

Three Easy-to-Use Prep4pass AACN CCRN-Pediatric Exam Practice Questions Formats

CCRN Pediatric Practice Exam Questions and Answers 2024 from AACN

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 shunt malfunction. Additionally, lumbar puncture is contraindicated in the presence of increased intracranial pressure, because downward herniation of the brainstem can occur.
- C) Administering mannitol or hypertonic saline: These medication are indicated for the medical management of increased intracranial pressure, of which this patient has

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Exam Requirements of AACN CCRN-Pediatric: Critical Care Nursing Exam

Candidates must have a current, unencumbered Registered Nurse credential to pass the CCRN test. The certificate should also be given in the United States without restrictions and without any kind of state nursing board limiting requirements.

- Both scientific practices criteria must be met by applicants.
- Option 1: the candidate should have 1,750 hours of technical time as an APRN or nurse practitioner in the past two years, which will provide patients who are straight as severely ill. In the most recent year preceding application, 875 of these hours should be earned.
- Option 2: The applicant must have at least five years of registration or APRN involvement, with at least 2,000 hours of practice providing patients as directly as really sick grownups. 144 of these hours must be earned during one of the latest years ahead of the submission.

All these exam requirements are clearly explained in the **AACN CCRN Pediatric exam dumps**.

AACN CCRN-Pediatric (Critical Care Nursing) Certification Exam is a rigorous assessment designed to evaluate the knowledge, skills, and abilities of nurses who provide critical care to pediatric patients. Critical Care Nursing Exam certification is recognized as a mark of excellence in the field of pediatric critical care nursing and is highly valued by employers, colleagues, and patients alike. Nurses who earn this certification are considered experts in their field and are equipped to provide the highest level of care to the most vulnerable patients.

AACN CCRN-Pediatric (Critical Care Nursing) Exam is a certification exam designed for registered nurses who specialize in caring for critically ill pediatric patients. CCRN-Pediatric exam is created and administered by the American Association of Critical-Care Nurses (AACN), the largest specialty nursing organization in the world. The purpose of the CCRN-Pediatric exam is to assess the nurse's knowledge and skills in providing care to pediatric patients who are critically ill or injured.

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AACN Critical Care Nursing Exam Sample Questions (Q46-Q51):

NEW QUESTION # 46

The nurse provides instructions regarding home care to the parents of a 3-year-old child hospitalized with hemophili a. Which statement, if made by the parent, indicates a need for further instructions?

- A. "We will supervise the child closely."
- B. "We will remove household items that can easily fall over."
- C. "We will pad corners of the furniture."
- **D. "We will avoid having the child receive immunizations and cancel the scheduled dental appointments."**

Answer: D

Explanation:

Explanation: The nurse needs to stress the importance of immunizations, dental hygiene, and routine well-child care. The parents are also instructed in the measures to implement in the event of blunt trauma, especially trauma involving the joints, and to apply prolonged pressure to superficial wounds until the bleeding has stopped.

NEW QUESTION # 47

When assessing the fluid and electrolyte balance in an infant, which of the following would be important to remember:

- A. The metabolic rate of an infant is slower than in adults
- B. Infants have more intracellular water than adult do
- **C. Infant has greater body surface area than adults**
- D. Infant can concentrate urine at an adult level

Answer: C

Explanation:

Explanation: Infants have greater body surface area than adult, increasing their risk to F&E imbalances.

Also infants can't concentrate a urine at an adult level and their metabolic rate, also called water turnover, is 2 to 3 times higher than adult. Plus more fluids of the infants are at the ECF spaces not in the ICF spaces.

NEW QUESTION # 48

A recently deceased patient's family begins arriving to the ICU, visibly distraught and wailing. What is the nurse's first action?

- A. Provide the family access to the patient
- B. Keep the family in the waiting room until they are calmer
- C. Ask about funeral arrangements
- D. Seek assistance from the chaplain

Answer: A

Explanation:

Immediate access to the deceased patient supports grief processing and family-centered care. Presence at the bedside allows the family to begin saying goodbye and may reduce psychological trauma associated with sudden loss.

"Grief support includes prompt access to the deceased loved one. Delaying this can intensify distress and negatively affect family outcomes." (Referenced from CCRN Pediatric - Direct Care: Psychosocial, End-of-Life and Bereavement Support)

NEW QUESTION # 49

Ventricular septal defect is a congenital heart condition that:

- A. Decreases systemic flow
- B. Increases systemic flow
- C. Decreases pulmonary flow
- D. Increases pulmonary flow

Answer: D

Explanation:

In a ventricular septal defect (VSD), blood shunts from the left to the right ventricle due to higher systemic pressure. This leads to increased pulmonary blood flow (left-to-right shunt), which can cause pulmonary overcirculation and heart failure if untreated.

"VSDs result in a left-to-right shunt that increases pulmonary circulation. This may cause pulmonary congestion, increased work of breathing, and failure to thrive in infants." (Referenced from CCRN Pediatric - Direct Care: Cardiovascular Congenital Defects)

NEW QUESTION # 50

An infant is admitted with tonic-clonic movement of the lower extremities. The most likely etiology of the seizure is:

- A. An arteriovenous malformation
- B. Lead poisoning
- C. A brain tumor
- D. A febrile illness

Answer: D

Explanation:

Febrile seizures are the most common cause of seizures in infants and young children, typically between 6 months and 5 years. They often occur with a rapid rise in body temperature, even in the absence of intracranial infection or metabolic disturbances.

"In infants, febrile seizures are the most likely cause of new-onset seizures. Tonic-clonic activity confined to extremities is typical. Evaluation focuses on identifying the febrile source." (Referenced from CCRN Pediatric - Direct Care: Neurological, Pediatric Seizure Disorders) Lead poisoning and structural brain anomalies are less common and usually not the first consideration in an acute setting with fever.

NEW QUESTION # 51

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