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The CCRN-Pediatric exam is a computer-based test that assesses a nurse's knowledge and skills in the care of critically ill children, including infants, toddlers, and adolescents. CCRN-Pediatric exam consists of 150 multiple-choice questions and covers a range of topics related to pediatric critical care, such as cardiovascular, respiratory, neurological, and gastrointestinal systems, as well as trauma, pharmacology, and ethical considerations. Nurses who pass the exam earn the CCRN-Pediatric Certification, which is valid for three years and can be renewed through continued education and professional development.

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AACN CCRN-Pediatric (Critical Care Nursing) Certification Exam is a comprehensive exam designed to assess the knowledge and skills of registered nurses who provide direct care to acutely and critically ill pediatric patients. Critical Care Nursing Exam certification is recognized as a benchmark for excellence in pediatric critical care nursing, and obtaining it demonstrates a high level of commitment to patient care and professional development.

AACN Critical Care Nursing Exam Sample Questions (Q77-Q82):

NEW QUESTION # 77

Following a traumatic brain injury, an intubated 2-year-old patient requires an infusion of cisatracurium (Nimbex) to assist with intracranial pressure. On day 3, the ventilator's mean airway pressure begins to alarm frequently and suctioning needs have increased. The patient's vital signs are:

- * BP: 99/58
- * HR: 148
- * RR: 20
- * T: 102.2°F (39°C)
- * ICP: 19
- * CPP: 53
- * WBC: 22,000
- * Na#: 153 mEq/L

A nurse should anticipate the patient will require:

- A. Albuterol (Proventil) treatment
- B. A sputum culture
- C. A head CT
- D. Mannitol (Osmotrol) 2 g/kg

Answer: B

Explanation:

The elevated WBC count, fever, rising airway pressures, and increased secretions are consistent with a developing ventilator-associated pneumonia (VAP). Asputum culture is needed to identify the infectious agent and guide antibiotic therapy.

"Signs of VAP include increased airway secretions, elevated temperature, and rising ventilator pressures.

Diagnostic workup includes obtaining sputum culture to guide treatment." (Referenced from CCRN Pediatric - Direct Care: Pulmonary, Ventilator Complications and Infection)

NEW QUESTION # 78

A pediatric client is evaluated for a surgery in order to correct Strabismus. During history taking, the nurse learns that the parents had their child examined when they first noticed:

- A. excessive tears
- B. unusual blinking
- C. bloodshot eyes
- D. frequent squinting

Answer: D

Explanation:

Explanation: The classic sign of Strabismus is squinting. It occurs because of the misalignment of the eyes.

NEW QUESTION # 79

A nurse enters the room of Jamal, a 3 year-old child, who is having a generalized seizure. Which intervention should the nurse do first?

- A. Clear the area of any hazards
- B. Restrain Jamal
- C. Give the ordered anticonvulsant
- D. Place him on side-lying position

Answer: B

Explanation:

Explanation: Protecting the airway is the top priority in a seizure. If a child is actively convulsing, a patent airway and oxygenation must be assured. Children usually have both cardiac and respiratory arrest.

NEW QUESTION # 80

A school age girl with rubella should be isolated from an unimmunized:

- A. 14 year old brother who had rubella as a child.
- B. 21 year old brother living at home.
- **C. 18 year old sister who has recently married.**
- D. 4 year old child who lives next door.

Answer: C

Explanation:

Explanation: An unimmunized woman like 18 year old sister who has recently got married and is exposed to rubella virus is at a higher risk. If she contracts the disease it may be transmitted to her fetus once she got pregnant. Option b has a lesser effect as it would probably be mild and confer immunity.

NEW QUESTION # 81

A mother brought her child to the clinic with nose bleeding. The nurse showed the mother the most appropriate position for the child which is:

- A. Lying semi flat
- **B. Sitting up**
- C. moderate back rest
- D. low back rest

Answer: B

Explanation:

Explanation: This position will minimize the amount of blood pressure in nasal vessels and keep blood moving forward not back into the nasopharynx, which will have the choking sensation and increase risk of aspiration. Other options are inappropriate because they can cause blood to enter the nasopharynx.

NEW QUESTION # 82

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