

CCRN-Pediatric Exam Braindumps & CCRN-Pediatric Exam Simulation & CCRN-Pediatric Reliable Questions and Answers



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In the era of rapid changes in the knowledge economy, do you worry that you will be left behind? Let's start by passing the CCRN-Pediatric exam. Getting a CCRN-Pediatric certificate is something that many people dream about and it will also bring you extra knowledge and economic benefits. As we all know, if you want to pass the CCRN-Pediatric Exam, you need to have the right method of study, plenty of preparation time, and targeted test materials. However, most people do not have one or all of these. That is why I want to introduce our AACN original questions to you.

Obtaining the CCRN-Pediatric Certification can be a significant career achievement for nurses who specialize in pediatric critical care. Certification demonstrates a commitment to professional development and can increase job opportunities and earning potential. It can also enhance a nurse's credibility and recognition among peers, patients, and employers. Additionally, certification can improve patient outcomes by ensuring that nurses possess the specialized knowledge and skills needed to provide safe and effective care to critically ill pediatric patients.

>> Exam CCRN-Pediatric Preview <<

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BootcampPDF's products to prepare your AACN certification CCRN-Pediatric exam.

AACN CCRN-Pediatric Exam is a computer-based test that is administered at Pearson VUE testing centers throughout the United States. Nurses who wish to take the exam must meet certain eligibility requirements, including holding a current and unrestricted RN license, completing a minimum of 1,750 hours of direct pediatric critical care within the past two years, and completing 25 hours of continuing education in pediatric critical care nursing within the past two years. These requirements ensure that nurses who take the exam have significant experience and knowledge in pediatric critical care nursing.

AACN Critical Care Nursing Exam Sample Questions (Q66-Q71):

NEW QUESTION # 66

At the community center, the nurse leads an adolescent health information group, which often expands into other areas of discussion. She knows that these youths are trying to find out "who they are," and discussion often focuses on which directions they want to take in school and life, as well as in the peer relationships. According to Erikson, this stage is known as:

- A. relationship testing
- **B. identity vs. role confusion.**
- C. autonomy
- D. adolescent rebellion.

Answer: B

Explanation:

Explanation: During this period, which lasts up to the age of 18-21 years, the individual develops a sense of "self." Peers have a major big influence over behavior, and the major decision is to determine a vocational goal.

NEW QUESTION # 67

Hillary is a 6 year old who has meningitis. The nurse at the unit noticed that she assumes an opisthotonic position. The nurse should place her in :

- A. semi-fowler's position
- **B. side-lying position**
- C. high fowler's position
- D. knee-chest position

Answer: B

Explanation:

Explanation: In meningitis, side-lying position is for maximum safety and comfort because the child with meningitis has hyperextended neck and back.

NEW QUESTION # 68

Stuttering among pre-schoolers is:

- A. a symptomatic delay in neural development
- B. a possible result of an emotional problem.
- C. an indication of a speech problem.
- **D. a common characteristic.**

Answer: D

Explanation:

Explanation: Stuttering among pre-schoolers is a common characteristic. It is normal and common for preschoolers to stutter and it is not to be considered as a problem. This happens as the child's advancing mental ability and level of comprehension exceed the vocabulary acquisitions.

NEW QUESTION # 69

Which of the following interventions would be included in the plan of care for a child with juvenile rheumatoid arthritis to reduce joint

pain in the morning just after arising?

- A. Increasing pain medication at bedtime
- **B. Having the child sleep in a sleeping bag**
- C. Awakening the child once nightly to exercise the joints
- D. Having the child sleep with the joints flexed

Answer: B

Explanation:

Explanation: Sleeping in a sleeping bag keeps the joints warm, therefore more flexible. Thus, joint pain in the morning would be lessened. Increasing bedtime pain medications may help the child sleep but will not decrease early morning stiffness. The child's joints should be kept in an extended position during sleep to maintain function. Lack of sleep such as from awakening the child at night for exercises is a stressor that can lead to exacerbation of juvenile rheumatoid arthritis.

NEW QUESTION # 70

The positive inotropic effects of dobutamine (Dobutrex) at 7 mcg/kg/min will produce an increase in which of the following hemodynamic parameters?

- **A. Stroke volume and cardiac output**
- B. Preload and BP
- C. Cardiac output and peripheral vascular resistance
- D. Stroke volume and systemic vascular resistance

Answer: A

Explanation:

Dobutamine is a beta-1 agonist that increases myocardial contractility. Its primary action is increasing stroke volume and cardiac output, with minimal effect on systemic vascular resistance, making it ideal for patients with low-output states.

"Dobutamine enhances myocardial contractility and increases cardiac output without significantly increasing systemic vascular resistance, making it effective in heart failure with preserved perfusion." (Referenced from CCRN Pediatric - Direct Care: Cardiovascular Pharmacology and Hemodynamic Support)

NEW QUESTION # 71

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