

Price: Pediatric Nursing, 10th Edition

Test Bank

Chapter 1: Child Health Evolution

MULTIPLE CHOICE

1. In the Middle Ages:
 - a. Adolescence emerged as a separate phase of life
 - b. A child was considered an adult by age 7
 - c. Childhood became a separate phase of life
 - d. The average life span was about 40 years

ANS: B

A child was considered an adult by age 7. The average life span was only 30 years. Childhood became a separate phase of life after the work of Erickson and Piaget. Adolescence did not emerge as a separate phase of life until child labor laws were passed.

DIF: Cognitive Level: Knowledge REF: Page 1 OBJ: 2
TOP: Evolution of Child Health KEY: Nursing Process Step: N/A
MSC: NCLEX: Health Promotion and Maintenance

2. Mothers were taught the importance of pure milk and its preparation by:
 - a. Abraham Jacobi
 - b. Lillian Wald
 - c. Jean Piaget
 - d. Florence Kelley

ANS: A

Abraham Jacobi is considered the “father of pediatrics.” He established milk stations where mothers could bring their children for treatment. The mothers were also taught the importance of pure milk and its preparation.

DIF: Cognitive Level: Knowledge REF: Page 1 OBJ: 2
TOP: Evolution of Child Health KEY: Nursing Process Step: N/A
MSC: NCLEX: N/A

3. The establishment of the Medicare system of payment for hospital stays:
 - a. Had no impact on children’s health
 - b. Led to shorter hospital stays for acutely ill children
 - c. Decreased the need for discharge teaching
 - d. Eliminated the need for home health care

ANS: B

The Medicare system of payment had an enormous impact on the rest of the insurance industry. Other insurance companies developed prospective payments plans of their own. The need for discharge teaching and home health care increased as a result of shorter hospital stays.

DIF: Cognitive Level: Comprehension REF: Page 4 OBJ: 4
TOP: Healthcare Today KEY: Nursing Process Step:
Implementation
MSC: NCLEX: Safe and Effective Care Environment: Coordinated Care

4. Mrs. Lee, a Chinese American woman, brought her 5-year-old daughter to the clinic following a minor injury to the child's leg. She talked freely with the female nurse while the nurse completed the health history and assessed vital signs. The nurse left the room to care for other patients. The physician, a male, examined the child with the mother present. He noticed that Mrs. Lee was uncommunicative and would not maintain eye contact. The nurse understands that Mrs. Lee's response to the physician was related to the fact that:
- Mrs. Lee did not understand the physician
 - Mrs. Lee injured her child and is afraid she will be reported to the authorities
 - Mrs. Lee is uncomfortable with male health care workers because of her culture
 - Mrs. Lee plans to see a traditional healer after consulting with the physician

ANS: C

Mrs. Lee talked freely with the nurse during the assessment. There is insufficient information to suspect abuse. Chinese American clients may consider eye contact impolite. Chinese American women may be very uncomfortable about being examined by a male health care worker. Traditional Chinese healers are usually sought before seeking Western medicine.

DIF: Cognitive Level: Analysis REF: Page 7 OBJ: 7
TOP: Cultural Considerations KEY: Nursing Process Step:
Assessment
MSC: NCLEX: Psychosocial Integrity

5. Your pediatric patient is about to be discharged home. The child will be taking prescription medications on a regular basis. The parent uses herbal supplements and wishes to administer these to the child. You explain to the parent that herbal supplements:
- Do not provide any benefit to the patient and are harmless
 - Can cause serious interactions with some prescription medications
 - Can be administered in excess of the recommended dosage
 - Are ineffective and are only used by the uninformed

ANS: B

Herbal supplements can provide benefit but should never be considered harmless. Herbals have been documented to cause significant and harmful side effects with prescription drugs. Exceeding dosage is not recommended. Herbal supplements have been proven effective for some ailments and may be used in cultural rituals that are meaningful to the client.

DIF: Cognitive Level: Application REF: Pages 8-9 OBJ: 7
TOP: Complementary and Alternative Medicine
KEY: Nursing Process Step: Implementation
MSC: NCLEX: Physiological Integrity

6. Complementary medicine is:
- Only used when all other measures have been exhausted
 - Reimbursed by most insurance companies
 - Used in place of traditional medicine
 - Advocated by many cultural beliefs

ANS: D

Complementary medicine is used with traditional or conventional therapy. It is not considered a last resort. It is not reimbursed by most insurance companies. Many cultural beliefs promote the use of complementary therapy.

DIF: Cognitive Level: Comprehension REF: Page 8 OBJ: 7
TOP: Complementary and Alternative Medicine
KEY: Nursing Process Step: Implementation
MSC: NCLEX: Physiological Integrity

7. A mother inquires about health insurance while visiting your clinic. She states that her income is too high for her to be eligible for Medicare, but too low to afford health insurance. You explain that she may be eligible to receive assistance from the:
- The Division of Maternal and Child Health
 - The Health Insurance Portability and Accountability Act
 - WIC
 - The State Children's Health Insurance Program

ANS: D

The State Children's Health Insurance Program has expanded coverage to many uninsured children ineligible for Medicaid. The division of Maternal and Child Health does not provide insurance. HIPAA protects privacy; WIC is a supplemental food program.

DIF: Cognitive Level: Application REF: Page 2 OBJ: 2
TOP: Government Programs KEY: Nursing Process Step:
Implementation
MSC: NCLEX: Safe and Effective Care Environment: Coordinated Care

8. The prevalence of chronic health conditions in children is:

- a. Decreasing as a result of advances in health care and treatment
- b. Increasing as a result of advances in health care and treatment
- c. Increasing as a result of the improved survival of premature infants
- d. Decreasing as a result of decreased incidence of childhood injury

ANS: B

The prevalence of chronic health conditions in children is increasing as a result of advanced care and treatment. The increased number of surviving premature infants has increased the number of children with chronic conditions. The number of children who survive childhood injury has increased, leading to increased numbers of disabled children.

DIF: Cognitive Level: Comprehension REF: Page 3 OBJ: 3

TOP: Changes in Mortality and Morbidity

KEY: Nursing Process Step: Planning

MSC: NCLEX: Health Promotion and Maintenance

9. Infant mortality in the United States is:
- a. The lowest in the world
 - b. Improved because the United States has a national health insurance program
 - c. Highest among non-Hispanic, African-American mothers
 - d. Not related to maternal complications

ANS: C

Infant mortality in the United States is highest among non-Hispanic, African-American mothers. The United States does not have the lowest infant mortality rate in the world. The United States does not have a national insurance program. Infant mortality is related to maternal complications.

DIF: Cognitive Level: Comprehension REF: Page 2 OBJ: 3

TOP: Changes in Mortality and Morbidity

KEY: Nursing Process Step: N/A

MSC: NCLEX: Health Promotion and Maintenance

10. In a terrorist attack, the most likely candidate for a bacterial agent release is:
- a. Ricin
 - b. Sarin
 - c. Anthrax
 - d. Smallpox

ANS: C

Anthrax is the most likely bacterial agent. Ricin is a toxin, sarin is a chemical agent, and smallpox is viral.

DIF: Cognitive Level: Comprehension REF: Pages 5-6 OBJ: 5

TOP: Emergency Preparedness

KEY: Nursing Process Step:

Assessment

MSC: NCLEX: Safety and Infection Control

11. Nursing care of children focuses on improving quality of care by:
- Providing an environment for optimal growth and development
 - Focusing on curing childhood illnesses
 - Addressing problems caused by communicable disease
 - Improving sanitation

ANS: A

Pediatric nursing is now focused on providing an environment for optimal growth and development. Sanitation has improved. Communicable diseases and other illnesses have mostly been eradicated or controlled by immunizations, prenatal care, and antibiotics.

DIF: Cognitive Level: Comprehension REF: Page 1 OBJ: 4
TOP: Evolution of Child Care KEY: Nursing Process Step:
Assessment
MSC: NCLEX: Safety and Infection Control

12. Emergency preparedness training:
- Is not carried out by nurses
 - Is not necessary in today's society
 - Is necessary because of the threat of war, terrorism, or disaster
 - Is considered traumatic for children

ANS: C

Emergency preparedness training is carried out by nurses. It is necessary in today's society, due to the increased occurrence of severe weather events, heightened terrorism threats, and war. Preparing children for emergencies helps lessen the traumatic effect of the event.

DIF: Cognitive Level: Comprehension REF: Pages 4-5 OBJ: 5
TOP: Emergency Preparedness KEY: Nursing Process Step:
Implementation
MSC: NCLEX: Safety and Infection Control

13. A family that is caring for a disabled child at home often needs help accessing a network of services. This need is best met by a:
- Pediatric nurse practitioner
 - Case manager
 - School nurse
 - Hospice counselor

ANS: A

The case manager oversees a continuum of care for patients and helps them to access and coordinate needed services.

DIF: Cognitive Level: Application REF: Page 10 OBJ: 6
TOP: Health Care Delivery Settings KEY: Nursing Process Step:

Implementation

MSC: NCLEX: Psychosocial Integrity

14. A child has been diagnosed with a terminal illness. The child will need additional services and support after the discharge. Which health care delivery setting will provide the child with the most appropriate services?
- Home health care
 - Hospice
 - Parish nursing
 - Clinic

ANS: B

Home care focuses on delivering care to restore the child. Hospice provides care for the dying child. Parish nursing focuses on health promotion and may be able to provide the parents with support following the death of the child. The clinic setting provides preventive and curative care for the child.

DIF: Cognitive Level: Application

REF: Pages 9-10 OBJ: 8

TOP: Health Care Delivery Settings

KEY: Nursing Process Step:

Implementation

MSC: NCLEX: Psychosocial and Physiological Integrity

15. Today a child in your clinic has been diagnosed with asthma. The parents tell you that the child was planning on attending summer camp. The parents do not want to send their child to camp while he is learning to control the asthma. You tell the parents that:
- The child cannot attend camp until his asthma is controlled
 - A home care nurse can visit the child at camp
 - There are organized camps for children with asthma
 - They will have to arrange for a private duty nurse to see him at camp

ANS: C

Camps for children with asthma are available. The camps are staffed with nurses and other health care professionals that can care for and monitor the child while at camp. Home care nurses do not routinely see clients at camps. A private duty nurse would not be necessary at an asthma camp.

DIF: Cognitive Level: Application

REF: Page 11

OBJ: 8

TOP: Health Care Delivery Settings

KEY: Nursing Process Step: Planning

MSC: NCLEX: Safety and Infection Control

16. A clinic nurse in an immigrant community has observed that some children have small burned areas on their skin. One child has a burn that has become infected. On exploration, the nurse learns that the burns are applied as a folk remedy for temper tantrums. What is the nurse's most appropriate *initial* response?
- Tell the parents that this type of treatment is ignorant
 - Ask the family if the treatment has been effective

- c. Report the family to Child Protective Services
- d. Explain the legal consequences of this behavior

ANS: D

The parents are using a remedy that has been acceptable in their culture. The nurse must show respect for their culture, but still help the parents to understand that the remedy is not acceptable in this country and could have legal consequences. The next step would be to discuss other options for managing children's temper tantrums.

DIF: Cognitive Level: Analysis REF: Page 7 OBJ: 7
TOP: Cultural and Religious Considerations
KEY: Nursing Process Step: Implementation
MSC: NCLEX: Psychosocial and Physiological Integrity

17. Which of the following regulates working conditions for children under age 18?
- a. Children's Charter
 - b. Medicaid and Youth Project
 - c. Children's Health Insurance Program
 - d. Fair Labor Standards Act

ANS: D

The Fair Labor Standards Act regulates working conditions for children under age 18. It is the only option that specifically addresses employment.

DIF: Cognitive Level: Comprehension REF: Page 1 OBJ: 2
TOP: Evolution of Child Health KEY: Nursing Process Step: N/A
MSC: NCLEX: Safe and Effective Care Environment

18. The nurse is caring for a patient from a culture not common to the local area. The family demonstrates practices that seem unusual to the nurse and other staff. The appropriate way the nurse can interact with the patient and family is to:
- a. Be respectful and open-minded when discussing beliefs
 - b. Explain that the child must be cared for in ways that differ from their practices
 - c. Insist that the family changes their beliefs
 - d. Speak to the family in the language used most commonly by the staff, so that the family can learn the language.

ANS: A

Families and patients of any culture should be shown respect regardless of how unusual their practices may seem. The nurse should care for the child in ways that do not interfere with the family's own beliefs. Patient and family beliefs can seldom be changed. The nurse should discover what language the family speaks most frequently.

DIF: Cognitive Level: Comprehension REF: Page 6 OBJ: 7
TOP: Changes in Mortality and Morbidity
KEY: Nursing Process Step: Assessment MSC: NCLEX: Safety and Infection Control

19. Nurses in a pediatric practice can prepare families for emergencies by:
- Teaching parents CPR
 - Instructing parents to have a list of emergency phone numbers
 - Instructing parents to have an out-of-state point of contact
 - All of the above

ANS: D

All of these interventions will help parents be prepared for emergencies.

DIF: Cognitive Level: Application REF: Page 5 OBJ: 5
TOP: Emergency Preparedness KEY: Nursing Process Step:
Implementation
MSC: NCLEX: Safety and Infection Control

20. The nurse in a pediatric clinic notices that a child in the waiting area has begun to experience shortness of breath. The nurse brings him back for immediate attention. The nurse was performing which of the following roles:
- Anticipatory guidance
 - Triage
 - Case management
 - Evidence-based practice

ANS: B

Anticipatory guidance and case management are other roles. Evidence-based practice is a philosophy.

DIF: Cognitive Level: Application REF: Page 9 OBJ: 6
TOP: Health Care Delivery Settings KEY: Nursing Process Step:
Assessment
MSC: NCLEX: Physiological Integrity

MATCHING

Match the following maternal-child health programs with their purposes:

- Social Security
 - Children and Youth Project
 - State Children's Health Insurance Program
 - Comprehensive Child Immunization Act
 - National School Lunch Act and Child Nutrition Act
- Provides health care coverage for children in families that earn too much for Medicaid but cannot afford private insurance
 - Targets low-income children and children in areas with poor access to health care
 - Provides free or reduced meals to low-income families
 - Provides state and federal funds for maternal-child care and for children with disabilities

5. Ensures that children in the United States are protected against vaccine-preventable diseases at the earliest age possible

1. ANS: C DIF: Cognitive Level: Knowledge REF: Page 3
OBJ: 2 TOP: Changes in Mortality and Morbidity
KEY: Nursing Process Step: Planning MSC: NCLEX: Safety and Infection Control
2. ANS: B DIF: Cognitive Level: Knowledge REF: Page 3
OBJ: 2 TOP: Changes in Mortality and Morbidity
KEY: Nursing Process Step: Planning MSC: NCLEX: Safety and Infection Control
3. ANS: E DIF: Cognitive Level: Knowledge REF: Page 3
OBJ: 2 TOP: Changes in Mortality and Morbidity
KEY: Nursing Process Step: Planning MSC: NCLEX: Safety and Infection Control
4. ANS: A DIF: Cognitive Level: Knowledge REF: Page 3
OBJ: 2 TOP: Changes in Mortality and Morbidity
KEY: Nursing Process Step: Planning MSC: NCLEX: Safety and Infection Control
5. ANS: D DIF: Cognitive Level: Knowledge REF: Page 3
OBJ: 2 TOP: Changes in Mortality and Morbidity
KEY: Nursing Process Step: Planning MSC: NCLEX: Safety and Infection Control

SHORT ANSWER

1. Nurses can examine research literature, analyze important evidence, and improve the quality of patient care by applying the philosophy of

ANS:
Evidence-based practice

DIF: Cognitive Level: Knowledge REF: Page 6 OBJ: 1
TOP: Current Practice KEY: Nursing Process Step:
Implementation
MSC: NCLEX: Safe and Effective Care Environment: Coordinated Care

2. List three causes of emotional and behavioral problems in children.

ANS:
School failure
Violence
Substance abuse
Risky sexual behavior

DIF: Cognitive Level: Comprehension REF: Page 3 OBJ: 3

TOP: Changes in Mortality and Morbidity

KEY: Nursing Process Step: Assessment MSC: NCLEX: Psychosocial Integrity

3. List three factors that contribute to childhood morbidity.

ANS:

General health

Socioeconomic Status

Access to health care

Psychosocial factors

Homelessness

Poverty

Daycare

DIF: Cognitive Level: Knowledge

REF: Page 3

OBJ: 3

TOP: Changes in Mortality and Morbidity

KEY: Nursing Process Step: Assessment

MSC: NCLEX: Health Promotion and Maintenance

4. List three of the *Healthy People 2010* objectives.

ANS:

Promotion of health behaviors

Promotion of healthy and safe communities

Improvement of systems for personal and public health

Prevention and reduction of diseases and disorders

DIF: Cognitive Level: Knowledge

REF: Page 4

OBJ: 4

TOP: Health Promotion

KEY: Nursing Process Step:

Implementation

MSC: NCLEX: Health Promotion and Maintenance