

# Test CCRN-Pediatric Questions Answers, New CCRN-Pediatric Test Vce Free

## 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 medications are indicated for the medical management of increased intracranial pressure, of which this patient has

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Keeping in view, the time constraints of professionals, our experts have devised CCRN-Pediatric dumps PDF that suits your timetable and meets your exam requirements adequately. It is immensely helpful in enhancing your professional skills and expanding your exposure within a few-day times. This AACN CCRN brain dumps exam testing tool introduces you not only with the actual exam paper formation but also allows you to master various significant segments of the CCRN-Pediatric syllabus.

To be eligible to take the CCRN-P certification exam, a nurse must possess a valid and current RN license, have at least 1,750 hours of direct bedside patient care in a pediatric critical care setting, and have completed at least 25 hours of pediatric-specific continuing education within the last two years. Nurses who meet these requirements are encouraged to take the exam and earn the right to use the CCRN-P certification credential.

The CCRN-P exam is a computer-based test that measures a nurse's knowledge of pediatric critical care nursing. It consists of 150 multiple-choice questions that cover a wide range of topics, including cardiovascular, respiratory, and neurological systems, pharmacology, and patient assessment. CCRN-Pediatric Exam is administered by the AACN Certification Corporation, and candidates have three hours to complete it.

AACN CCRN-Pediatric (Critical Care Nursing) Certification Exam is a rigorous certification exam designed for pediatric nurses who have a passion for critical care nursing. CCRN-Pediatric exam is offered by the American Association of Critical-Care Nurses (AACN), which is a professional organization dedicated to advancing the practice of critical care nursing. The AACN CCRN-Pediatric Certification Exam is designed to test a nurse's knowledge and skills in caring for critically ill pediatric patients.

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### AACN Critical Care Nursing Exam Sample Questions (Q111-Q116):

#### NEW QUESTION # 111

An infant is diagnosed with a proximal esophageal atresia with a distal fistula. A nurse should anticipate:

- A. Providing the infant with a pacifier for comfort
- B. Positioning with head of bed down
- C. A nasojejunal tube for continuous feeds
- D. A patent sump in the proximal esophageal pouch

**Answer: D**

Explanation:

In esophageal atresia with tracheoesophageal fistula, secretions can accumulate in the blind-ending proximal pouch, risking aspiration. A replogle tube with low continuous suction (sump) is placed to keep the pouch drained until surgical repair. "Management of esophageal atresia includes placement of a sump in the upper pouch to prevent aspiration and respiratory compromise. This is standard preoperative care." (Referenced from CCRN Pediatric - Direct Care: Gastrointestinal, Congenital Abnormalities)

#### NEW QUESTION # 112

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

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

**Answer: B**

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 # 113

A nurse is preparing to care for a child with a diagnosis of intussusception. The nurse reviews the child's record and expects to note which symptom of this disorder documented:

- A. bright red blood and mucus in the stools
- B. profuse projectile vomiting
- C. ribbon-like stools
- D. watery diarrhea

**Answer: A**

Explanation:

Explanation: The child with intussusception typically has severe abdominal pain that is crampy and intermittent, causing the child to draw in the knees to the chest. Vomiting may be present but is not projectile. Bright red blood and mucus are passed through the rectum and commonly are described as currant jelly-like stools. Watery diarrhea and ribbon-like stools are not manifestations of this

disorder.

#### **NEW QUESTION # 114**

After a cleft lip repair, it is important to preserve the integrity of suture line. What is the best position for an infant who had this type of surgery:

- A. on his abdomen
- B. mother's shoulder
- C. **on his back**
- D. side-lying

**Answer: C**

Explanation:

Explanation: This position prevents incisional contact with the mattress. This is also the best position for infants who are not able to turn.

#### **NEW QUESTION # 115**

In a pediatric client suspected of having coarctation of the aorta, the nurse would expect to find:

- A. **bounding pulses in the arms**
- B. diminishing carotid pulses
- C. strong pedal pulses
- D. normal femoral pulses

**Answer: A**

Explanation:

Explanation: The nurse would expect bounding pulses in the arms. Coarctation of the aorta, a narrowing or constriction of the descending aorta, causes increased flow to the upper extremities (increased pressure and pulses).

#### **NEW QUESTION # 116**

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