

# CCRN-Pediatric Reliable Dumps Ppt | Latest CCRN-Pediatric Mock Exam



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Hence, memorizing them will help you get prepared for the AACN CCRN-Pediatric examination in a short time. The product of ActualtestPDF comes in PDF, desktop practice exam software, and Critical Care Nursing Exam (CCRN-Pediatric) web-based practice test. To give you a complete understanding of these formats, we have discussed their features below.

AACN CCRN-Pediatric Certification Exam is intended for nurses who have already gained significant experience working in pediatric critical care. CCRN-Pediatric exam is designed to recognize and validate their expertise and dedication to the field. Certification is voluntary, but it is highly recommended for nurses who wish to advance their careers and demonstrate their commitment to providing the highest level of care to their patients.

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## Latest CCRN-Pediatric Mock Exam - CCRN-Pediatric Valid Exam Simulator

ActualtestPDF made an CCRN-Pediatric Questions for the students so that they don't get confused to prepare for Critical Care Nursing Exam (CCRN-Pediatric) certification exam successfully in a short time. ActualtestPDF has designed the real CCRN-Pediatric exam dumps after consulting many professionals and receiving positive feedback. The Critical Care Nursing Exam (CCRN-Pediatric) questions have many premium features, so you don't face any hurdles while preparing for Critical Care Nursing Exam (CCRN-Pediatric) exam and pass it with good grades.

## AACN Critical Care Nursing Exam Sample Questions (Q38-Q43):

### NEW QUESTION # 38

A child has fever, chills, back pain, elevated WBC and ESR, and abnormal urinalysis. After IV fluids and antibiotics, what procedure should be anticipated?

- A. Upper GI
- B. Chest x-ray
- C. KUB
- D. Renal ultrasound

**Answer: D**

Explanation:

These findings are consistent with pyelonephritis or another upper urinary tract infection. Renal ultrasound is a non-invasive test used to evaluate for structural abnormalities, abscess, or obstruction, especially in a febrile child with a urinary tract infection.

"Renal ultrasound is indicated after diagnosis of febrile UTI to evaluate renal anatomy and rule out complications like abscess."

(Referenced from CCRN Pediatric - Direct Care: Renal, Urinary Tract Infections and Imaging)

**NEW QUESTION # 39**

An infant was scheduled to receive the first series of immunizations. Before giving them, the nurse should discuss the possible reactions that may occur because those reactions are:

- A. serious and require hospitalization
- B. usually responsible for permanent neurological disturbances
- C. quite common and may be local or systemic.
- D. sometimes causes ulceration at injection site

**Answer: C**

Explanation:

Explanation: The reactions are quite common and may be local or systemic. Mild reactions are redness, and induration at the injection site, slight fever, and irritability.

**NEW QUESTION # 40**

A 4 year-old child is treated in the emergency room after ingesting an ounce of a liquid narcotic. What should the nurse do first?

- A. Assess the mouth and pulse
- B. Suction the mouth and the nose for any secretions
- C. Administer the IV fluids as ordered
- D. Provide the ordered humidified oxygen via nasal cannula

**Answer: A**

Explanation:

Explanation: The initial step in treatment of a toxic exposure or ingestion is to assess the airway, breathing and circulation; then stabilize the client. The other nursing interventions will follow.

**NEW QUESTION # 41**

Which of the following would be a diagnostic test for Phenylketonuria which uses fresh urine mixed with ferric chloride:

- A. Beutler's test
- B. Coomb's test
- C. Phenestix test
- D. Guthrie Test

**Answer: C**

Explanation:

Explanation: Phenestix test is a diagnostic test for Phenylketonuria which uses a fresh urine sample (diapers) and mixed with ferric chloride. If positive, there will be a presence of green spots at the diapers. Guthrie test is another test for PKU and is the one that is mostly used. The specimen used is the blood and it tests if CHON is converted to amino acid.

## NEW QUESTION # 42

When preparing a 2-month-old with hypoplastic left heart syndrome for a cardiac transplant, which of the following findings is most alarming?

- A. BP of 72/48
- B. Temperature of 102.2° F (39° C)
- C. O<sub>2</sub> saturation of 75%
- D. Increased RV pressure

### Answer: B

Explanation:

While patients with hypoplastic left heart syndrome (HLHS) typically have lower baseline oxygen saturations due to mixing of systemic and pulmonary blood flow, fever in this population is especially concerning due to their immunocompromised and pre-transplant status. Fever may signal infection or sepsis, both of which can jeopardize transplant eligibility and lead to rapid decompensation.

"In patients awaiting heart transplantation, fever is a red flag for infection or systemic inflammatory response, both of which significantly increase mortality risk and complicate transplant candidacy. Prompt evaluation is required." (Referenced from CCRN Pediatric - Direct Care: Cardiovascular, Pre-Transplant Management)

## NEW QUESTION # 43

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