Part I MCQ: (Choose the most correct answer) (one mark for each)

1- An infant has had frequent episodes of green, mucus-containing stools. The nursing assessment reveals that the infant has dry mucus membranes, poor skin turgor, and an absence of tearing. Based on these data, what is the most appropriate nursing diagnosis?
   a. Impaired skin integrity related to irritation caused by frequent, loose stools
   b. Deficient fluid volume related to frequent, loose stools
   c. Pain related to abdominal cramping and diarrhea
   d. Imbalanced nutrition: less than body requirements related to diarrhea

2- When providing postoperative care for the child with a cleft palate, the nurse should position the child in which of the following positions?
   a. Supine
   b. Prone
   c. In an infant seat
   d. On the side

3- A 3-month-old infant is admitted to the pediatric unit with a diagnosis of Hirschsprung’s disease. What is most important when monitoring the infant’s status?
   a. Weigh the infant every morning.
   b. Maintain intake and output records.
   c. Measure abdominal girth every four hours.
   d. Check serum electrolyte levels.

4- Which assessment finding would the nurse expect in an infant diagnosed with pyloric stenosis?
   a. Abdominal rigidity
   b. Ribbon-like stools
   c. Visible waves of peristalsis
   d. Rectal prolapse

5- Which of the following nursing diagnosis would the nurse identify as a priority for the infant with tracheoesophageal fistula (TEF)?
   a. impaired parenting related to newborn’s illness
   b. risk of injury related to increased potential for aspiration
   c. ineffective nutrition: less than body requirements, related to poor sucking ability
   d. ineffective breathing pattern related to a weak diaphragm
6- When the infant returns to the unit after imperforate anus repair, the nurse places the infant in which of the following position?
   a. on the abdomen, with legs pulled up under the body
   b. on the back, with legs extended straight out
   c. lying on the side with hips elevated
   d. lying on the back in a position of comfort

7- While assessing a child with pyloric stenosis, the nurse is likely to note which of the following?
   a. Regurgitation
   b. Steatorrhea
   c. Projectile vomiting
   d. “Currant jelly” stools

8- The other name of celiac disease is:
   a. Cystic fibrosis.
   b. Gluten enteropathy.
   c. a + b.
   d. None of them.

9- A child has surgery for pyloric stenosis, you offer him his first feeding post operatively, following this it would be best to position him:
   a. supine, to prevent sudden infant death syndrome
   b. trendelenburg, to prevent pressure on the suture line
   c. on his right side to encourage flow through the pylorus
   d. prone, to encourage maximum digestion of milk curds

10- Treatment of intussusception usually starts in the first 24 hours by
   a) Hydrostatic barium enema  b) Resection and anastomosis
   c) Surgery  d) All of these

11- The primary sign of Esophageal atresia disease is:
   a) Excessive salivation  b) Vomiting
   c) Constipation  d) Abdominal distension

12- Patient complaining of Vomiting is at risk for:
   a) Respiratory acidosis  b) Metabolic acidosis
   c) Respiratory alkalosis  d) Metabolic alkalosis

13- Diet of celiac disease should be low in:
   a) Fat  b) Fat soluble vitamins
   c) Sugar  d) All of these

14- Diagnosis of celiac disease does all of the following EXCEPT:
   a) Stool analysis  b) D-xylose test
   c) Sweat test  d) Intestinal biopsy

15- A newborn complaining of jelly like stool, this is a primary sign
   a) Hirschsprung's disease  b) Intussusception
   c) Tracheoesophageal fistula  d) Pyloric stenosis
16- To diagnose the condition of Hirschsprung's disease you should do:
   a) Rectal biopsy  
   c) Intestinal biopsy

17- All of the following congenital cause of intestinal obstruction EXCEPT
   a) Pyloric stenosis  
   c) Intussusceptions

18- The ultimate goal for the nurse to child who has acute gastroenteritis is:
   a. Maintain hydration, electrolyte balance
   b. Take complete assessment from family
   c. Take V/S
   d. Give antibiotics

19- In bacterial meningitis all the following may be observed during CSF analysis results except:
   a. high cells count
   b. high sugar
   c. high protein
   d. turbidity

20- A newborn has a meningomyelocele; the nurse should place him in which position:
   a. semi-Fowler's
   b. supine
   c. prone
   d. non of the above is correct

21- When Baby Nicole was 1 day old she has surgery for reduction of myelomeningocele. Which nursing intervention is critical during the postoperative period?
   a. passive range-of-motion exercises of the lower extremities
   b. suprapubic manual expression of urine
   c. observation of the frequency and character of the stools
   d. daily measurement of the head circumference

22- What clinical manifestations would suggest hydrocephalus in a neonate?
   a. Bulging fontanel, dilated scalp veins.
   b. Closed fontanel, high-pitched cry.
   c. Constant low-pitched cry, restlessness.
   d. Depressed fontanel, decreased blood pressure.

23- Management of bacterial meningitis may include all the following EXCEPT
   a. Isolation
   b. Oral antibiotics
   c. Quiet environment
   d. Monitoring convulsions
24- Kerning's sign is manifestation for:
   a. William's tumor.
   b. Acute Rheumatic Fever.
   c. Encephalitis
   d. Meningitis

25- All the following nursing measures are suitable for child with convulsions **except**?
   a. Keeping patent air way
   b. Place child on his side
   c. Restraining child’s extremities
   d. Recording the events of convulsion

26- An appropriate nursing assessment of an infant with spina bifida includes all of the following, **except**:
   a. head circumference.
   b. checking reflexes.
   c. palpating fontanels.
   d. abdominal girth.

27- A client with hemophilia has a very swollen knee after falling from bicycle riding. Which of the following is the first nursing action?
   a. initiate an IV site to begin administration of cryoprecipitate
   b. type and cross-match for possible transfusion
   c. monitor the client's vital signs for the first 5 minutes
   d. apply ice pack and compression dressings to the knee

28- A client and her husband are positive for the sickle cell trait. The client asks the nurse about chances of her children having sickle cell disease. Which of the following is appropriate response by the nurse?
   a. one of her children will have sickle cell disease
   b. only the male children will be affected
   c. each pregnancy carries a 25% chance of the child being affected
   d. if she had four children, one of them would have the disease

29- Which of the following health teachings regarding sickle cell crisis should be included by the nurse?
   a. it results from altered metabolism and dehydration
   b. tissue hypoxia and vascular occlusion cause the primary problems
   c. increased bilirubin levels will cause hypertension
   d. there are decreased clotting factors with an increase in white blood cells

30- The mother of a child with hemophilia asks the nurse which over the counter medication is suitable for her child’s discomfort.
   a. Advil (Ibuprofen)
   b. Tylenol (Acetaminophen)
   c. Aspirin (acetylsalicylic acid)
   d. Naproxen (Naprosyn)
31- Which of the following statements best describes B-Thalassemia major?
   a. All formed elements of the blood are depressed .
   b. Inadequate numbers of red blood cells are present .
   c. Increased incidence occurs in families of Mediterranean extraction .
   d. Increased incidence occurs in blacks of West African descent .

32- The nurse is teaching the parents of a child with hemophilia regarding bleeding episodes. The nurse should emphasize that the greatest danger from bleeding is due to:
   a. Bleeding into the joints
   b. Cutaneous bleeding
   c. Bleeding into the oral cavity
   d. Intracranial bleeding

33- The therapeutic management of children with B-thalassemia major consists primarily of which of the following ?
   a. Oxygen therapy .
   b. Adequate hydration .
   c. Supplemental iron .
   d. Frequent blood transfusions .

34- Which of the following is descriptive of most cases of hemophilia ?
   a. X-linked recessive deficiency in a factor involved in the blood clotting reaction viii.
   b. X-linked recessive deficiency of platelets causing prolonged bleeding .
   c. X-linked recessive inherited disorder in which the red blood cells become moon shaped .
   d. Y-linked recessive inherited disorder in which the red blood cells become moon shaped .

35- Which of the following interventions may be done for iron deficiency anemia child?
   a. Bed rest
   b. High iron diet
   c. Brushing teeth after iron administration
   d. All of the above

36- The infant walks without support at?
   a. Age 8 months
   b. Age 12 months
   c. Age 14 months
   d. Age 16 months

37- The main cause of respiratory distress syndrome is:
   a. Unknown
   b. Diabetes
   c. Inadequate amount of surfactant
   d. Fetal stress
38- The nurse is to administer pancreatic enzymes to an 8-month-old child who has cystic fibrosis. When should this medication be administered?
   a. A half hour before meals
   b. With meals
   c. An hour after meals
   d. Between meals

39- Which of the following heart defects usually results in hypoxemia and cyanosis?
   a. Coartation of the aorta.
   b. Atrial septal defect.
   d. Transposition of the great vessels.

40- The best prophylactic treatment for client is to prevent further rheumatic attack:
   a. Prednisone.
   b. Aspirin.
   c. Penicillin.
   d. All of the above.

*Part II: Put True or False*  
(one mark for each)

1. Hirschsprung’s disease diagnosed by biopsy
2. Wheat is permitted for a celiac child while corn is not
3. Vomiting leads to Acidosis
4. Infants whose fontanels have closed are able to compensate for increased intracranial pressure for a longer time period than infants with open fontanels.
5. Cerebral palsy is a progressive disorder of posture and movement resulting from a brain lesion.
6. Children with sickle cell anemia have increased hemoglobin S.
7. An accumulation of iron, termed hemosiderosis, can be treated with a chelating agent.
8. Blood pressure will remain normal in a child with dehydration until it eventually decreases as the dehydration becomes severe.
9. For a child with diarrhea, the best treatments are fluids and anti-diarrheal agents.
10. Normally a child with Hirschsprung’s disease won’t have any stool in the rectal vault.
**Part III: Match the following:**  (one mark for each)

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<td><strong>A</strong></td>
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<td>1. Esophageal atresia</td>
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**End of Questions**  
**Good Luck**