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Using Calculator (No)

University of
Palestine



Final Exam
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Using Dictionary (No)

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

1- Which of the following heart defects usually results in hypoxemia and cyanosis?

- a. Coarctation of the aorta .
- b. Atrial septal defect .
- c. Patent ductus arteriosus .
- d. Transposition of the great vessels .

2- The nurse would identify which congenital heart disease as involving increased pulmonary blood flow?

- a. Tricuspid atresia
- b. Patent ductus arteriosus
- c. Tetralogy of Fallot
- d. Aortic stenosis

Situation (questions 3, 4, 5)

Faten, 2 years old is rushed to the ER due to cyanosis precipitated by crying. Her mother observed that after playing she gets tired. She was diagnosed with Tetralogy of Fallot.

3- Which of the following structural defects constitute tetralogy of Fallot ?

- a. Pulmonary stenosis, ventricular septal defect, overriding aorta, right ventricular hypertrophy
- b. Aortic stenosis, ventricular septal defect, overriding aorta, right ventricular hypertrophy .
- c. Aortic stenosis, atrial septal defect, overriding aorta, left ventricular hypertrophy
- d. Pulmonary stenosis, ventricular septal defect, aortic hypertrophy, left ventricular hypertrophy .

4- The immediate nursing intervention for cyanosis of Faten is:

- a. Call up the pediatrician
- b. Place her in knee chest position
- c. Administer oxygen inhalation
- d. Transfer her to the PICU

5- Faten was scheduled for a palliative surgery, which creates anastomosis of the subclavian artery to the pulmonary artery. This procedure is:

- a. Waterston-Cooley
- b. Raskkind Procedure
- c. Coronary artery bypass
- d. Blalock-Taussig

6- All the following are major signs of rheumatic fever EXCEPT :

- a. Arthralgia
- b. Carditis
- c. Chorea
- d. Polyarthritis

7- The best prophylactic treatment for client is to prevent further rheumatic attack:

- a. Prednisone.
- b. Aspirin.
- c. Penicillin.
- d. All of the above.

8- Which is the most common valvular abnormality with rheumatic fever :-

- a. Pulmonary Stenosis
- b. Mitral Stenosis
- c. Aortic Insufficiency
- d. Tricuspid Insufficiency

9- Inability of the heart to pump an adequate amount of blood to the systemic circulation to meet the demands of the body is called...

- a. aortic stenosis
- b. ASD
- c. CHF
- d. VSD

10- You should not give digoxin to the patient if his pulse is less than:

- a. 60 B/m
- b. 70 B/m
- c. 80 B/m
- d. 90 B/m

11- 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.

12- 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

13- 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

14- 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

15- 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

16- 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

17- 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

18- 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

19- Diagnosis of celiac disease does all of the following EXCEPT:

- a) Stool analysis
- b) D-xylose test
- c) Sweat test
- d) Intestinal biopsy

20- A newborn complaining of jelly like stool, this is a primary sign

- a) Hirschsprung's disease
- b) Intussusception
- c) Tracheoesophageal fistula
- d) Pyloric stenosis

21- To diagnose the condition of Hirschsprung's disease you should do:

- a) Rectal biopsy
- b) Stool analysis
- c) Intestinal biopsy
- d) Sweat test

22- 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

23- 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

24- 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

25- Kerning's sign is manifestation for:

- a. Wiliam's tumor .
- b. Acute Rheumatic Fever.
- c. Encephalitis
- d. Meningitis

26- 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

27- An appropriate nursing assessment of an infant with spina bifida includes all of the following, except:

- a. Head circumference.
- b. Checking reflexes.
- c. Palpating fontanel.
- d. Abdominal girth.

28- 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)

29- 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

30- The therapeutic management of children with B-thalassemia major consists primarily of which of the following ?

- a. Oxygen therapy.
- b. Supplemental iron.
- c. Adequate hydration.
- d. Frequent blood transfusions.

***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. Cerebral palsy is a progressive disorder of posture and movement resulting from a brain lesion.
- 4. Children with sickle cell anemia have increased hemoglobin S.
- 5. An accumulation of iron, termed hemosiderosis, can be treated with a chelating agent.
- 6. Blood pressure will remain normal in a child with dehydration until it eventually decreases as the dehydration becomes severe.
- 7. Normally a child with Hirschsprung's disease won't have any stool in the rectal vault.
- 8. The pediatric nurse must teach the parents of any child with an unrepaired cyanotic heart defect about the need for subacute bacterial endocarditis (SBE) prophylaxis therapy.
- 9. The best time for the pediatric nurse to assess the child's respiratory status is when the child is awake and active.
- 10. The pediatric nurse understands that two primary goals in caring for a child with cystic fibrosis are to control infection and improve aeration.
- 11. Infant's height is usually measured while the infant is in standing position.
- 12. Arthralgia is a major sign of rheumatic fever.
- 13. Infant's height is usually measured while the infant is in standing position.
- 14. The adolescent age groups are influenced more by Their peers.

*** Part III: Answer the following questions:** (6 marks each)

1- What is your nursing interventions to protect Skin integrity of neonates with spina bifida ?

2- What is your nursing interventions to improve myocardial efficiency for a hospitalized child with congestive heart failure ?

3- What is your nursing interventions to provide protection against bleeding for a patient with hemophilia ?

4- Family education following anoplasty for the treatment of imperforated anus?

End of Questions

Good Luck