

Valid Test AACN CCRN-Pediatric Format - Dumps CCRN-Pediatric Questions

CCRN Pediatric Practice Exam Questions 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 - Ans 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) - Ans 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 medication are indicated for the medical management of increased intracranial pressure, of which this patient has

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AACN Critical Care Nursing Exam Sample Questions (Q95-Q100):

NEW QUESTION # 95

Tammy, a 4-year-old child, has cystic fibrosis. Her mother is concerned and said that her child can no longer join the American Idol because of repeated infection. The nurse is aware that repeated infection could lead to:

- A. poor academic and extra-curricular activities
- B. **type 1 diabetes development**
- C. increased irritability and perspiration
- D. bone marrow depression

Answer: B

Explanation:

Explanation: The nurse is aware that repeated infection could lead to Type 1 Diabetes development. Repeated infection in a child with cystic fibrosis, over time, influences the development of insulin resistance.

NEW QUESTION # 96

A 6 year old child with sickle cell anemia is admitted to the pediatric unit with a pain episode. Splenomegaly was identified. The nurse is aware that Splenomegaly is usually:

- A. common during infancy
- B. difficult to palpate in pediatric client
- C. most seen during late childhood
- D. **initiated by a vaso-occlusive crisis**

Answer: D

Explanation:

Explanation: Vaso-occlusive crisis often precipitates a pooling of blood in the liver and in the spleen that results to spleen enlargement.

NEW QUESTION # 97

A 12-year-old presents with behavior changes and new-onset tonic-clonic seizures. Likely brain tumor location?

- A. Cerebellar
- B. **Frontal lobe**
- C. Brainstem
- D. Occipital lobe

Answer: B

Explanation:

The frontal lobe is responsible for executive function, behavior, and personality. Tumors in this area often cause behavioral changes, mood instability, and seizures—particularly generalized seizures like tonic-clonic.

"Frontal lobe tumors are commonly associated with personality and behavioral changes and are a common site for seizure onset in pediatric brain tumors." (Referenced from CCRN Pediatric - Direct Care: Neurological, Brain Tumors and Seizure Presentation)

NEW QUESTION # 98

A 9-year-old patient with a history of tachycardia and syncope is connected to a monitor that shows a HR of 190, with regular P-P and R-R intervals. The patient is awake, crying, anxious, and has a BP of 94/60. Which of the following is the initial nursing intervention?

- A. Prepare for sedation and cardioversion

- B. Have the child pretend to play a horn while blowing through a straw
- C. Instruct the parent to "put this ice bag on the child's head."
- D. Have the parent hold the child while securing IV access

Answer: B

Explanation:

The patient is stable with supraventricular tachycardia (SVT). Initial treatment in stable pediatric SVT involves vagal maneuvers to increase vagal tone and potentially terminate the arrhythmia. Having the child blow through a straw or simulate blowing a horn is a safe and effective method in a cooperative child.

"In stable pediatric patients with SVT, vagal maneuvers are the first-line intervention. Activities such as forced exhalation (blowing through a straw) may revert the rhythm." (Referenced from CCRN Pediatric - Direct Care: Cardiovascular, Pediatric Tachyarrhythmias Management)

NEW QUESTION # 99

For acute otitis media, the treatment is prompt antibiotic therapy. Delayed treatment may result in complications of

- A. Eardrum Problems
- B. Diabetes mellitus
- C. Tonsillitis
- D. Brain damage

Answer: D

Explanation:

Explanation: One of the complications of recurring acute otitis media is risk for having Meningitis, thereby causing possible brain damage. That is why patient must follow a complete treatment regimen and follow up care.

NEW QUESTION # 100

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