

ATI Care of Children RN 2019 Proctored Exam – Level 3 / Peds 2019 All 70 Questions with the Correct Answers AGRADE

A nurse is assessing a school aged 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?

- A. A increase in venous pressure
- B. A decrease in peripheral edema
- C. A decrease in cardiac output
- D. An increase in potassium levels

B. A decrease in peripheral edema

A nurse is assessing an infant who has acute otitis media. Which of the following findings should the nurse expect (SATA)

- A. Increased appetite
- B. Enlarged subclavian lymph nodes
- C. Crying
- D. Restlessness
- E. Fever

C. Crying

D. Restlessness

E. Fever

A nurse is providing teaching to the parents of an infant who is to undergo pilocarpine iontophoresis testing for cystic fibrosis. Which of the following statements should the nurse include in the teaching?

- A. We will measure the amount of protein in your baby's urine over a 24 hour period.
- B. The test will measure the amount of water in your baby's sweat.
- C. A nurse will insert an IV prior to the test
- D. Your baby will need to fast for 8 hours prior to the test

B. The test will measure the amount of water in your baby's sweat

A nurse in an urgent care clinic is prioritizing care for children. Which of the following children should the nurse assess first?

- A. A toddler who has nephrotic syndrome and facial edema
- B. A preschool age child who has a muffled voice and no spontaneous cough
- C. A preschool age child who has diabetes mellitus and a blood glucose of 200 mg/dL
- D. An adolescent who has Crohn's disease and a recent weight loss of 5 kg (11 lb)

B. A preschool age child who has a muffled voice and no spontaneous cough.

A nurse is providing teaching to the parents of a toddler who is to undergo a sweat chloride test. Which of the following statements should the nurse include?

- A. The purpose of the test is to determine if your child has Crohn's disease
- B. The technician will use a device to produce an electrical current during the test.
- C. During the test your child will be in a room that is cold
- D. Your child's sweat will be collected over 24 hours

D. Your child's sweat will be collected over 24 hours

A nurse is providing teaching to the parents of a child who has impetigo. Which of the following instructions should the nurse include in the teaching?

- A. Apply bacterial ointment to lesions
- B. Soak hair brushes in boiling water for 10 minutes
- C. Administer acyclovir PO two times per day
- D. Seal soft toys in a plastic bag for 14 days

A. Apply bacterial ointment to lesions.

A nurse in the emergency department is caring for an adolescent who is requesting testing for an STI. Which of the following actions is appropriate for the nurse to take?

- A. Request verbal consent from the social worker
- B. Contact the patient's parents to obtain phone consent
- C. Postpone the testing until the patient's parents are present.
- D. Obtain written consent from the

patient 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?

- A. Obtain a blood culture from the toddler
- B. Administering antibiotics to the toddler
- C. Insert an IV catheter for the toddler
- D. Prepare the toddler for nasotracheal

intubation D. Prepare the toddler for

nasotracheal intubation

A nurse is providing teaching to a 10 year old child scheduled for an arterial cardiac catheterization. Which of the following information should the nurse include in the teaching?

- A. 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 procedure

B. You will need to keep your legs straight for 8 hours following the procedure

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 the child?

- A. Sugar free cherry gelatin
- B. Vanilla ice cream
- C. Chocolate milk
- D. Lime flavored ice pop

D. Lime flavored ice pop

A nurse is caring for an infant who has patent ductus arteriosus. The nurse should identify that the defect is a switch of the following locations of the heart.

B.

A school nurse is assessing a 7 year old student. The nurse should identify which of the following findings is a potential indicator of physical abuse?

- A. Abrasions to the knees
- B. Front deciduous teeth missing
- C. Weight in 45th percentile
- D. Bruising around the

wrists **D. Bruising around the**

wrists

A nurse is caring for a 10 month old child who was brought to the ER by his parents following a head injury. Which of the following actions should the nurse take first?

- A. Inspect for fluid leaking from the ears
- B. Assess respiratory status
- C. Check pupil reactions
- D. Examine the scalp for

lacerations **B. Assess respiratory**

status

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?

- A. Assign consistent nursing staff care for the infant
- B. Keep the infant in a visually stimulating environment
- C. Use half strength formula when feeding the infant
- D. Give the infant fruit juice between feedings

A. Assign consistent nursing staff care for the infant

A nurse is providing teaching about home care to the parent of a child who has scabies. Which of the following instructions should the nurse include in the teaching?

- A. Wash your patients hair with shampoo containing Ketoconazole
- B. Soak combs and brushes in boiling water for 10 minutes
- C. Apply petroleum jelly to the affected areas
- D. Treat everyone who came into close contact with the

child D. Treat everyone who came into close contact with

the child

A nurse is caring for a preschooler who refuses to take a start dose of oral diphenhydramine. Which of the following statements should the nurse make?

- A. The medication isn't bad it tastes like candy
- B. Let me know when you want to take the medication
- C. The medication will treat your hypersensitivity reaction
- D. Sometimes when a child has to take medications they feel

sad D. Sometimes when a child has to take medication they feel

sad

A nurse is teaching the parent of a school age child about bicycle safety. Which of the following instructions should the nurse include in the teaching?

- A. Your child should walk the bicycle through intersections
- B. Your child's feet should be 3-6 inches off the ground when seated on the bicycle
- C. You should try to keep the bicycle at least 3 feet from the curb while riding in the street
- D. Your child should ride the bicycle against the flow of traffic

A. Your child should walk the bicycle through the intersections

A nurse is caring for a school age child following the application of a cast to a fractured right

tibia. Which of the following actions should the nurse take first?

- A. Teach the child about cast care
- B. Pad the edges of the cast
- C. Administer pain medication
- D. Elevate the child's leg

D. Elevate the child's leg

A nurse is preparing to administer immunizations to a 3 month old infant. Which of the following is an appropriate action for the nurse to take to deliver atraumatic care?

- A. Provide a pacifier Coated with an oral sucrose solution prior to injections
- B. Use a 20 gauge needle for the injections.
- C. Apply eutectic mixture of local anesthetics (EMLA) cream immediately before the injections
- D. Inject the immunizations into the deltoid muscle

A. Provide a pacifier coated with an oral sucrose solution prior to the injections

A nurse is preparing a school age child for an invasive procedure. Which of the following actions should the nurse plan to take?

- A. Plan for 30 minute teaching session about the procedure
- B. Use vague language to describe the procedure
- C. Explain the procedure to the child when they are in the playroom
- D. Demonstrate deep breathing and counting

exercises **D. Demonstrate deep breathing and**

counting exercises

A nurse is providing teaching to the parents of a 2 month old infant who has developmental dysplasia of the hip and has a prescription for a Pavlik harness. Which of the following statements by the parents indicates an understanding of the teaching?

- A. We should adjust the straps daily
- B. We will apply lotion to the skin under the straps
- C. We will place the diaper under the straps
- D. We should expect our baby to wear this harness for two

weeks **C. We will place the diaper under the straps**

A nurse is preparing to collect a urine specimen from a female infant using a urine collection bag. Which of the following actions should the nurse take?

- A. Apply lidocaine gel to the perineum before attaching the bag
- B. Position the opening of the bag over the urethra and the anus

- C. Stretch the perineum taut when applying the bag
- D. Place a snug fitting diaper over the drainage

bagC. Stretch the perineum taut when applying

the bag

A nurse is planning care for a toddler who has developed oral ulcers in response to chemotherapy. Which of the following actions should the nurse include in the plan of care?

- A. Schedule routine oral care every 8 hours
- B. Cleanse the gums with saline soaked gauze
- C. More sending me closer with lemon glycerin swabs
- D. Administer oral viscous lidocaine

B. Cleanse the gums with saline soaked gauze

A nurse is providing discharge teaching to the parents of an infant who is at risk for SIDS. Which of the following statements by the parent indicates an understanding of the teaching?

- A. I will have my baby sleep next to me in the bed during the night
- B. Elmo my baby stuffed animal to the corner of her crib while she sleeps
- C. I will dress my baby in lightweight clothing to sleep
- D. I will lay my baby on her side to sleep for her naps

C. I will dress my baby in lightweight clothing to sleep

A nurse is monitoring an infant who is receiving opioids for pain. Which of the following findings should indicate to the nurse that the medication is having a therapeutic effect?

- A. Increase BP
- B. Limb withdrawal
- C. Relaxed facial expressions
- D. Bradycardia

C. Relaxed facial expressions

A nurse is caring for a 3 month old infant who has cleft of the soft palate. Which of the following actions should the nurse take?

- A. Discontinue feeding if the patients eyes become watery
- B. Postpone burping the infant until after completing each feeding
- C. Elevate the infants head to a 10 degree angle during feedings.

D. Feed the infant 177.4 ml (6 oz) of formula 3 times a day.

A. Discontinue feeding if the patients eyes become watery