ATI Care of Children RN 2019 Proctored Exam - Level 3! Peds 2019. All Questions with the Answers Higlighted

Peds 2019

• A nurse is assessing a school-age child who has heart failure and is taking furosemide.

Which of the following findings should the nurse identify as an indication that the medication is effective?

- An increase in venous pressure
- b. a decrease in peripheral edema
- c. a decrease in cardiac output
- d. an increase in potassium levels
- A nurse is assessing an infant who has acute otitis media. Which of the following findings should the nurse expect (select all that apply)
- Increased appetite
- enlarged subclavian lymph node
- c. Crying
- d. Restlessness
- e. fever
- a nurse is providing teaching to the parents of an infant who is to undergo pilocarpine

lontophoresis Testing for Cystic Fibrosis. Which of the following statements should the nurse

include in the teaching?

- We will measure the amount of protein in your baby's urine over 24 hour period
- The test will measure the amount of water in your baby's sweat
- a nurse will insert an IV prior to the test
- your baby will need to fast for 8 hours prior to the test
- A nurse in an urgent care clinic is prioritizing care for children. Which of the following children should the nurse assess first?
- A toddler who has nephrotic syndrome and facial edema
- a preschool-age child who has a muffled voice and no spontaneous cough
- a preschool-age child who has diabetes mellitus and a blood glucose of

200 mg/dL

- an adolescent who has Crohn's disease and recent weight loss of 5kg mg(11 lb)
- 5 .A nurse is providing teaching to the parents of a toddler who is to undergoa sweat chloride test. Which of the following statements should the nurse include?
- The purpose of the test is to determine if your child has Crohn's disease
- the technician will use a device to produce an electrical current during thetest
- during the test, your child will be in a room that is cold
- d. your child sweat will be collected over 24 hours
- A nurse in the emergency department is caring for an adolescent who is requesting testing for STI. Which of the following action is appropriate for thenurse to take?
- Request verbal consent from the social worker
- contact the client's parents to obtain phone consent
- postpone the testing until the client's parents are present
- d. obtain written consent from the client
- A nurse in the emergency department is assessing the toddler who has hyperpyrexia severe dyspnea and drooling which of the following actions should the nurse take first?
- · obtain a blood culture from the toddler
- administering antibiotic to the toddler
- insert an IV catheter for the toddler
- prepare the toddler for nasotracheal intubation
- A nurse is providing teaching to a 10 year old child with scheduled for an arterial cardiac catheterization. Which of the following information should thenurse include in the teaching?
- You will have your dressing removed 12 hours after the procedure
- b. you will need to keep your legs straight for 8 hours following the procedure
- c. you will be on a clear liquid diet for 24 hours following the procedure
- d. you will be on bed rest for 2 days after the procedure9.
- A nurse is caring for a preschooler who is post-operative following a tonsillectomy. The child

is now ready to resume oral intake which of the following dietary choices should the nurse offer

- sugar-free Cherry gelatin
- vanilla ice cream
- chocolate milk

the child?

- lime flavored ice pop
- A nurse is caring for an infant who has Patent ductus arteriosus. Thenurse should identify

that the defect is a switch of the following locations of the heart. (you willfind hot spots to select

in the artwork below. Select only the hot spot that corresponds to your answer) Answer: B

- A nurse is caring for a 10 month old child was brought to the emergency department by his parents following a head injury. Which of the following actions should the nurse take first?
- Inspect for fluid leaking from the ears (thinking about CSF leakage severe trauma =

urgent, after respiratory status is confirmed)

- assess respiratory status
- check pupil reactions
- examine the scalp for lacerations
- A charge nurse is planning care for an infant who has failure to thrive. Which of the following actions should the nurse include in the plan of care?
- Assign consistent nursing Staff Care for the infant
- · Keep infant in a visually stimulating environment
- c. use half-strength formula when feeding the infant
- d. give the infant fruit juice between feedings
- A nurse is providing teaching about home care to the parent of a child who has scabies. Which of the following instruction should the nurse includein the teaching?
- a. Wash your clients hair with shampoo containing Ketoconazoleb. soak Combs and brushes in boiling water for 10 minutes
- c. apply petroleum jelly to the affected areas