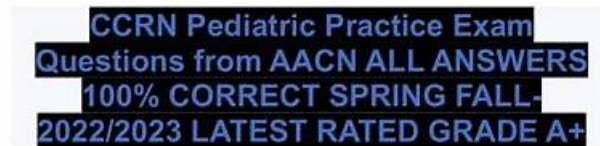


AACN New CCRN-Pediatric Braindumps Ebook - 100% Pass Quiz 2025 First-grade New CCRN-Pediatric Test Notes



To promote effective grieving in a 6-year-old sibling following the death of an infant, the nurse should:

- A) Recommend that the sibling not attend the infant's memorial service
- B) Encourage the parents to minimize their expression of grief with the sibling
- C) Explain to the sibling that the infant went to heaven
- D) Explain to the sibling that thoughts and wishes did not cause the infant's death - Answer: D) Explain to the sibling that thoughts and wishes did not cause the infant's death. At age 6, children may take words literally and because of their egocentrism, they believe that thoughts are all-powerful. They may truly believe they caused the death of their sibling. A simple, honest explanation of why the sibling died is indicated. This intervention is consistent with Caring Processes.

A) Recommend that the sibling not attend the infant's memorial service: This intervention is not a solution to the problem and will not promote effective grieving for the sibling. It is not consistent with Caring Processes.

B) Encourage the parents to minimize their expression of grief with the sibling: This intervention will lead to ineffective grieving for the sibling and is not consistent with Caring Processes

C) Explain to the sibling that the infant went to heaven: This intervention will not address the sibling's problem

A 5-year-old with a history of congenital hydrocephalus and VP shunt placement at four weeks of age is admitted with increased somnolence, decreased appetite, and increased complaints of headache. This morning the child vomited twice. The nurse should anticipate:

- A) The physician ordering lumbar puncture and blood and urine cultures
- B) the patient having a CT scan followed by possible shunt revision
- C) Administering mannitol or hypertonic saline
- D) Administering phenytoin (Dilantin) or fosphenytoin (Cerebyx) - Answer: B) The patient having a CT scan followed by possible shunt revision: This patient is demonstrating signs of increased intracranial pressure. The most likely etiology is malfunction of the VP shunt as a result of blockage or disconnection, which is particularly likely over time as the child grows. The definitive diagnosis is made by a CT scan and a shunt series. Surgical intervention for a shunt revision would be indicated.

A) The physician ordering lumbar puncture and blood and urine cultures: These interventions will not address the most likely primary problem, which is suspected VP

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AACN Critical Care Nursing Exam Sample Questions (Q149-Q154):

NEW QUESTION # 149

Which of the following is a prerenal cause of acute renal failure?

- A. Transfusion reaction
- B. Lead poisoning
- C. Septic shock
- D. Kidney stones

Answer: C

Explanation:

Prerenal failure is caused by conditions that impair renal perfusion without direct injury to the kidneys themselves. Septic shock leads to systemic vasodilation, hypotension, and decreased renal perfusion, making it a classic prerenal etiology.

"Prerenal causes of acute kidney injury (AKI) include any condition resulting in reduced renal blood flow.

Septic shock is a common prerenal cause, where hypoperfusion leads to decreased glomerular filtration." (Referenced from CCRN Pediatric - Direct Care: Renal Dysfunction and Fluid Balance)

NEW QUESTION # 150

A child with short bowel syndrome presents with fever, dehydration, and weight loss. To ensure nutrition, the nurse should anticipate:

- A. Total parenteral nutrition (TPN)
- B. Transpyloric tube for continuous feeds
- C. Encouraging oral feeds
- D. NG tube for bolus feeds

Answer: A

Explanation:

Short bowel syndrome often results in malabsorption, requiring total parenteral nutrition (TPN) for adequate caloric and nutrient intake—especially during periods of stress, weight loss, or infection when enteral tolerance is reduced.

"Children with significant bowel resection may require TPN to meet metabolic needs during acute illness or poor enteral tolerance." (Referenced from CCRN Pediatric - Direct Care: Gastrointestinal, Malabsorption and TPN Management)

NEW QUESTION # 151

A 3-month-old infant was brought back to the unit after a surgery for hypertrophic pyloric stenosis. The mother was very good in caring for the client but is reluctant with regard to feeding. Probably the mother is:

- A. uncertain if her baby can tolerate the thickened formula.
- B. in doubt about the safety of the special nipple.
- C. not aware that her baby is allowed to resume feedings.
- D. afraid that her baby will vomit again.

Answer: D

Explanation:

Explanation: Past experiences with projectile vomiting are frightening. It is the responsibility of the nurse to explain that it will not happen again. No special nipple is needed in this situation.

NEW QUESTION # 152

A 5-year-old child is receiving dextrose 5% in water and half-normal saline solution at 100 ml/hour.

Which sign or symptom suggests excessive I.V. fluid intake:

- A. Worsening Dyspnea
- B. Temperature of 102°F
- C. Gastric distension
- D. Nausea and vomiting

Answer: A

Explanation:

Explanation: Dyspnea and other signs of respiratory distress signify fluid volume excess (overload), which can occur quickly in a child as fluid shifts rapidly between the intracellular and extracellular compartments. Gastric distention may suggest excessive oral fluid intake or infection. Nausea and vomiting or an elevated temperature may indicate a fluid volume deficit.

NEW QUESTION # 153

Which of the following would be a diagnostic test for Phenylketonuria which uses fresh urine mixed with ferric chloride:

- A. Coomb's test
- B. Phenestix test
- C. Guthrie Test
- D. Beutler's test

Answer: B

Explanation:

Explanation: Phenestix test is a diagnostic test for Phenylketonuria which uses a fresh urine sample (diapers) and mixed with ferric chloride. If positive, there will be a presence of green spots at the diapers. Guthrie test is another test for PKU and is the one that mostly used. The specimen used is the blood and it tests if CHON is converted to amino acid.

NEW QUESTION # 154

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