

CHAPTER 1 Introduction to Child Health and Pediatric Nursing

MULTIPLE CHOICE

1. A nurse is planning a teaching session for parents of preschool children. Which statement explains why the nurse should include information about morbidity and mortality?

- a. Life-span statistics are included in the data.
- b. It explains effectiveness of treatment.
- c. Cost-effective treatment is detailed for the general population.
- d. High-risk age groups for certain disorders or hazards are identified.

ANS: D

Analysis of morbidity and mortality data provides the parents with information about which groups of individuals are at risk for which health problems. Life-span statistics is a part of the mortality data. Treatment modalities and cost are not included in morbidity and mortality data.

PTS: 1 DIF: Cognitive Level: Apply REF: 6-8

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

2. A clinic nurse is planning a teaching session about childhood obesity prevention for parents of school-age children. The nurse should include which associated risk of obesity in the teaching plan?

- a. Type I diabetes
- b. Respiratory disease
- c. Celiac disease
- d. Type II diabetes

ANS: D

Childhood obesity has been associated with the rise of type II diabetes in children. Type I diabetes is not associated with obesity and has a genetic component. Respiratory disease is not associated with obesity, and celiac disease is the inability to metabolize gluten in foods and is not associated with obesity.

PTS: 1 DIF: Cognitive Level: Apply REF: 3

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

3. Which is the leading cause of death in infants younger than 1 year?

- a. Congenital anomalies
- b. Sudden infant death syndrome
- c. Respiratory distress syndrome
- d. Bacterial sepsis of the newborn

ANS: A

Congenital anomalies account for 20.1% of deaths in infants younger than 1 year. Sudden infant death syndrome accounts for 8.2% of deaths in this age group. Respiratory distress syndrome accounts for 3.4% of deaths in this age group. Infections specific to the perinatal period account for 2.7% of deaths in this age group.

PTS: 1 DIF: Cognitive Level: Remember REF: 7

TOP: Integrated Process: Nursing Process: Assessment

MSC: Area of Client Needs: Health Promotion and Maintenance

4. Which leading cause of death topic should the nurse emphasize to a group of African-American boys ranging in ages 15 to 19 years?

- a. Suicide
- b. Cancer
- c. Firearm homicide
- d. Occupational injuries

ANS: C

Firearm homicide is the second overall cause of death in this age group and the leading cause of death in African-American males. Suicide is the third-leading cause of death in this population. Cancer, although a major health problem, is the fourth-leading cause of death in this age group. Occupational injuries do not contribute to a significant death rate for this age group.

PTS: 1 DIF: Cognitive Level: Understand REF: 5 | 8

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

5. Which is the major cause of death for children older than 1 year?

- a. Cancer
- b. Heart disease
- c. Unintentional injuries
- d. Congenital anomalies

ANS: C

Unintentional injuries (accidents) are the leading cause of death after age 1 year through adolescence. Congenital anomalies are the leading cause of death in those younger than 1 year. Cancer ranks either second or fourth, depending on the age group, and heart disease ranks fifth in the majority of the age groups.

PTS: 1 DIF: Cognitive Level: Remember REF: 8

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

6. Which is the leading cause of death from unintentional injuries for females ranging in age from 1 to 14?

- a. Mechanical suffocation
- b. Drowning
- c. Motorvehicle-related fatalities
- d. Fire- and burn-related fatalities

ANS: C

Motorvehicle-related fatalities are the leading cause of death for females ranging in age from 1 to 14, either as passengers or as pedestrians. Mechanical suffocation is fourth or fifth, depending on the age. Drowning is the second- or third-leading cause of death, depending on the age. Fire- and burn-related fatalities are the second-leading cause of death.

PTS: 1 DIF: Cognitive Level: Remember REF: 4

TOP: Integrated Process: Nursing Process: Assessment

MSC: Area of Client Needs: Health Promotion and Maintenance

7. Which factor most impacts the type of injury a child is susceptible to, according to the child's age?

- a. Physical health of the child
- b. Developmental level of the child
- c. Educational level of the child
- d. Number of responsible adults in the home

ANS: B

The child's developmental stage determines the type of injury that is likely to occur. The child's physical health may facilitate the child's recovery from an injury but does not impact the type of injury. Educational level is related to developmental level, but it is not as important as the child's developmental level in determining the type of injury. The number of responsible adults in the home may affect the number of unintentional injuries, but the type of injury is related to the child's developmental stage.

PTS: 1 DIF: Cognitive Level: Understand REF: 3-4

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

8. Which is now referred to as the new morbidity?

- a. Limitations in the major activities of daily living
- b. Unintentional injuries that cause chronic health problems
- c. Discoveries of new therapies to treat health problems
- d. Behavioral, social, and educational problems that alter health

ANS: D

The new morbidity reflects the behavioral, social, and educational problems that interfere with the child's social and academic development. It is currently estimated that the incidence of these issues is from 5% to 30%. Limitations in major activities of daily living and unintentional injuries that result in chronic health problems are included in morbidity data. Discovery of new therapies would be reflected in changes in morbidity data over time.

PTS: 1 DIF: Cognitive Level: Remember REF: 3

TOP: Integrated Process: Nursing Process: Assessment

MSC: Area of Client Needs: Health Promotion and Maintenance

9. A nurse on a pediatric unit is practicing family-centered care. Which is most descriptive of the care the nurse is delivering?

- a. Taking over total care of the child to reduce stress on the family
- b. Encouraging family dependence on health care systems
- c. Recognizing that the family is the constant in a child's life
- d. Excluding families from the decision-making process

ANS: C

The three key components of family-centered care are respect, collaboration, and support. Family-centered care recognizes the family as the constant in the child's life. Taking over total care does not include the family in the process and may increase stress instead of reducing stress. The family should be enabled and empowered to work with the health care system. The family is expected to be part of the decision-making process.

PTS: 1 DIF: Cognitive Level: Remember REF: 8

TOP: Integrated Process: Nursing Process: Implementation

MSC: Area of Client Needs: Health Promotion and Maintenance

10. The nurse is preparing an in-service education to staff about atraumatic care for pediatric patients. Which intervention should the nurse include?
- Prepare the child for separation from parents during hospitalization by reviewing a video.
 - Prepare the child before any unfamiliar treatment or procedure by demonstrating on a stuffed animal.
 - Help the child accept the loss of control associated with hospitalization.
 - Help the child accept pain that is connected with a treatment or procedure.

ANS: B

Preparing the child for any unfamiliar treatments, controlling pain, allowing privacy, providing play activities for expression of fear and aggression, providing choices, and respecting cultural differences are components of atraumatic care. In the provision of atraumatic care, the separation of child from parents during hospitalization is minimized. The nurse should promote a sense of control for the child. Preventing and minimizing bodily injury and pain are major components of atraumatic care.

PTS: 1 DIF: Cognitive Level: Understand REF: 9

TOP: Integrated Process: Nursing Process: Implementation

MSC: Area of Client Needs: Psychosocial Integrity

11. Which is most suggestive that a nurse has a nontherapeutic relationship with a patient and family?

- Staff is concerned about the nurses actions with the patient and family.
- Staff assignments allow the nurse to care for same patient and family over an extended time.
- Nurse is able to withdraw emotionally when emotional overload occurs but still remains committed.
- Nurse uses teaching skills to instruct patient and family rather than doing everything for them.

ANS: A

An important clue to a nontherapeutic staff-patient relationship is concern of other staff members. Allowing the nurse to care for the same patient over time would be therapeutic for the patient and family. Nurses who are able to somewhat withdraw emotionally can protect themselves while providing therapeutic care. Nurses using teaching skills to instruct patient and family will assist in transitioning the child and family to self-care.

PTS: 1 DIF: Cognitive Level: Analyze REF: 9

TOP: Integrated Process: Nursing Process: Assessment

MSC: Area of Client Needs: Psychosocial Integrity

12. Which is most descriptive of clinical reasoning?

- A simple developmental process
- Purposeful and goal-directed
- Based on deliberate and irrational thought
- Assists individuals in guessing what is most appropriate

ANS: B

Clinical reasoning is a complex, developmental process based on rational and deliberate thought. Clinical reasoning is not a developmental process. Clinical reasoning is based on rational and deliberate thought. Clinical reasoning is not a guessing process.

PTS: 1 DIF: Cognitive Level: Understand REF: 12

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Safe and Effective Care Environment: Management of Care

13. A nurse makes the decision to apply a topical anesthetic to a child's skin before drawing blood. Which ethical principle is the nurse demonstrating?

- a. Autonomy
- b. Beneficence
- c. Justice
- d. Truthfulness

ANS: B

Beneficence is the obligation to promote the patient's well-being. Applying a topical anesthetic before drawing blood promotes reducing the discomfort of the venipuncture. Autonomy is the patient's right to be self-governing. Justice is the concept of fairness. Truthfulness is the concept of honesty.

PTS: 1 DIF: Cognitive Level: Understand REF: 11

TOP: Integrated Process: Nursing Process: Implementation

MSC: Area of Client Needs: Physiological Integrity

14. Which action by the nurse demonstrates use of evidence-based practice (EBP)?

- a. Gathering equipment for a procedure
- b. Documenting changes in a patient's status
- c. Questioning the use of daily central line dressing changes
- d. Clarifying a physician's prescription for morphine

ANS: C

The nurse who questions the daily central line dressing change is ascertaining whether clinical interventions result in positive outcomes for patients. This demonstrates evidence-based practice (EBP), which implies questioning why something is effective and whether a better approach exists. Gathering equipment for a procedure and documenting changes in a patient's status are practices that follow established guidelines. Clarifying a physician's prescription for morphine constitutes safe nursing care.

PTS: 1 DIF: Cognitive Level: Apply REF: 11

TOP: Integrated Process: Nursing Process: Evaluation

MSC: Area of Client Needs: Safe and Effective Care Environment: Management of Care

15. A nurse is admitting a toddler to the hospital. The toddler is with both parents and is currently sitting comfortably on a parent's lap. The parents state they will need to leave for a brief period. Which type of nursing diagnosis should the nurse formulate for this child?

- a. Risk for anxiety
- b. Anxiety
- c. Readiness for enhanced coping
- d. Ineffective coping

ANS: A

A potential problem is categorized as a risk. The toddler has a risk to become anxious when the parents leave. Nursing interventions will be geared toward reducing the risk. The child is not showing current anxiety or ineffective coping. The child is not at a point for readiness for enhanced coping, especially because the parents will be leaving.

PTS: 1 DIF: Cognitive Level: Remember REF: 12

TOP: Integrated Process: Nursing Process: Diagnosis

MSC: Area of Client Needs: Health Promotion and Maintenance

16. A child has a postoperative appendectomy incision covered by a dressing. The nurse has just completed a prescribed dressing change for this child. Which description is an accurate documentation of this procedure?

- a. Dressing change to appendectomy incision completed, child tolerated procedure well, parent present
- b. No complications noted during dressing change to appendectomy incision
- c. Appendectomy incision non-reddened, sutures intact, no drainage noted on old dressing, new dressing applied, procedure tolerated well by child
- d. No changes to appendectomy incisional area, dressing changed, child complained of pain during procedure, new dressing clean, dry and intact

ANS: C

The nurse should document assessments and reassessments. Appearance of the incision described in objective terms should be included during a dressing change. The nurse should document patients response and the outcomes of the care provided. In this example, these include drainage on the old dressing, the application of the new dressing, and the child's response. The other statements partially fulfill the requirements of documenting assessments and reassessments, patients response, and outcome, but do not include all three.

PTS: 1 DIF: Cognitive Level: Analyze REF: 14

TOP: Integrated Process: Nursing Process: Implementation

MSC: Area of Client Needs: Safe and Effective Care Environment: Management of Care

17. A nurse is planning a class on accident prevention for parents of toddlers. Which safety topic is the priority for this class?

- a. Appropriate use of car seat restraints
- b. Safety crossing the street
- c. Helmet use when riding a bicycle
- d. Poison control numbers

ANS: A

Motor vehicle accidents (MVAs) continue to be the most common cause of death in children older than 1 year, therefore the priority topic is appropriate use of car seat restraints. Safety crossing the street and bicycle helmet use are topics that should be included for preschool parents but are not priorities for parents of toddlers. Information about poison control is important for parents of toddlers and would be a safety topic to include but is not the priority over appropriate use of car seat restraints.

PTS: 1 DIF: Cognitive Level: Apply REF: 3-4

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

MULTIPLE RESPONSE

1. Which behaviors by the nurse indicate a therapeutic relationship with children and families? (Select all that apply.)

- a. Spending off-duty time with children and families
- b. Asking questions if families are not participating in the care
- c. Clarifying information for families
- d. Buying toys for a hospitalized child
- e. Learning about the family's religious preferences

ANS: B, C, E

Asking questions if families are not participating in the care, clarifying information for families, and learning about the family's religious preferences are positive actions and foster therapeutic relationships with children and families. Spending off-duty time with children and families and buying toys for a hospitalized child are negative actions and indicate overinvolvement with children and families, which is nontherapeutic.

PTS: 1 DIF: Cognitive Level: Understand REF: 9-10

TOP: Integrated Process: Nursing Process: Evaluation

MSC: Area of Client Needs: Psychosocial Integrity

ESSAY

1. A nurse is formulating a clinical question for evidence-based practice. Place in order the steps the nurse should use to clarify the scope of the problem and clinical topic of interest. Begin with the first step of the process and proceed ordering the steps ending with the final step of the process. Provide answer as lowercase letters separated by commas (e.g., a, b, c, d, e).

- a. Intervention
- b. Outcome
- c. Population
- d. Time
- e. Control

ANS:

c, a, e, b, d

When formulating a clinical question for evidence-based practice, the nurse should follow a concise, organized way that allows for clear answers. Good clinical questions should be asked in the PICOT (population, intervention, control, outcome, time) format to assist with clarity and literature searching. PICOT questions assist with clarifying the scope of the problem and clinical topic of interest.

CHAPTER 2 Factors Influencing Child Health

MULTIPLE CHOICE

1. A nurse is selecting a family theory to assess a patient's family dynamics. Which family theory best describes a series of tasks for the family throughout its life span?

- a. Interactional theory
- b. Developmental systems theory
- c. Structural-functional theory
- d. Duvall's developmental theory

ANS: D

Duvall's developmental theory describes eight developmental tasks of the family throughout its life span. Interactional theory and structural-functional theory are not family theories. Developmental systems theory is an outgrowth of Duvall's theory. The family is described as a small group, a semiclosed system of personalities that interact with the larger cultural system. Changes do not occur in one part of the family without changes in others.

PTS: 1 DIF: Cognitive Level: Understand REF: 24-26

TOP: Integrated Process: Nursing Process: Assessment

MSC: Area of Client Needs: Health Promotion and Maintenance

2. Which family theory explains how families react to stressful events and suggests factors that promote adaptation to these events?

- a. Interactional theory
- b. Developmental systems theory
- c. Family stress theory
- d. Duvalls developmental theory

ANS: C

Family stress theory explains the reaction of families to stressful events. In addition, the theory helps suggest factors that promote adaptation to the stress. Stressors, both positive and negative, are cumulative and affect the family. Adaptation requires a change in family structure or interaction. Interactional theory is not a family theory. Interactions are the basis of general systems theory. Developmental systems theory is an outgrowth of Duvalls theory. The family is described as a small group, a semiclosed system of personalities that interact with the larger cultural system. Changes do not occur in one part of the family without changes in others. Duvalls developmental theory describes eight developmental tasks of the family throughout its life span.

PTS: 1 DIF: Cognitive Level: Understand REF: 24

TOP: Integrated Process: Nursing Process: Assessment

MSC: Area of Client Needs: Health Promotion and Maintenance

3. Which is the term for a family in which the paternal grandmother, the parents, and two minor children live together?

- a. Blended
- b. Nuclear
- c. Binuclear
- d. Extended

ANS: D

An extended family contains at least one parent, one or more children, and one or more members (related or unrelated) other than a parent or sibling. A blended family contains at least one step-parent, step-sibling, or half-sibling. The nuclear family consists of two parents and their children. No other relatives or nonrelatives are present in the household. In binuclear families, parents continue the parenting role while terminating the spousal unit. For example, when joint custody is assigned by the court, each parent has equal rights and responsibilities for the minor child or children.

PTS: 1 DIF: Cognitive Level: Remember REF: 24-26

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

4. A nurse is assessing a familys structure. Which describes a family in which a mother, her children, and a stepfather live together?

- a. Blended
- b. Nuclear
- c. Binuclear
- d. Extended

ANS: A

A blended family contains at least one step-parent, step-sibling, or half-sibling. The nuclear family consists of two parents and their children. No other relatives or nonrelatives are present in the household. In binuclear families, parents continue the

parenting role while terminating the spousal unit. For example, when joint custody is assigned by the court, each parent has equal rights and responsibilities for the minor child or children. An extended family contains at least one parent, one or more children, and one or more members (related or unrelated) other than a parent or sibling.

PTS: 1 DIF: Cognitive Level: Understand REF: 24-26

TOP: Integrated Process: Nursing Process: Assessment

MSC: Area of Client Needs: Health Promotion and Maintenance

5. Which is considered characteristic of children who are the youngest in their family?

- a. More dependent than firstborn children
- b. More outgoing than firstborn children
- c. Identify more with parents than with peers
- d. Are subject to greater parental expectations

ANS: B

Later-born children are obliged to interact with older siblings from birth and seem to be more outgoing and make friends more easily than firstborns. Being more dependent, identifying more with parents than peers, and being subject to greater parental expectations are characteristics of firstborn children and only children.

PTS: 1 DIF: Cognitive Level: Understand REF: 29-30

TOP: Integrated Process: Nursing Process: Planning

MSC: Area of Client Needs: Health Promotion and Maintenance

6. Parents of a firstborn child are asking whether it is normal for their child to be extremely competitive. The nurse should respond to the parents that studies about the ordinal position of children suggest that firstborn children tend to:

- a. be praised less often.
- b. be more achievement oriented.
- c. be more popular with the peer group.
- d. identify with peer group more than parents.

ANS: B

Firstborn children, like only children, tend to be more achievement-oriented.

Being praised less often, being more popular with the peer group, and identifying with peer groups more than parents are characteristics of later-born children.

PTS: 1 DIF: Cognitive Level: Apply REF: 29

TOP: Integrated Process: Nursing Process: Implementation

MSC: Area of Client Needs: Health Promotion and Maintenance

7. A 35-year-old client is currently on fertility treatments. When responding to a question from the client about multiple births, which statement by the nurse is accurate?

- a. Use of fertility treatments has been associated with an increase in multiple births.
- b. Your chance of having multiple births is at the same rate as all women of childbearing age.
- c. There is not enough evidence about the use of fertility treatments increasing the rate of multiple births.
- d. Because of your age and the fertility treatments, you have almost a 100% chance of a multiple birth.

ANS: A

Because women in their thirties are almost 2.5 times as likely as women in their twenties to have higher-order plural births, increased childbearing among older women and the

expanded use of fertility drugs have been associated with an increase in the multiple-birth ratio. The rate of having a multiple birth for this client is not the same for all women of childbearing age. There are data indicating that fertility treatments increase the rate of multiple births, but fertility treatments do not have a 100% rate of multiple births.

PTS: 1 DIF: Cognitive Level: Understand REF: 30

TOP: Integrated Process: Nursing Process: Implementation

MSC: Area of Client Needs: Health Promotion and Maintenance: Family Systems

8. Nicole and Kelly, age 5 years, are identical twins. Their parents tell the nurse that the girls always want to be together. The nurses suggestions should be based on which statement?

- a. Some twins thrive best when they are constantly together.
- b. Individuation cannot occur if twins are together too much.
- c. Separating twins at an early age helps them develop mentally.
- d. When twins are constantly together, pathologic bonding occurs.

ANS: A

Twins work out a relationship that is reasonably satisfactory to both. They develop a remarkable capacity for cooperative play and considerable loyalty and generosity toward each other. Parents should foster individual differences and allow the children to follow their natural inclinations. Individuation does occur. In twinship, one member of the pair is more dominant, outgoing, and assertive than the other. Early separation may produce unnecessary stresses for the children. There is no evidence that pathologic bonding occurs when twins are constantly together.

PTS: 1 DIF: Cognitive Level: Understand REF: 30-31

TOP: Integrated Process: Nursing Process: Implementation

MSC: Area of Client Needs: Health Promotion and Maintenance

9. The nurse is teaching a group of new parents about the experience of role transition. Which statement by a parent would indicate a correct understanding of the teaching?

- a. My marital relationship can have a positive or negative effect on the role transition.
- b. If an infant has special care needs, the parents sense of confidence in their new role is strengthened.
- c. Young parents can adjust to the new role easier than older parents.
- d. A parents previous experience with children makes the role transition more difficult.

ANS: A

If parents are supportive of each other, they can serve as positive influences on establishing satisfying parental roles. When marital tensions alter caregiving routines and interfere with the enjoyment of the infant, then the marital relationship has a negative effect. Infants with special care needs can be a significant source of added stress. Older parents are usually more able to cope with the greater financial responsibilities, changes in sleeping habits, and reduced time for each other and other children. Parents who have previous experience with parenting appear more relaxed, have less conflict in disciplinary relationships, and are more aware of normal growth and development.

PTS: 1 DIF: Cognitive Level: Understand REF: 31-32

TOP: Integrated Process: Nursing Process: Evaluation

MSC: Area of Client Needs: Health Promotion and Maintenance

10. When assessing a family, the nurse determines that the parents exert little or no control over their children. This style of parenting is called: