

~~X~~ Handout 24-1

Student's Name _____

Chapter 24: Caring for Infants and Children—Quiz

Circle the letter of the best answer to each multiple-choice question.

1. Because a child's body surface area compared to weight is _____ an adult's, a child is more likely to suffer from hypothermia.
 - a. equivalent to
 - b. larger than
 - c. the same as
 - d. smaller than

2. An infant's head must maintain a(n) _____ position during airway assessment so that her airway remains open.
 - a. extended
 - b. flexed
 - c. neutral
 - d. lateral

3. Because of immature accessory muscles, infants and children use their _____ to breathe.
 - a. diaphragm
 - b. intestines
 - c. extremities
 - d. liver and spleen

4. The most common type of seizure in pediatric patients is the _____ seizure.
 - a. meningitis
 - b. traumatic
 - c. epileptic
 - d. febrile

5. A tip for the physical exam of a young pediatric patient is, if possible, to assess the child while she is:

- a. separated from the parent.
 - b. in the prone position.
 - c. in the supine position.
 - d. on the parent's lap.
6. A child's head is _____ in proportion to the body than is an adult's head.
- a. larger
 - b. smaller
 - c. no larger
 - d. no smaller
7. Drawing back between the ribs or around the shoulders of a pediatric patient who is having difficulty breathing is called:
- a. retractions.
 - b. withdrawing.
 - c. stress breathing.
 - d. intercostal extension.
8. A normal pulse rate for an infant 6 to 12 months old is _____ beats per minute.
- a. 12 to 30
 - b. 20 to 30
 - c. 60 to 75
 - d. 80 to 140
9. A normal respiratory rate for an infant 6 to 12 months old is _____ breaths per minute.
- a. 12 to 20
 - b. 20 to 30
 - c. 60 to 75
 - d. 80 to 140
10. Monitor an infant's airway continually: infants have proportionally _____ tongues, which, if relaxed, can easily _____ the airway.
- a. smaller, open

Name _____

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Care for respiratory distress in infants and children should be: 1) _____
 - A) delayed until vital signs are taken.
 - B) delayed.
 - C) immediate.
 - D) performed after a parent or guardian arrives from work.

- 2) Because the surface of a child's body is large in proportion to weight, this makes infants and children more vulnerable to: 2) _____
 - A) maxothermia.
 - B) hypothermia.
 - C) normothermia.
 - D) hyperthermia.

- 3) Care for a child who has a high fever includes: 3) _____
 - A) placing ice packs on the chest.
 - B) keeping the child outside in cold air.
 - C) removing clothing.
 - D) immersion in cool water.

- 4) Which of the following is NOT a special characteristic of the pediatric patient's anatomy and physiology? 4) _____
 - A) The surface of the child's body is large in proportion to weight.
 - B) Infants are obligate nose breathers.
 - C) The head is larger and heavier in proportion to the body.
 - D) The airway is proportionally the same as an adult's.

- 5) When approaching a child you should: 5) _____
 - A) speak to her directly.
 - B) avoid eye contact.
 - C) speak only to the parents.
 - D) stand above her looking down.

- 6) When managing the airway of an infant, it is important to ensure that the head is in this position. 6) _____
 - A) Tongue/jaw-lift
 - B) Hyperextended
 - C) Neutral
 - D) Hyperflexed

- 7) The sudden death during sleep of an infant under 1 year of age that cannot be explained is called: 7) _____
 - A) ALTE.
 - B) SDDS.
 - C) SIDS.
 - D) AIDS.

- 8) For a pediatric patient in respiratory arrest, it is appropriate to do all of the following EXCEPT: 8) _____
 - A) assist ventilations with a pocket face mask with supplemental oxygen.
 - B) provide blow-by oxygen via pediatric nonrebreather mask.
 - C) assist ventilations with a pediatric bag-valve mask ventilator and supplemental oxygen.
 - D) assist ventilations with a pocket face mask.

- 9) A seizure in a child may be caused by: 9) _____
 - A) infection.
 - B) low blood sugar.
 - C) high fever.
 - D) all of the above.

- 10) Any respiratory difficulty or airway problem in a pediatric patient should be considered: 10) _____
 A) manageable without a higher level of care.
 B) a life-threatening emergency.
 C) a low priority situation.
 D) easily correctable with oxygen.
- 11) An infant is considered to be a child in what age range? 11) _____
 A) One to three years
 B) Three to six months
 C) Birth to one month
 D) One month to one year
- 12) Emergency care for a child who had a seizure includes all of the following EXCEPT: 12) _____
 A) monitoring breathing and mental status.
 B) placing the child in a comfortable position.
 C) placing a bite block in the child's mouth to protect the tongue.
 D) giving supplemental oxygen if indicated.
- 13) You may have a legal obligation to report any suspicions of abuse or neglect to all of the following EXCEPT: 13) _____
 A) child welfare agencies.
 B) the police.
 C) the hospital staff.
 D) the parents.
- 14) Child neglect occurs when parents or caregivers: 14) _____
 A) insist on strict discipline in the household.
 B) do not provide possessions and opportunities equal to those of their peers.
 C) insist on an earlier bedtime for older children.
 D) do not provide basic needs such as food, water, and shelter.
- 15) Your infant patient has died suddenly and unexplainably during sleep. You should: 15) _____
 A) leave the scene so the family can grieve.
 B) question the parents to identify any child abuse.
 C) start resuscitation if indicated and provide support for the parents.
 D) classify the death as an incident of SIDS and notify authorities.
- 16) When you suspect abuse or neglect in the presence of caregivers, you should: 16) _____
 A) ask others what their story is.
 B) confront them with leading questions.
 C) be calm, professional, and discreet.
 D) ask the caregiver to leave the room so you can speak to the child.
- 17) As you walk into a residence, you see a 3-year-old male who looks at you and smiles. He is leaning forward and has visible retractions and accessory muscle use. His skin appears normal. Which component of the Pediatric Assessment Triangle is affected in this patient? 17) _____
 A) Circulation
 B) Airway
 C) Work of breathing
 D) Appearance
- 18) An acute respiratory condition found in infants and children is characterized by a barking type of cough is known as: 18) _____
 A) asthma.
 B) epiglottitis.
 C) bronchiolitis.
 D) croup.

- 19) The components of the Pediatric Assessment Triangle are: 19) _____
 A) circulation, sensation, and motor function.
 B) airway, breathing, and circulation.
 C) appearance, work of breathing, circulation.
 D) mental status, airway, and motor function.
- 20) Cardiac arrest in children is most likely caused by: 20) _____
 A) high blood pressure. B) respiratory compromise.
 C) diabetes. D) coronary artery disease.
- 21) An infant who has been vomiting and having diarrhea for days may exhibit which of the following signs? 21) _____
 A) Sunken fontanelles B) Delayed capillary refill
 C) Dehydration D) All of the above
- 22) Which of the following questions is MOST appropriate to ask the parent of a child who has had a seizure? 22) _____
 A) When was the last time the child went to the doctor?
 B) Does the child have any allergies?
 C) What did the child eat for breakfast?
 D) Has the child had a fever?
- 23) To help keep an infant or child calm, the order of the physical assessment should be: 23) _____
 A) head to toe. B) toe to head.
 C) always from a distance. D) it doesn't matter.
- 24) Swelling of the epiglottis that may be caused by a bacterial infection is BEST defined as: 24) _____
 A) RSV. B) asthma. C) croup. D) epiglottitis.
- 25) Because the tongue is larger in an infant and child, it can cause: 25) _____
 A) airway obstruction. B) severe congestion.
 C) severe sneezing. D) nasal passage obstruction.
- 26) A 2-month-old infant has a three-day history of diarrhea and vomiting. This should cause a high suspicion for: 26) _____
 A) infection. B) fever. C) shock. D) croup.
- 27) Which of the following is NOT a common cause of seizures in infants and children? 27) _____
 A) Head trauma B) Too much oxygen in the blood
 C) Fever D) Inadequate oxygen in the blood
- 28) Which of the following techniques would be MOST helpful when assessing a 10-year-old child? 28) _____
 A) Let him sit on his parent's lap.
 B) Assure the child that he hasn't been bad.
 C) Allow the child to answer questions for himself.
 D) Give him a toy to play with.
- 29) The average respiratory rate for a toddler is _____ breaths per minute. 29) _____
 A) 30 to 35 B) 15 to 20 C) 24 to 40 D) 20 to 25

30) You are attempting to provide oxygen to a 2-year-old in respiratory distress. The child repeatedly pulls the oxygen mask off his face. You should: 30) _____

- A) discontinue oxygen therapy.
- B) have a parent provide blow-by oxygen.
- C) explain the importance of the oxygen mask.
- D) tell the child that he must keep the mask on his face or he will be in trouble.

Chapter 24 Review

In the space provided, write the word or words that best complete each sentence.

1. In an acute asthma attack, air is _____ in the lungs and the chest becomes _____.
2. Continually monitor pediatric patients, including taking _____ vital signs.
3. If a child's pulse is too rapid or too slow, check for other signs of problems, such as _____ or shock.
4. A(n) _____ blood pressure in a pediatric patient can be a late indicator of shock.
5. If capillary refill in an infant takes more than _____ seconds, suspect shock.
6. Regardless of how the parent of a pediatric patient behaves, treat him/her with _____.
7. One way to keep the head of a pediatric patient from _____ is to place a folded towel under the patient's shoulders.
8. If an infant's respirations are fewer than _____ per minute or a child's respirations are fewer than _____ per minute, assist ventilations.
9. _____, a common viral infection of the upper airway, can cause a child to make a "seal bark" sound.
10. A pediatric patient has the ability to compensate for blood loss for a(n) _____ time than an adult can.

HANDOUT 24-3

LONGER

CROUP

FALLING (LOW)

EPIGLOTTITIS

FLEXING FORWARD

FREQUENT

2

TRAPPED, INFLATED

RESPIRATORY DISTRESS

20, 10

COURTESY

FLEXING BACKWARD

Name:

CHAPTER 24 MATCHING

- ___ Several different forms of child abuse are sexual, physical and ?
- ___ The fontanel on an infant's head doesn't completely close until about ? months of age
- ___ Which of the following approaches to your assessment of a child may be the least threatening to them
- ___ The most appropriate approach when assessing the pediatric patient is to:
- ___ As a health care provider you are a ? when it comes to reporting cases of neglect or abuse
- ___ The suddenly unexplained death of an apparent healthy baby during sleep
- ___ Another term for the above question
- ___ Severe diarrhea & vomiting can cause an infant to become?
- ___ The amount of blood in an infant
- ___ In infants a virus that affects the larynx, trachea and bronchi
- ___ The inward movement of the soft tissues between the ribs when a child breathes in
- ___ The PAT consists of Appearance, Work of breathing and
- ___ Adolescents are considered to be between the ages of
- ___ The average pulse rate of a new born is between
- ___ A neonate is considered from birth to ? days old.
- ___ A school age child is between the ages of
- ___ Internal organs of the body are lined by this thin layer of tissue
- ___ A medical condition that results in loss of elasticity of the lungs & retains CO₂
- ___ A late sign of a tension pneumothorax
- ___ The Gallbladder is a ? organ

CHAPTER 24 MATCHING ANSWERS

- A. Retractions
- B. Hollow
- C. 18
- D. Suid
- E. 85-205
- F. Visceral Peritoneum
- G. Legs & Chest then neck & head
- H. 28
- I. Hypovolemic
- J. Remain at eye level, explain each step of exam, be truthful
- K. Circulation
- L. 12 ozs
- M. Croup
- N. Mandated reporter
- O. SIDS
- P. Emphysema
- Q. Tracheal deviation
- R. 13-17
- S. Psychological
- T. 6-12
- U. JVD
- V. Solid
- W. Bronchitis
- X. Parietal Peritoneum
- Y. Contractions
- Z. Hypervolemic