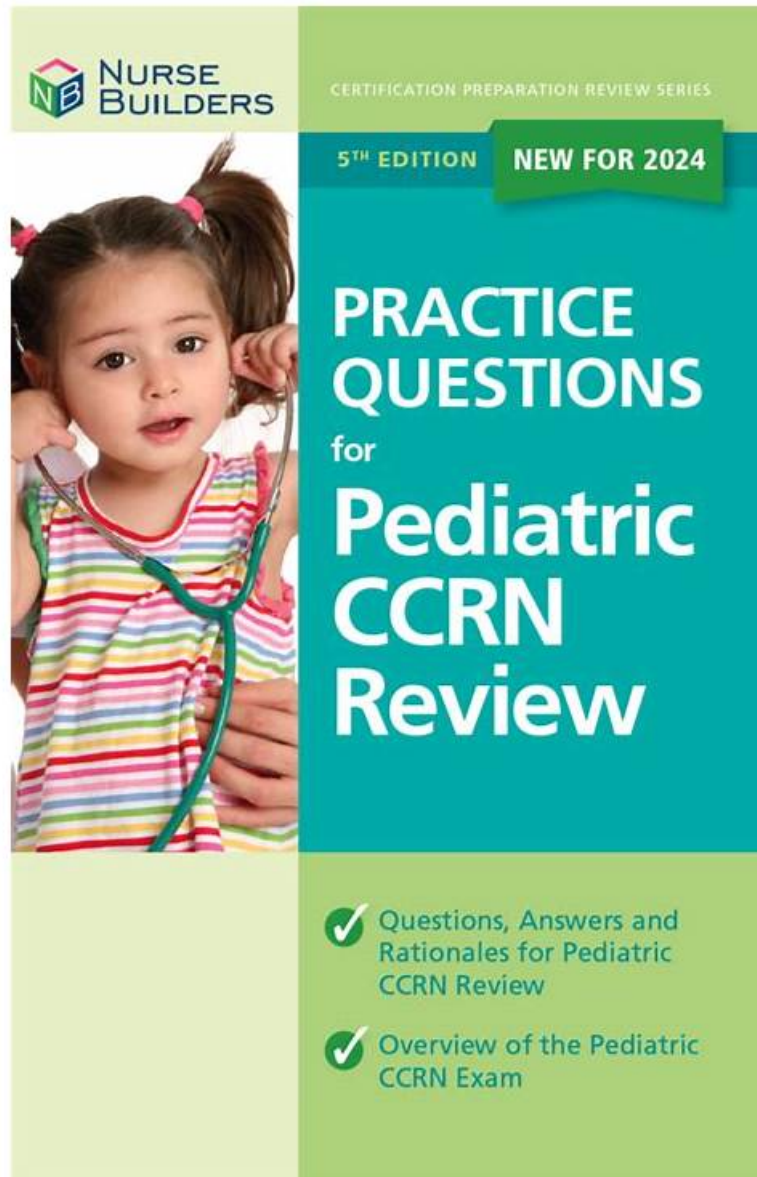


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AACN Critical Care Nursing Exam Sample Questions (Q49-Q54):

NEW QUESTION # 49

A client with tetralogy fallot will become cyanotic and dyspneic after crying. To relieve this clinical manifestation, the nurse should place the infant in what position?

- A. Sitting position
- B. Lateral Sim's position
- C. Modified trendelenburg position
- **D. Knee chest position**

Answer: D

Explanation:

Explanation: Knee chest position is done by flexing the hips and knees. This way, there will be a decrease venous return to the heart from the legs; as a result, cardiac workload is decreased. Assuming a sitting position does reduce pressure of the abdominal organs on the diaphragm but does not put enough pressure on the femoral vein and vena cava to sufficiently reduce venous return to the heart.

NEW QUESTION # 50

A transgender adolescent requests to be addressed by preferred name/pronouns, different from medical record. What is the best response?

- **A. Document the patient's preferred name and pronouns, and use them in all interactions**
- B. Use the medical record name/pronouns for consistency
- C. Avoid pronouns to prevent misunderstanding
- D. Inform the patient only legal names can be used in hospitals

Answer: A

Explanation:

Using a transgender patient's preferred name and pronouns promotes respect, inclusion, and psychological safety. It's a key component of culturally competent, family-centered care, and should be documented for consistency among all caregivers.

"Addressing patients by their chosen name and pronouns supports emotional well-being and is a standard of equitable, patient-centered care." (Referenced from CCRN Pediatric - Professional Caring and Ethical Practice: Cultural Competency and Respectful Communication)

NEW QUESTION # 51

Parent teaching for a child with encephalopathy should include which of the following?

- A. The condition is caused by a contagious agent
- **B. Often, no causative agent is found**
- C. Antibiotics are effective
- D. Neurologic damage will be minimal

Answer: B

Explanation:

Encephalopathy refers to global brain dysfunction caused by various factors such as metabolic imbalances, toxins, hypoxia, or infections. In many cases, no definitive causative agent is identified, and treatment focuses on supportive care and managing underlying triggers.

"Pediatric encephalopathy is often multifactorial, and in many cases no specific causative agent is isolated.

Families should be counseled accordingly."

(Referenced from CCRN Pediatric - Direct Care: Neurological, Encephalopathy and Parental Education)

NEW QUESTION # 52

A 9 year old child who has a sickle cell anemia is admitted to the pediatric unit with a pain episode.

When assigning a roommate it is not appropriate for a nurse to place a child who has:

- A. chronic osteomyelitis
- B. sever asthma
- C. acute myelogenous leukemia
- D. Thalassemia

Answer: A

Explanation:

Explanation: A child with sickle cell anemia is prone to infection so it is not advisable to assign a roommate who has an infection of the bones.

NEW QUESTION # 53

Which of the following nursing diagnosis would the nurse identify as the priority for a 4-month-old infant with heart failure and congenital heart disease:

- A. ineffective health maintenance
- B. impaired mobility
- C. risk for infection
- D. activity intolerance

Answer: D

Explanation:

Explanation: An infant with congenital heart disease and congestive heart failure tires very easily, leading to a priority nursing diagnosis of Activity Intolerance. Nursing care needs to focus on allowing the infant to have frequent rest periods. Infants with congenital heart disease and congestive heart failure are not necessarily at risk for more infections than other infants. Impaired Mobility usually is not a problem because an infant with congenital heart disease usually exhibits normal physical mobility. Ineffective Health Maintenance usually is not a problem because these infants still need regular and routine health check-ups

NEW QUESTION # 54

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