A nurse is caring for a child who is postoperative following the insertion of a ventriculorperitoneal shunt. The nurse should place the child in which of the following positions?
   A. **On the nonoperative side**
   B. A 45 deg head elevation
   C. Prone
   D. Supine

A nurse is caring for an infant who is dehydrated and requires IV therapy. The nurse should monitor the infant response to therapy by performing which of the following actions?
   A. **weighing the infants at the same time everyday**
   B. Taking the infants vital signs every 2 hr.
   C. Measuring the infants head circumference twice per day
   D. Counting the number of wet diapers every shift

A nurse is caring for a preschool age child who has croup. Which of the following findings should the nurse report to the provider?
   A. Barky cough
   B. Paroxysmal attacks of laryngeal spasm at night
   C. Hoarseness
   D. Drooling (that could mean it can mean there’s an epiglottitis causes obstruction of the airway)

A nurse is collecting data from an infant who has hypertrophic pyloric stenosis. Which of the following findings should the nurse expect?
   A. **Projectile vomiting**
   B. Bile colored vomit
   C. Absent bowel sounds
   D. Fever

A school nurse is screening an 11-year-old child for idiopathic scoliosis. Which of the following instructions should the nurse give the child for this examination?
   A. Lie prone on the examination table
   B. Touch your chin to your chest and then look up at the ceiling
   C. Turn to the side and remain in a relaxed position
A nurse is collecting data from a child who is postoperative following a tonsillectomy. Which of the following is a clinical manifestation of hemorrhage?

A. Increased pain
B. Poor fluid intake
C. Drooling
D. Continuous swallowing

A nurse is assisting with the admission of a child who has pertussis. Which of the following actions should the nurse take?

A. Initiate a protective environment
B. Initiate airborne precautions
C. **Initiate droplet precautions**
D. Initiate contact precautions

A nurse is caring for a child who has erythema infectious. Which of the following findings should the nurse expect?

A. **Facial erythema**
B. Koplik spots (measles)
C. Parotitis (mumps)
D. Pruritus (itchiness. Chicken pox)

A nurse is collecting data from an infant who has developmental dysplasia of the hip (DDH) which of the following findings should the nurse expect?

A. Absent plantar reflexes
B. Lengthened thigh on the affected side
C. Inwardly turned foot on the affected side
D. **Asymmetric thigh folds**

A nurse is caring for a child who has nosebleed. Which of the following actions should the nurse take?

A. Place the child in a sitting position and tilt her head back
B. Apply ice at the opening of the nares for 5 min and then recheck for bleeding
C. Place the child in a supine position with a pillow under her head
D. **Have the child sit with her head tilted forward and hold pressure on her nose for 10 mins (use ur fingers pinching the nose)**
A nurse is caring for a child who has acute diarrhea and reports that he is thirsty. Which of the following fluids should the nurse give the child?

B /r/ Birth
Cherry Gelatin
Apple juice
Pedialyte

A nurse is preparing to administer immunizations to a child who has an allergy to eggs. The nurse should know that an allergy to eggs is a contraindication for which of the following immunizations?

A Influenza (TIV)
B Inactivated poliovirus (IPV)
C Haemophilus Influenza type B (HiB)
D Hepatitis B (Hep B)

A nurse on a medical-surgical unit is caring for a group of children. Which of the following findings should alert the nurse that one of the children is a potential victim of abuse?

A. A toddler who has multiple bruises on the sides of both legs and his parents report that he is clumsy.
B. A preschooler who has a BMI indicating obesity.
C. A school age child who cries when the nurse is giving him an injection
D. An adolescent who asks to stay in the hospital because he likes the room

A nurse is preparing to administer IM injection to a preschool-age child. Which of the following actions should the nurse take?

A. Ask the parents to hold the child
B. Allow the child to hold a favorite toy.
C. Administer the medication in the child's room
D. Tell the child the medicine will make him feel better.
B. I do not plan to offer my baby a pacifier during naps or at bedtime
C. My baby will be placed on her back when sleeping
D. We will place an antique quilt in our baby’s crib.

A nurse is caring for an adolescent client who is receiving carbamazepine for partial seizure disorder. Which of the following statements by the adolescent parent is the priority for the nurse to address?

A. He only sleeps 5 hours each night
B. HE takes his medication between meals with water
C. He seems to be getting a lot more bumps and bruises lately
D. HE has not been eating as much lately

A nurse is caring for a toddler who has laryngotrachobronchitis (LTB). For which of the following findings should the nurse monitor to detect airway obstruction?

A. Decreased Stridor (increase in airway becomes more obstructive)
B. Decreased Restlessness (increase)
C. Increased Heart rate in order to deliver more blood to pump more oxygen
D. Decreased Temperature (Increased Temperature)

A nurse is reinforcing teaching with the mother of a 2-month old infant whose provider applied a Paylik Harness 1 week earlier for the treatment of developmental hip dysplasia. Which of the following statements by the mother indicates an understanding of the teaching?

A. I will adjust the harness straps every day.
B. I will place the diaper over the harness. (Under the Harness)
C. I will check my baby’s skin three times each day.
D. I will gently massage lotion on his skin around the harness clasps. (Build up in skin and cause irritation)

A nurse reinforcing teaching with the parents of a school-age child who has cystic fibrosis. Which of the following statements should the nurse make?