

## 60 Items pediatric Nursing questions with Rationale by: Jeddah

### 60 item PEDIATRIC NURSING Questions and Rationale by : JEDDAH

Situation 1: Raphael, a 6 year's old prep pupil is seen at the school clinic for growth and development monitoring (Questions 1-5)

1. Which of the following is characterized the rate of growth during this period?
- most rapid period of growth
  - a decline in growth rate**
  - growth spurt
  - slow uniform growth rate

Correct answer is letter B. During the Preschooler stage growth is very minimal. Weight gain is only 4.5lbs (2kgs) per year and Height is 3.5in (6-8cm) per year.

Review:

Most rapid growth and development- Infancy

Slow growth- Toddler hood and Preschooler

Slower growth- School age

Rapid growth- Adolescence

2. In assessing Raphael's growth and development, the nurse is guided by principles of growth and development. Which is not included?
- All individuals follow cephalo-caudal and proximo-distal
  - Different parts of the body grows at different rate
  - All individual follow standard growth rate
  - d. Rate and pattern of growth can be modified**

Growth and development occurs in cephalo-caudal meaning development occurs through out the body's axis. Example: the child must be able to lift the head before he is able to lift his chest. Proximo-distal is development that progresses from center of the body to the extremities. Example: a child first develops arm movement before fine-finger movement. Different parts of the body grows at different range because some body tissue mature faster than the other such as the neurologic tissues peaks its growth during the first years of life while the genital tissue doesn't till puberty. Also G&D is predictable in the sequence which a child normally precedes such as motor skills and behavior. Lastly G&D can never be modified "Haller? (Pwede mo bang turuan mag basa ang Infant? Or patayuin sya bago pa nakakagapang?)

3. What type of play will be ideal for Raphael at this period?
- Make believe**
  - Hide and seek
  - Peek-a-boo
  - Building blocks

Correct answer is Letter A, make believe is most appropriate because it enhances the imitative play and imagination of the preschooler. C and D are for infants while letter A

is B is recommended for schoolers because it enhances competitive play.

4. Which of the following information indicate that Raphael is normal for his age?
- Determine own sense self
  - Develop sense of whether he can trust the world
  - Has the ability to try new things**
  - Learn basic skills within his culture

The correct answer is letter C; because Erickson defines the developmental task of a preschool period is learning Initiative vs. Guilt. Children can initiate motor activities of various sorts on their own and no longer responds to or imitate the actions of other children or of their parents. Letter A and B is.. for you!!

5. Based on Kohlberg's theory, what is the stage of moral development of Raphael?
- Punishment-obedience
  - "good boy-Nice girl"
  - naïve instrumental orientation**
  - social contact

Correct answer is letter C: According to Kohlber, a preschooler is under Pre-conventional where a child learns about instrumental purpose and exchange, that is they will something do for another if that that person does something with the child in return. Letter A is applicable for Toddlers and letter B is for a School age child.

Situation 2 Baby boy Lacson delivered at 36 weeks gestation weighs 3,400 gm and height of 59 cm (6-10)

6. Baby boy Lacson's height is
- Long**
  - Short
  - Average
  - Too short

Correct answer is Letter A because the normal length of a newborn is 47.5-53.75 cm (19.5-21in) with an average of 50cm (Filipino standards po ito, pag kay Pilliteri nyo tinignan, 53cm for female and 54cm for male)

7. Growth and development in a child progresses in the following ways EXCEPT
- From cognitive to psychosexual**
  - From trunk to the tip of the extremities
  - From head to toe
  - From general to specific

Growth and development occurs in cephalo-caudal (head to toe), proximo-distal (trunk to tips of the extremities and general to specific, but it doesn't occurs in cognitive to psychosexual because they can develop at the same time.

8. As described by Erikson, the major psychosexual conflict of the above situation is

- a. Autonomy vs. Shame and doubt
- b. Industry vs. Inferiority
- c. Trust vs. mistrust**
- d. Initiation vs. guilt

According to Erikson, children 0-18 months are under the developmental task of Trust vs. Mistrust.

9. Which of the following is true about Mongolian Spots?

- a. Disappears in about a year**
- b. Are linked to pathologic conditions
- c. Are managed by tropical steroids
- d. Are indicative of parental abuse

Mongolian spots are pale grey or bluish patches of discoloration commonly seen across the sacrum or buttocks due to accumulation of melanocytes and they disappear in 1 year. They are not linked to steroid use and pathologic conditions.

10. Signs of cold stress that the nurse must be alert when caring for a Newborn is:

- a. Hypothermia
- b. Decreased activity level
- c. Shaking
- d. Increased RR**

Correct answer is letter D. Hypothermia is inaccurate cause normally, temperature of a newborn drop, Also a child under cold stress will kick and cry to increase the metabolic rate thereby increasing heat so B isn't a good choice. A newborn doesn't have the ability to shiver (Pag ikaw ay nag pa anak at ang beybe ay nanga-ngatog, naku itapon mo yan..di yan beybe itik yan.. hehe). So letter B and C is wrong. A newborn will increase its RR because the NB will need more oxygen because of too much activity.

Situation 3 Nursing care after delivery has an important aspect in every stages of delivery

11. After the baby is delivered, the cord was cut between two clamps using a sterile scissors and blade, then the baby is placed at the:

- a. Mother's breast**
- b. Mother's side
- c. Give it to the grandmother
- d. Baby's own mat or bed

Of course, place it at the mother's breast for latch-on. (Note: for NSD breast feed ASAP while for CS delivery, breast feed after 4 hours) Lol, syempre d naman pwede sa grandma dba? Kasi naman hindi gatas ang ipapadede nyan, yogurt na sosyal. ewwww. LOL

12. The baby's mother is RH(-). Which of the following laboratory tests will probably be ordered for the newborn?

- a. Direct Coomb's**

- b. Indirect Coomb's
- c. Blood culture
- d. Platelet count

Coomb's test is the test to determine if RH antibodies are present. Indirect Coomb's is done to the mother and Direct Coomb's is the one don't to the baby. Blood culture and Platelet count doesn't help detect RH antibodies.

13. Hypothermia is common in newborn because of their inability to control heat. The following would be an appropriate nursing intervention to prevent heat loss except

- a. Place the crib beside the wall**
- b. Doing Kangaroo care
- c. By using mechanical pressure
- d. Drying and wrapping the baby

Placing the crib beside the wall is un-appropriate because it can provide heat loss by radiation. Doing Kangaroo care or hugging the baby, mechanical pressure or incubators and drying and wrapping the baby will help conserve heat,

14. The following conditions are caused by cold stress except

- a. Hypoglycemia
- b. Increase ICP**
- c. Metabolic acidosis
- d. Cerebral palsy

Hypoglycemia may occur due to increase metabolic rate, And because of newborns are born slightly acidic, and they catabolize brownfat which will produce ketones which is an acid will cause metabolic acidosis. Also a NB with severe hypothermia is in high risk for kernicterus (too much bilirubin in the brain) can lead to Cerebral palsy. There is no connection in the increase of ICP with hypothermia.

(NOTE: pathognomonic sign of Kernicterus in adult- asterexis, or involuntary flapping of the hand.)

15. During the fetoplacental circulation, the shunt between two atria is called

- a. Ductus venosus
- b. Foramen Magnum
- c. Ductus arteriosus
- d. Foramen Ovale**

Foramen ovale is opening between two atria, Ductus venosus is the shunt from liver to the inferior vena cava, and your Ductus Arteriosus is the shunt from the pulmonary artery to the aorta. (hindi kasali sa fetoplacental circulation ang Foramen Magnum, sa skull un!)

16. What would cause the closure of the Foramen ovale after the baby had been delivered?

- a. Decreased blood flow
- b. Shifting of pressures from right side to the left side of the heart**

- c. Increased PO<sub>2</sub>
- d. Increased in oxygen saturation

During fetoplacental circulation, the pressure in the heart is much higher in the right side, but once breathing/crying is established, the pressure will shift from the R to the L side, and will facilitate the closure of Foramen Ovale. (Note: that is why you should position the NB in R side lying position to increase pressure in the L side of the heart.)

Review:

Increase PO<sub>2</sub> → closure of ductus arteriosus

Decreased bloodflow → closure of the ductus venosus

Circulation in the lungs is initiated by → lung expansion and pulmonary ventilation

What will sustain 1st breath → decreased artery pressure

What will complete circulation → cutting of the cord

17. Failure of the Foramen Ovale to close will cause what Congenital Heart Disease?

a. Total anomalous Pulmonary Artery

**b. Atrial Septal defect**

c. Transposition of great arteries

d. Pulmonary Stenosis

Foramen ovale is the opening between two Atria so, if its will not close Atrial Septal defect can occur.

Situation 4 Children are vulnerable to some minor health problems or injuries hence the nurse should be able to teach mothers to give appropriate home care.

18. A mother brought her child to the clinic with nose bleeding. The nurse showed the mother the most appropriate position for the child which is:

**a. Sitting up**

b. With low back rest

c. With moderate back rest

d. Lying semi flat

The correct position is making the child having an upright sitting position with the head slightly tilted forward. This position will minimize the amount of blood pressure in nasal vessels and keep blood moving forward not back into the nasopharynx, which will have the choking sensation and increase risk of aspiration. Choices b, c, d, are inappropriate cause they can cause blood to enter the nasopharynx.

19. A common problem in children is the inflammation of the middle ear. This is related to the malfunctioning of the:

a. Tympanic membrane

**b. Eustachian tube**

c. Adenoid

d. Nasopharynx

This is because children has short, horizontal Eustachian tubes. The dysfunction in the Eustachian tube enables bacterial invasion of the middle ear and obstructs drainage of

secretions.

20. For acute otitis media, the treatment is prompt antibiotic therapy. Delayed treatment may result in complications of:

- a. Tonsillitis
- b. Eardrum Problems
- c. Brain damage**
- d. Diabetes mellitus

One of the complication of recurring acute otitis media is risk for having Meningitis, thereby causing possible brain damage. That is why patient must follow a complete treatment regimen and follow up care. A and B are not complications of AOM, (lalo na ung D!!)

21. When assessing gross motor development in a 3 year old, which of the following activities would the nurse expect to finds?

- a. Riding a tricycle**
- b. Hopping on one foot
- c. Catching a ball
- d. Skipping on alternate foot.

Answer is A, riding a tricycle is appropriate for a 3 y/o child. Hopping on one foot can be done by a 4 y/o child, as well as catching and throwing a ball over hand. Skipping can be done by a 5 y/o.

22. When assessing the weight of a 5-month old, which of the following indicates healthy growth?

- a. Doubling of birth weight**
- b. Tripling of birth weight
- c. Quadrupling of birth weight
- d. Stabilizing of birth weight

During the first 6 months of life the weight from birth will be doubled and as soon as the baby reaches 1 year, its birth weight is tripled.

23. An appropriate toy for a 4 year old child is:

- a. Push-pull toys
- b. Card games
- c. Doctor and nurse kits**
- d. Books and Crafts

Letter C is appropriate because it will enhance the creativity and imagination of a pre-school child. Letter B and D are inappropriate because they are too complex for a 4 y/o. Push-pull toys are recommended for infants.

24. Which of the following statements would the nurse expects a 5-year old boy to say whose pet gerbil just died

- a. "The boogieman (kamatayan- the man with the scythe) got him"

**b. “He’s just a bit dead”**

- c. “Ill be good from now own so I wont die like my gerbil”
- d. “Did you hear the joke about...”

A 5 y/o views death in “degrees”, so the child most likely will say that “he is just a bit dead”. Personification of death like boogeyman or “kamatayan” occurs in ages 7 to 9 as well as denying death can if they will be good. Denying death using jokes and attributing life qualities to death occurs during age 3-5.

25. When assessing the fluid and electrolyte balance in an infant, which of the following would be important to remember?

- a. Infant can concentrate urine at an adult level
- b. The metabolic rate of an infant is slower than in adults
- c. Infants have more intracellular water that adult do
- d. Infant have greater body surface area than adults**

Infants have greater body surface area than adult, increasing their risk to F&E imbalances. Also infants cant concentrate a urine at an adult level and their metabolic rate, also called water turnover, is 2 to 3 times higher than adult. Plus more fluids of the infants are at the ECF spaces not in the ICF spaces.

26. When assessing a child with aspirin overdose, which of the following will be expected?

- a. Metabolic alkalosis
- b. Respiratory alkalosis
- c. Metabolic acidosis**
- d. Respiratory acidosis

Remember that Aspirin is acid (Acetylsalicylic ACID), so what do you expect? (ang taray LOL) UN NA!

Review:

Pag galling sa bibig: alkalosis (hyper-emesis)

Pag galling sap wet: acidosis (diarrhea)

27. Which of the following is not a possible systemic clinical manifestation of severe burns?

- a. Growth retardation
- b. Hypermetabolism
- c. Sepsis
- d. Blisters and edema**

The question was asking for a SYSTEMIC clinical manifestation, Letters A,B and C are systemic manifestations while Blisters and Edema weren't.

28. When assessing a family for potential child abuse risks, the nurse would observe for which of the following?

- a. Periodic exposure to stress
- b. Low socio-economic status

c. High level of self esteem

**d. Problematic pregnancies**

Answer is D, Typical factors that may be risk for Child abuse are problematic pregnancies, chronic exposure to stress not periodic, low level of self esteem not high level. Also child abuse can happen in all socio-economic status not just on low socio-economic status.

29. Which of the following is a possible indicator of Munchausen syndrome by proxy type of child abuse?

a. Bruises found at odd locations, with different stages of healing

b. STD's and genital discharges

**c. Unexplained symptoms of diarrhea, vomiting and apnea with no organic basis**

d. Constant hunger and poor hygiene

Munchausen syndrome by Proxy is the fabrication or inducement of an illness by one person to another person, usually mother to child. It is characterized by symptoms such as apnea and seizures, which may be due to suffocation, drugs or poisoning, vomiting which can be induced with poisons and diarrhea with the use of laxatives. Letter A can be seen in a Physical abuse, Letter B for sexual abuse and Letter C is for Physical Neglect.

30. Which of the following is an inappropriate intervention when caring for a child with HIV?

a. Teaching family about disease transmission

**b. Offering large amount of fresh fruits and vegetables**

c. Encouraging child to perform at optimal level

d. Teach proper hand washing technique

A child with HIV is immunocompromised. Fresh fruits and vegetables, which may be contaminated with organisms and pesticides can be harmful, if not fatal to the child, therefore these items should be avoided.

Situation 5 Agata, 2 years old is rushed to the ER due to cyanosis precipitated by crying. Her mother observed that after playing she gets tired. She was diagnosed with Tetralogy of Fallot.

31. The goal of nursing care for Agata is to:

a. Prevent infection

b. Promote normal growth and development

**c. Decrease hypoxic spells**

d. Hydrate adequately

The correct answer is letter C. Though letter B would be a good answer too, this goal is too vague and not specific. Nursing interventions will not solely promote normal G&D unless he will undergo surgical repair. So decreasing Hypoxic Spells is more SMART. (alam nyo na kung ano yun! Specific, measurable, attainable, realistic and time bounded). Letter A and D are inappropriate.  
**REVIEW! REVIEW! REVIEW!**

Tetralogy of Fallot is a cyanotic Congenital Heart disease. Kaya sa tinawag na Tetralogy cause it has 4 anomalies;

1. VSD- ventricular septal defect
2. Pulmonary Stenosis
3. Over-riding of the Aorta- the aorta overrides both ventricles
4. Right ventricular hypertrophy

We have 14 congenital heart defects. 8 acyanotic and 6 cyanotic.

8 Acyanotic includes: ASD, VSD, PDA, endocardial cushion defect, pulmonary stenosis, doubling of the aorta, Aortic stenosis and Coarctation of the Aorta

6 Cyanotic includes: Tetralogy of fallot, Total anomalous pulmonary artery, Transposition of the great arteries, Truncus arteriosus, Hypoplastic Left heart syndrome. (Acyanotic causes L->R shunting while cyanotic cause R->L shunting. Para madaling matandaan lahat ng may "T" eh cyanotic OK?)

32. The immediate nursing intervention for cyanosis of Agata is:

- a. Call up the pediatrician
- b. Place her in knee chest position**
- c. Administer oxygen inhalation
- d. Transfer her to the PICU

The immediate intervention would be to place her on knee-chest or "squatting" position because it traps blood into the lower extremities. Though also letter C would be a good choice but the question is asking for "Immediate" so letter B is more appropriate. Letter A and D are incorrect because its normal for a child who have ToF to have hypoxic or "tets" spells so there is no need to transfer her to the NICU or to alert the Pediatrician.

33. Agata was scheduled for a palliative surgery, which creates anastomosis of the subclavian artery to the pulmonary artery. This procedure is:

- a. Waterston-Cooley
- b. Raskkind Procedure
- c. Coronary artery bypass
- d. Blalock-Taussig**

Correct answer is Blalock-Taussig procedure its just a temporary or palliative surgery which creates a shunt between the aorta and pulmonary artery (oist parang ductus arteriosus) so that the blood can leave the aorta and enter the pulmonary artery and thus oxygenating the lungs and return to the left side of the heart, then to the aorta then to the body. This procedure also makes use of the subclavian vein so pulse is not palpable at the right arm.

The full repair for ToF is called the Brock procedure. Raskkind is a palliative surgery for TOGA.

34. Which of the following is not an indicator that Agata experiences separation anxiety brought about her hospitalization?

- a. Friendly with the nurse**
- b. Prolonged loud crying, consoled only by mother
- c. Occasional temper tantrums and always says NO

d. Repeatedly verbalizes desire to go home

Because toddlers views hospitalization is abandonment, separation anxiety is common. Its has 3 phases: PDD (parang c puff daddy LOL)

1. Protest 2. despair 3. detachment (or denial). Choices B, C, D are usually seen in a child with separation anxiety (usually in the protest stage).

REVIEW:

Separation anxiety begin at: 9 months

Peaks: 18 months

35. When Agata was brought to the OR, her parents where crying. What would be the most appropriate nursing diagnosis?

a. Infective family coping r/t situational crisis

b. Anxiety r/t powerlessness

c. Fear r/t uncertain prognosis

**d. Anticipatory grieving r/t gravity of child's physical status**

In this item letter A and be are inappropriate response so remove them. The possible answers are C and D. Fear defined as the perceived threat (real or imagined) that is consciously recognized as danger (NANDA) is applicable in the situation but its defining characteristics are not applicable. Crying per se can not be a subjective cue to signify fear, and most of the symptoms of fear in NANDA are physiological. Anticipatory grieving on the other hand are intellectual and EMOTIONAL responses based on a potential loss. And remember that procedures like this cannot assure total recovery. So letter D is a more appropriate Nursing diagnosis.

NOTE: GANATO NA PO ANG PATTERN NG NLE, LAGING MAY HALONG THERAPUETIC COMMUNICATION AT NURSING DIAGNOSIS.

36. Which of the following respiratory condition is always considered a medical emergency?

a. Laryngeotracheobronchitis (LTB)

**b. Epiglottitis**

c. Asthma

d. Cystic Fibrosis

Correct answer is letter B, because acute and sever inflammation of the epiglottis can cause life threatening airway obstruction, that is why its always treated as a medical emergency. NSG intervention : Prepare tracheostomy set at bed side.

LTB, can also cause airway obstruction but its not an emergency. Asthma is also not an emergency (ung status asthmaticus ang kaylangan ng prompt treatment). CF is a chronic disease, so its not a medical emergency.

REVIEW: Medical emergency of GI: peritonitis

37. Which of the following statements by the family of a child with asthma indicates a need for additional teaching?

a. "We need to identify what things triggers his attacks"

b. "He is to use bronchodilator inhaler before steroid inhaler"

**c. "We'll make sure he avoids exercise to prevent asthma attacks"**

d. "he should increase his fluid intake regularly to thin secretions"

Asthmatic children don't have to avoid exercise. They can participate on physical activities as tolerated. Using a bronchodilator before administering steroids is correct because steroids are just anti-inflammatory and they don't have effects on the dilation of the bronchioles. OF course letters A and B are obviously correct.

38. Which of the following would require careful monitoring in the child with ADHD who is receiving Methylphenidate (Ritalin)?

- a. Dental health
- b. Mouth dryness
- c. Height and weight**
- d. Excessive appetite

Dental problems are more likely to occur in children under going TCA therapy. Mouth dryness is a expected side effects of Ritalin since it activates the SNS. Also loss of appetite is more likely to happen, not increase in appetite. The correct answer is letter C, because Ritalin can affect the child's G&D. Intervention: medication "holidays or vacation". (This means na.. during weekends or holidays or school vacations, where the child wont be in school, the drug can be withheld.)

Situation 6 Laura is assigned as the Team Leader during the immunization day at the RHU

39. What program for the DOH is launched at 1976 in cooperation with WHO and UNICEF to reduce morbidity and mortality among infants caused by immunizable disease?

- a. Patak day
- b. Immunization day on Wednesday
- c. Expanded program on immunization**
- d. Bakuna ng kabtaan

SUS me! Dapat pa bang I-rationalize? Ang di nakakuha ng tamang sagot... hala... JOKE.. hehehe

40. One important principle of the immunization program is based on?

- a. Statistical occurrence
- b. Epidemiologic situation**
- c. Cold chain management
- d. Surveillance study

Letters A, C and D are not included in the principles of EPI.

The principle of EPI are the following:

1. Its is based on epidemiological situation
2. Mass approach utilization- the whole community is to be protected rather than the individual
3. Immunization is a basic health service, and should be provided by the RHU

41. The main element of immunization program is one of the following?

- a. Information, education and communication
- b. Assessment and evaluation of the program
- c. Research studies
- d. Target setting**

Correct answer is D.

The following are the elements of EPI:

- Target setting
- Cold chain logistic management
- Information, education and communication
- Assessment and evaluation of the program's overall performance
- Surveillance, studies and research

42. What does herd immunity mean?

- a. Interruption of transmission**
- b. All to be vaccinated
- c. Selected group for vaccination
- d. Shorter incubation

43. Measles vaccine can be given simultaneously. What is the combined vaccine to be given to children starting at 15 months?

- a. MCG
- b. MMR**
- c. BCG
- d. BBR

MMR or Measles, Mumps, Rubella is a vaccine furnished in one vial and is routinely given in one injection (Sub-Q). It can be given at 15 months but can also be given as early as 12th month.

Situation 7: Braguda brought her 5-month old daughter in the nearest RHU because her baby sleeps most of the time, with decreased appetite, has colds and fever for more than a week. The physician diagnosed pneumonia.

44. Based on this data given by Braguda, you can classify Braguda's daughter to have:

- a. Pneumonia: cough and colds
- b. Severe pneumonia**
- c. Very severe pneumonia
- d. Pneumonia moderate

For a child aging 2 months up to 5 years old can be classified to have severe pneumonia when he has any of the following danger signs:

- Not able to drink
- Convulsions
- Abnormally sleepy or difficult to wake
- Stridor in calm child or
- Severe under-nutrition

45. For a 3-month old child to be classified to have Pneumonia (not severe), you would expect to find RR of:

- a. 60 bpm
- b. 40 bpm
- c. 70 bpm
- d. 50 pbm**

Correct answer is letter D. A child can be classified to have Pneumonia (not severe) if:

- the young infant is less than 2 months- 60 bpm or more
- if the child is 2 months up to less than 12 months- 50 bpm or more
- if the child is 12 months to 4 y/o- 40 bpm or more

46. You asked Braguda if her baby received all vaccines under EPI. What legal basis is used in implementing the UN's goal on Universal Child Immunization?

- a. PD no. 996
- b. PD no. 6**
- c. PD no. 46
- d. RA 9173

Correct answer is letter B. Presidential Proclamation no. 6 (April 3, 1986) is the "Implementing a United Nations goal on Universal Child Immunization by 1990". PD 996 (September 16, 1976) is "providing for compulsory basic immunization for infants and children below 8 years of age. PD no. 46 (September 16, 1992) is the "Reaffirming the commitment of the Philippines to the universal Child and Mother goal of the World Health Assembly. RA 9173 is of course the "Nursing act of 2002"

47. Braguda asks you about Vitamin A supplementation. You responded that giving Vitamin A starts when the infant reaches 6 months and the first dose is"

- a. 200,000 "IU"
- b. 100,000 "IU"**
- c. 500,000 "IU"
- d. 10,000 "IU"

An infant aging 6-11 months will be given Vitamin supplementation of 100, 000 IU and for Preschoolers ages 12-83 months 200,000 "IU" will be given.

48. As part of CARI program, assessment of the child is your main responsibility. You could ask the following question to the mother except:

- a. "How old is the child?"
- b. "IS the child coughing? For how long?"
- c. "Did the child have chest indrawing?"**
- d. "Did the child have fever? For how long?"

The CARI program of the DOH includes the "ASK" and "LOOK, LISTEN" as part of the assessment of the child who has suspected Pneumonia. Choices A, B and D are included in the "ASK" assessment while Chest indrawings is included in the "LOOK, LISTEN" and should not be asked to the mother.

49. A newborn's failure to pass meconium within 24 hours after birth may indicate which of the following?

- a. Aganglionic Mega colon**
- b. Celiac disease
- c. Intussusception
- d. Abdominal wall defect

Failure to pass meconium of Newborn during the first 24 hours of life may indicate Hirschsprung disease or Congenital Aganglionic Megacolon, an anomaly resulting in mechanical obstruction due to inadequate motility in an intestinal segment. B, C, and D are not associated in the failure to pass meconium of the newborn.

50. The nurse understands that a good snack for a 2 year old with a diagnosis of acute asthma would be:

- a. Grapes
- b. Apple slices**
- c. A glass of milk
- d. A glass of cola

Correct answer is B, apple slices. Grapes is in appropriate because of its "balat" that can cause choking. A glass of milk is not a good snack because it's the most common cause of Iron-deficiency anemia in children (milk contains few iron), A glass of cola is also not appropriate cause it contains complex sugar. (walang kinalaman ang asthma dahil ala naman itong diatery restricted foods na nasa choices.)

51. Which of the following immunizations would the nurse expect to administer to a child who is HIV (+) and severely immunocompromised?

- a. Varicella
- b. Rotavirus
- c. MMR
- d. IPV**

IPV or Inactivated polio vaccine does not contain live micro organisms which can be harmful to an immunocompromised child. Unlike OPV, IPV is administered via IM route.

52. When assessing a newborn for developmental dysplasia of the hip, the nurse would expect to assess which of the following/

- a. Symmetrical gluteal folds
- b. Trendelenburg sign
- c. Ortolani's sign**
- d. Characteristic limp

Correct answer is Ortolani's sign; it is the abnormal clicking sound when the hips are abducted. The sound is produced when the femoral head enters the acetabulum. Letter A is wrong because its should be "asymmetrical gluteal fold". Letter B and C are not applicable for newborns because they are seen in older children.

53. While assessing a male neonate whose mother desires him to be circumcised, the nurse observes that the neonate's urinary meatus appears to be located on the ventral surface of the penis. The physician is notified because the nurse would suspect which of the following?

- a. Phimosis
- b. Hydrocele
- c. Epispadias
- d. Hypospadias**

Hypospadias is a condition in which the urethral opening is located below the glans penis or anywhere along the ventral surface of the penile shaft. Epispadias, the urethral meatus is located at the dorsal surface of the penile shaft. (Para di ka malilto, I-alphabetesize mo Dorsal, (Above) eh mauuna sa Ventral (Below) , Epis mauuna sa Hypo.)

54. When teaching a group of parents about seat belt use, when would the nurse state that the child be safely restrained in a regular automobile seatbelt?

- a. 30 lb and 30 in
- b. 35 lb and 3 y/o
- c. 40 lb and 40 in**
- d. 60 lb and 6 y/o

Basta tandaan ang rule of 4! 4 years old, 40 lbs and 40 in.

55. When assessing a newborn with cleft lip, the nurse would be alert which of the following will most likely be compromised?

- a. Sucking ability**
- b. Respiratory status
- c. Locomotion
- d. GI function

Because of the defect, the child will be unable to form the mouth adequately around the nipple thereby requiring special devices to allow feeding and sucking gratification. Respiratory status may be compromised when the child is fed improperly or during post op period.

**REVIEW!**

Repair of cleft lip-cheiloplasty-should be done within 1-3 months- to save sucking reflex- position post-op side lying

Repair of cleft palate- Uranoplasty- should be done within 4-6 months-to preserve speech- position post-op is prone.

56. For a child with recurring nephritic syndrome, which of the following areas of potential disturbances should be a prime consideration when planning ongoing nursing care?

- a. Muscle coordination
- b. Sexual maturation
- c. Intellectual development

#### **d. Body image**

Because of edema, associated with nephrotic syndrome, potential self concept and body image disturbance related to changes in appearance and social isolation should be considered.

HEY! NARARAMDAMAN KO NA LALABAS ULIT ANG MGA SAKIT RELATED SA NEW BORN SCREENING KAYA ARALIN NA ITO. I WILL POST A SIMPLE LECTURE DITO. (LATER.... Kasi tamad ako,, hehehe)

57. An inborn error of metabolism that causes premature destruction of RBC?

- a. G6PD**
- b. Hemocystinuria
- c. Phenylketonuria
- d. Celiac Disease

G6PD is the premature destruction of RBC when the blood is exposed to antioxidants, ASA (ano un? Aspirin), legumes and flava beans.

58. Which of the following would be a diagnostic test for Phenylketonuria which uses fresh urine mixed with ferric chloride?

- a. Guthrie Test
- b. Phenestix test**
- c. Beutler's test
- d. Coomb's test

Phenestix test is a diagnostic test which uses a fresh urine sample (diapers) and mixed with ferric chloride. If positive, there will be a presence of green spots at the diapers. Guthrie test is another test for PKU and is the one that mostly used. The specimen used is the blood and it tests if CHON is converted to amino acid.

59. Dietary restriction in a child who has Hemocystenuria will include which of the following amino acid?

- a. Lysine
- b. Methionine**
- c. Isolensine tryptophase
- d. Valine

Hemocystenuria is the elevated excretion of the amino acid hemocystiene, and there is inability to convert the amino acid methionine or cystiene. So dietary restriction of this amino acids is advised. This disease can lead to mental retardation.

60. A milk formula that you can suggest for a child with Galactosemia:

- a. Lofenalac
- b. Lactum
- c. Neutramigen**
- d. Sustagen

Neutramigen is suggested for a child with Galactosemia. Lofenalac is suggested for a child with PKU. Sustagen is for Susy and Geno, Lactum.. lactum.. inom ka ng inom!