. Preoperative nursing care would involve:
   A) Administration of packed red blood cells.    B) Careful bathing and handling.

36) An adolescent is receiving methotrexate chemotherapy after undergoing limb salvage surgery for osteogenic sarcoma. The nurse knows the teen understands the purpose of leucovorin therapy after the methotrexate if the teen says:
   A) "I know I will be taking the leucovorin every 6 hours for about the next 3 days."
   B) "I don't have any nausea, so I won't need the leucovorin."
   C) "I don't have any pain, so I won't need to take the leucovorin this time."
   D) "I'm glad I only need one dose of the leucovorin."

37) A child with rhabdomyosarcoma is to undergo radiation therapy after surgical removal of the tumor. The parents should be taught to:
   A) Apply lotion to the area before radiation therapy.
   B) Vigorously scrub the area when bathing.
   C) Remove any markings left after each radiation treatment.
   D) Apply sunscreen to the area when the child is exposed to sunlight.

38) The child has been admitted to the hospital unit newly diagnosed with retinoblastoma. The nurse would expect to see:
   A) A red reflex.       B) Yellow sclera.
   C) Blue-tinged sclera.   D) A white pupil.
An understanding of what cancer is and how it is treated. 

Acceptance, especially if able to discuss the disease with children their own age. 

A preschool-age child is being seen in the oncology clinic for a suspected diagnosis of cancer. A common reaction preschool-age children have to a diagnosis of cancer is: 

A) Unawareness of what the illness is. 
B) Thoughts that they caused their illness and are being punished. 
C) Acceptance, especially if able to discuss the disease with children their own age. 
D) An understanding of what cancer is and how it is treated.

The neonatal nurse explains to new parents that infants are at greater risk for fluid and electrolyte imbalance than are older children. Which of the following parent comments would indicate that further education is needed?

A) "Infants maintain their temperature by losing heat through their heads."
B) "Infants have a higher metabolic rate than older children do."
C) "Infants lose water through their skin, and they have a larger proportion of skin surface area than older children do."
D) "An infant has little body water for reserve, as compared with an adult."

A 6-month-old infant is admitted with severe dehydration. Effectiveness of therapy is evaluated with which of the following assessment measures? Select all that apply.

A) Document mucous membrane moisture every shift. 
B) Record intake and output accurately. 
C) Daily weights on the same scale, same time, with no clothes 
D) Evaluate level of consciousness continuously. 
E) Document abdominal girth every shift.

A nurse is taking care of four different pediatric clients. The client with the greatest risk for dehydration is the child:

A) Over 2 years of age with migraine headaches. 
B) Over 2 years of age with a broken arm. 
C) Under 2 years of age with cellulitis of the left leg. 
D) Under 2 years of age with tachypnea.

A child with croup has an increased P CO2 a decreased pH, and a normal H CO3 blood gas value. The nurse interprets this as uncompensated:

A) Respiratory alkalosis. 
B) Metabolic acidosis. 
C) Metabolic alkalosis. 
D) Respiratory acidosis.

In the morning, a nurse receives a report on four pediatric clients, each of whom has some form of fluid volume excess. Which child should the nurse check first? The child with:

A) Dependent and sacral edema, regular pulse. 
B) Hepatomegaly, normal respiratory rate. 
C) Tachypnea and pulmonary congestion. 
D) Periorbital edema, normal respiratory rate.

A nurse is planning care for a child with hyponatremia. The nurse delegating care of this child to an LVN cautions the LVN about which complication?

A) Seizures 
B) Hyperthermia 
C) Bradycardia 
D) Respiratory distress
46) A 1-month-old infant is admitted to the Emergency Department with severe diarrhea. Which assessment suggests the infant 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) Fontanelles depressed; capillary refill greater than 3 seconds

47) The nurse is expecting the admission of a child with severe isotonic dehydration. Which intravenous fluid should the nurse anticipate the doctor to order initially to replace fluids?
   A) D5 0.2% (1/4) normal saline
   B) 0.9% normal saline
   C) D5W
   D) Albumin

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

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

49) A child is being treated for dehydration with intravenous fluids. The child currently weighs 13 kg, and is estimated to have lost 7% of her normal body weight. The nurse is double-checking the IV rate the physician has ordered. Replacement fluid is the percentage of lost body weight 10 per kg of body weight. According to the calculation for maintenance and replacement fluid, this child’s hourly IV rate for 24 hours should be _______.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

50) An infant is in the hospital for hypernatremia. Which of the following is the most appropriate means of collecting urine for a specific gravity test?
   A) Performing a sterile in-and-out catheterization to collect urine for the specific gravity test strip
   B) Inserting a Foley catheter to obtain a sterile urine specimen for the specific gravity test strip
   C) Placing a urine collection bag on the infant
   D) Placing cotton balls in the diaper and then (wearing gloves) squeezing a drop of urine from the cotton balls onto the specific gravity test strip

51) A 6-year-old child is hypokalemic. The nurse is helping the child choose menu items. The nurse would encourage this child to select which foods?
   A) Hamburger with French fries
   B) Pizza with a fruit plate
   C) Fajita with rice
   D) Chicken strips with chips

52) 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) Spironolactone (Aldactone)
   D) Furosemide (Lasix)
SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

53) The nurse is performing a newborn assessment on a male infant with hypospadias. 
Identify which picture depicts the expected assessment finding.

A B

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

54) A child is admitted with acute glomerulonephritis. The nurse would expect the urinalysis during this acute phase to show which results?
A) Bacteriuria, hematuria
B) Proteinuria, decreased specific gravity
C) Hematuria, proteinuria
D) Bacteriuria, increased specific gravity

55) A nurse is preparing to admit a child with possible obstructive uropathy. The nurse should expect to draw which lab on this child?
A) Platelet count
B) Blood culture
C) Partial thromboplastin time (PTT)
D) BUN and creatinine

56) Which symptoms are characteristic of a preschool-age child with a urinary tract infection?
A) Headache, hematuria, vertigo
B) Foul-smelling urine, elevated blood pressure BP, hematuria
C) Severe flank pain, nausea, headache
D) Urgency, dysuria, fever

57) The nurse teaches parents that the anticholinergic drug used to treat enuresis is:
A) Imipramine (Tofranil).
B) Spironolactone (Aldactone).
C) Desmopressin acetate (DDAVP).
D) Oxybutynin (Ditropan).

58) A child has been admitted to the hospital unit with a diagnosis of minimal change nephrotic syndrome. The clinical manifestations will include which signs and/or symptoms?
A) Gross hematuria, albuminuria, fever
B) Massive proteinuria, hypoalbuminemia, edema
C) Hematuria, bacteriuria, weight gain
D) Hypertension, weight loss, proteinuria

59) A 4-year-old has acute glomerulonephritis, and is admitted to the hospital. Which is an appropriate nursing diagnosis for this child?
A) Altered growth and development related to a chronic disease
B) Risk for infection related to hypertension
C) Risk for injury related to loss of blood in urine
D) Fluid volume excess related to decreased plasma filtration
60) A child in renal failure has hyperkalemia. The nurse plans to instruct the child and the parents to avoid which of the following foods?
A) Hamburger on a bun and cherry Jell-O
B) Spaghetti and meat sauce, and breadsticks
C) Bananas, carrots, and green leafy vegetables
D) Chips, cold cuts, and canned foods

61) A child with nephrotic syndrome is severely edematous. The doctor has placed him on bedrest. Which would be an important nursing intervention for this child?
A) Monitor blood pressure every 2 hours.
B) Encourage fluids.
C) Reposition the child every 2 hours.
D) Limit visitors.

62) A child with nephrotic syndrome has been placed on prednisone. The nurse knows that for this syndrome, prednisone will be given how often?
A) On a short-burst schedule
B) Daily for 6 weeks, then 6 weeks of alternate-day doses
C) Infrequently
D) Daily for 1 week

63) A child with acute glomerulonephritis is in the playroom, and experiences blurred vision and headache. Which action should be taken by the nurse?
A) Obtain a blood pressure reading on the child and notify the physician.
B) Reassure the child and encourage bedrest until the headache improves.
C) Check the urine to see if hematuria has increased.
D) Obtain serum electrolytes and send urinalysis to the lab.

64) A child has undergone a kidney transplant, and is receiving cyclosporine. The parents ask the nurse about the reason for the cyclosporine. Which is the correct explanation of the drug’s purpose?
A) It decreases pain.
B) It improves circulation.
C) It suppresses rejection.
D) It boosts immunity.

65) A child is undergoing hemodialysis. For which complication should the child be concerned?
A) Neutropenia
B) Headaches
C) Shock
D) Hypertension

66) A child is scheduled for a kidney transplant. The nurse has completed the preop teaching to prepare the child and parents for the surgery and postop considerations. The nurse will know the parents realistically understand the transplantation process that is involved with a kidney transplant if they make which statement?
A) "We'll be glad we won't have to bring our child in to see the doctor again."
B) "We're happy our child won't have to take any more medicine after the transplant."
C) "We understand our child won't be at risk anymore for catching colds from other children at school."
D) "We know it's important to see that our child takes prescribed medications after the transplant."

67) Which should be included in discharge instructions for care of a child after an orchiopexy?
A) Information to the parents about the child resuming normal vigorous activities
B) Reassurance to the parents that infertility is not a future risk
C) Explanation to the parents about the need for loose and nonrestrictive clothing
D) Discussion with the parents about the low incidence of testicular malignancy and no further need for any follow-up
68) The nurse has just finished 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) "Hydration should occur at the end of an exercise session."
   D) "During activity, stop for fluids every 15—20 minutes."

69) The nurse is assessing an infant brought to the clinic because of diarrhea. The infant is alert, but has dry mucous membranes. Which other sign indicates that the infant still is in the early or mild stage of dehydration?
   A) Increased blood pressure
   B) Decreased blood pressure
   C) Bradycardia
   D) Tachycardia

70) A school-age child with juvenile arthritis asks the nurse to recommend an exercise activity. The nurse should recommend:
   A) Football.
   B) Swimming.
   C) Basketball.
   D) Softball.

71) A child with a myelomeningocele has a latex allergy. Which product found in the community should not be used by this child?
   A) T-shirt appliqués
   B) Play dough
   C) Elmer's school glue
   D) Mylar balloons

72) A child comes in to see the school nurse for a possible anaphylactic reaction to peanuts. Which drug should the nurse initially plan to administer to this child, if indicated?
   A) Epinephrine through an EpiPen
   B) Prednisone, immediately
   C) Diphenhydramine (Benadryl)
   D) Oxygen