**Nursing Care of Infants and Children**

**Perspectives of Pediatric Nursing**

1. From a worldwide perspective in reducing infant mortality, the United States:

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| --- | --- |
| a. | is ranked similar to 20 other developed countries. |
| b. | is ranked highest among 27 other industrialized countries. |
| c. | is ranked last among 27 countries that have a population of at least 25 million. |
| d. | is ranked in the middle of 20 other developed countries. |

ANS: C

Although the death rate has decreased, the United States still ranks last in infant mortality among nations with a population of at least 25 million. The United States has the highest infant death rate of developed nations.

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

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| --- | --- |
| a. | Congenital anomalies |
| b. | Sudden infant death syndrome |
| c. | Disorders related to short gestation and low birth weight |
| d. | Maternal complications specific to the perinatal period |

ANS: A

Congenital anomalies account for 20.1% of deaths in infants younger than 1 year, compared with sudden infant death syndrome, which accounts for 8.2%; disorders related to short gestation and unspecified low birth weight, which account for 16.5%; and maternal complications such as infections specific to the perinatal period, which account for 6.1% of deaths in infants under 1 year of age.

3. The major cause of death for children older than 1 year is which of the following?

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| a. | Childhood cancer |
| b. | Unintentional injuries |
| c. | Heart disease |
| d. | Congenital anomalies |

ANS: B

Unintentional injuries (accidents) are the leading cause of death after age 1 year through adolescence. The leading cause of death for those younger than 1 year is congenital anomalies, and childhood cancers and heart disease cause a significantly lower percentage of deaths in children older than 1 year of age.

4. In addition to injuries, which of the following are leading causes of death in adolescents and young adults ages 15 to 24 years?

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| --- | --- |
| a. | Suicide, cancer |
| b. | Suicide, homicide |
| c. | Homicide, heart disease |
| d. | Drowning, cancer |

ANS: B

Homicide and suicide account for 16.7% of deaths in this age-group. Suicide and cancer account for 10.9% of deaths, and cancer accounts for 3.5% of the deaths in this age-group. Drowning is responsible for less than 2% of the deaths in adolescents.

5. Which of the following is descriptive of deaths caused by injuries?

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| --- | --- |
| a. | More deaths occur in males. |
| b. | More deaths occur in females. |
| c. | The pattern of deaths does not vary widely among different ethnic groups. |
| d. | The pattern of deaths does not vary according to age and sex. |

ANS: A

The majority of deaths from unintentional injuries occur in males. The pattern of death does vary greatly among different ethnic groups, and the causes of unintentional deaths vary with age and gender.

6. *Morbidity* statistics describe which of the following?

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| a. | Disease occurring regularly within a geographic location |
| b. | The number of individuals who have died over a specific period |
| c. | The prevalence of specific illness in the population at a particular time |
| d. | Disease occurring in more than the number of expected cases in a community |

ANS: C

Morbidity statistics show the prevalence of specific illness in the population at a particular time. Data regarding disease within a geographic region, or in greater than expected numbers in a community, may be extrapolated from analysis of the morbidity statistics. *Mortality statistics* refer to the number of individuals who have died over a specific period.

7. Which of the following was created in 1965 under Title XIX of the Social Security Act?

|  |  |
| --- | --- |
| a. | Medicaid |
| b. | Child welfare services |
| c. | Aid to Families with Dependent Children |
| d. | Maternal Child Health Services Block Grants |

ANS: A

Medicaid was created in 1965 to reduce financial barriers to health care for the poor. It is the largest maternal-child health program. Child welfare services began with Title V in 1930, and Aid to Families with Dependent Children was enacted in 1935 as a cash grant program to states. Maternal Child Health Services Block Grants provide services to mothers and children with low income or limited access to health services.

8. Which of the following is most descriptive of family-centered care?

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| a. | Reduces effect of cultural diversity on the family |
| b. | Encourages family dependence on health care system |
| c. | Recognizes that the family is the constant in a child’s life |
| d. | Avoids expecting families to be part of 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. The family should be enabled and empowered to work with the health care system and is expected to be part of the decision-making process. The nurse should also support the family’s cultural diversity, not reduce its effect.

9. Which of the following is most descriptive of critical thinking?

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| a. | Purposeful and goal directed |
| b. | A simple developmental process |
| c. | Based on deliberate and irrational thought |
| d. | Assists individuals in guessing what is most appropriate |

ANS: A

Critical thinking is a complex developmental process based on rational and deliberate thought.When thinking is clear, precise, accurate, relevant, consistent, and fair, a logical connection develops between the elements of thought and the problem at hand.

10. Evidence-based practice (EBP), a decision-making model, is best described as:

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| a. | using information in textbooks to guide care. |
| b. | combining knowledge with clinical experience and intuition. |
| c. | using a professional code of ethics as a means for decision making. |
| d. | gathering all evidence that applies to the child’s health and family situation. |

ANS: B

EBP helps focus on measurable outcomes; the use of demonstrated, effective interventions; and questioning what is the best approach. EBP involves decision making based on data, not all evidence on a particular situation, and involves the latest available data. Nurses can use textbooks to determine areas of concern and potential involvement.

11. Which of the following best describes signs and symptoms as part of a nursing diagnosis?

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| --- | --- |
| a. | Description of potential risk factors |
| b. | Identification of actual health problems |
| c. | Human response to state of illness or health |
| d. | Cues and clusters derived from patient assessment |

ANS: D

Signs and symptoms are the cues and clusters of defining characteristics that are derived from a patient assessment and indicate actual health problems. The first part of the nursing diagnosis is the problem statement, also known as the human response to the state of illness or health. The identification of actual health problems may be part of the medical diagnosis. The nursing diagnosis is based on the human response to these problems. The human response is therefore a component of the nursing diagnostic statement. Potential risk factors are used to identify nursing care needs to avoid the development of an actual health problem when a potential one exists.

12. The nurse is talking to a group of parents of school-age children at an after-school program about childhood health problems. Which of the following statements should the nurse include in the teaching?

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| a. | Childhood obesity is the most common nutritional problem among children. |
| b. | Immunizations rates are the same among children of different races and ethnicity. |
| c. | Dental caries is not a problem commonly seen in children since the introduction of fluoridated water. |
| d. | Mental health problems are typically not seen in school-age children but may be diagnosed in adolescents. |

ANS: A

When teaching parents of school-age children about childhood health problems, the nurse should include information about childhood obesity because it is the most common problem among children and is associated with type 2 diabetes. Teaching parents about ways to prevent obesity is important to include in teaching. Immunization rates differ depending on the child’s race and ethnicity; dental caries continues to be a common chronic disease in childhood; and mental health problems are seen in children as young as school-age, not just in adolescents.

**MULTIPLE RESPONSE**

1. Which of the following responsibilities are included in the pediatric nurse’s promotion of the health and well-being of children? Select all that apply.

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| --- | --- |
| a. | Establishing a therapeutic relationship |
| b. | Promoting disease prevention |
| c. | Providing support and counseling |
| d. | Establishing life-long friendships |
| e. | Providing financial assistance |
| f. | Participating in ethical decision making |

ANS: A, B, C, F

The pediatric nurse’s role includes establishing a therapeutic relationship, promoting disease prevention, providing support and counseling, and participating in ethical decision making; a pediatric nurse does not need to establish life-long friendships or provide financial assistance to children and their families. Boundaries should be set and clear.