TEST BANK

BURNS' Pediatric Primary Care

Dawn Lee Garzon Maaks Nancy Barber Starr Margaret A. Brady Nan M. Gaylord Martha Driessnack Karen G. Duderstadt

7th EDITION



ELSEVIER





Burns Pediatric Primary Care 7th Edition Maaks Starr Brady Test Bank

Table of Contents

Unit I: Influences on Child Health and Child Health Assessment

- 1. Health Status of Children: Global and National Perspectives
- 2. Unique Issues in Pediatrics
- 3. Genetics and Child Health
- 4. Environmental Issues
- 5. Child and Family Health Assessment
- 6. Cultural Considerations for Pediatric Primary Care
- 7. Children with Special Health Care Needs

Unit II: Child Development

- 8. Developmental Management in Pediatric Primary Care
- 9. Developmental Management of Newborns
- 10. Developmental Management of Infants
- 11. Developmental Management of Early Childhood
- 12. Developmental Management of Middle Childhood
- 13. Developmental Management of Adolescents/Young Adults

Unit III: Child Health Supervision: Health Promotion and Health Protection

14. Introduction to Health Promotion and Health Protection for Children and Families

Section A. Behavioral-Mental Health Wellness

- 15. Behavioral and Mental Health Promotion
 Section B. Biophysical Health Management
 16. Breastfeeding
 17. Nutrition
 18. Elimination
 19. Physical Activity and Sports
 20. Sleep
 21. Sexuality
 Section C. Health Protection–Focused Care
 22. Immunizations
 23. Dental Health and Oral Disorders
- 24. Intentional and Unintentional Injuries: Injury Prevention and Child Maltreatment

Unit IV: Common Childhood Conditions and Disorders

- Section A. Introduction to Child Disease Management
- 25. Acute/Chronic Disease Management and Principles of Diagnostic Testing
- 26. Prescribing Medications in Pediatrics
- 27. Complementary and Integrative Health in Pediatrics
- 28. Pediatric Pain and Fever Management
- Section B. Disease Management
- 29. Perinatal Disorders
- 30. Mental Health Disorders
- 31. Infectious Diseases

- 32. Common Genetic Disorders
- 33. Atopic, Rheumatic, and Immunodeficiency Disorders
- 34. Dermatologic Disorders
- 35. Eye and Vision Disorders
- 36. Ear and Hearing Disorders
- 37. Respiratory Disorders
- 38. Cardiovascular Disorders
- 39. Hematologic Disorders
- 40. Gastrointestinal Disorders
- 41. Genitourinary Disorders
- 42. Gynecologic Disorders
- 43. Musculoskeletal Disorders
- 44. Injuries and Toxic Exposures
- 45. Endocrine and Metabolic Disorders
- 46. Neurologic Disorders

Burns' Pediatric Primary Care 7th Edition Test Bank

Chapter 1: Health Status of Children: Global and National Perspectives

1. Which region globally has the highest infant mortality rate?

A. Indonesia

B. Southern Asia

C. SubSaharan Africa Correct

D. Syria

2. The primary care pediatric nurse practitioner understands that, to achieve the

greatest worldwide

reduction in child mortality from pneumonia and diarrhea, which intervention is

most effective?

A. Antibiotics

B. Optimal nutrition

C. Vaccinations Correct

D. Water purification

3. Which is true about the health status of children in the United States?

13348413856

A. Globalism has relatively little impact on child health measures in the U.S. **B. Obesity rates among 2to5yearolds have shown a recent** significant decrease. Correct

C. The rate of household poverty is lower than in other economically developed nations.

D. Young children who attend preschool or day care have higher food insecurity.

4. The primary care pediatric nurse practitioner understands that a major child

health outcome associated with worldwide climate change is

A. cost of living.

B. education.

C. nutrition. Correct

D. pollution.

5. When providing well child care for an infant in the first year of life, the primary

care pediatric nurse practitioner is adhering to the most recent American Academy of

Pediatrics*Recommendations for Preventive Pediatric Health Care* guidelines by

A. focusing less on development and more on illness prevention and nutrition.

B. following guidelines established by the *Bright Futures* publication.

C. scheduling wellbaby visits to coincide with key developmental milestones. Correct

D. seeing the infant at ages 2, 4, 6, and 12 months when immunizations are due.

Chapter 2. Unique Issues in Pediatrics

1. A nurse is explaining the therapeutic milieu to a new nurse. The best explanation of this term would be:

1. The place where the child is receiving care.

2. Group therapy.

3. Personal interactions between patients and staff.

4. All of the above are correct.

ANS: 4

2. A 16-year-old male has received a pink-slip from the police for inpatient psychiatric treatment. The teen

has been expressing thoughts of hanging himself because Life sucks. The nursing staff should consider

placing the child:

1. With peers.

2. In an area where he can be watched one-on-one.

3. With a roommate that is expressing the same concerns.

4. In an area close to an external door.

ANS: 2

3. Learning disabilities in children have scientifically been linked to:

- 1. Poor nutrition.
- 2. The environment in which the child lives.
- 3. Genetics.

4. Watching more than four hours of television a day.

ANS: 3

4. A mental health nurse has assessed a child and determined that the child exhibits behavioral challenges.

When the school nurse explains this to a teacher, the best description would be:

1. The child may exhibit physical outbursts.

- 2. The child may exhibit violence toward others.
- 3. The child may be defiant or have tantrums.
- 4. The child will need special interventions for learning.

ANS: 3

5. A child that has not exhibited enuresis in four years has exhibited this behavior pattern for the last week.

The reason a child may revert back to this behavior pattern is because of: 1. Hallucinations.

- 2. Behavioral challenges.
- 3. Delusions.

4. Stress.

ANS: 4

6. An 18-year-old male has called the crisis line for help. The crisis nurse recognizes the intervention needs

may consist of all of the following except:

1. Discussing the individuals everyday activities.

- 2. Recognizing that the patient may be in a catharsis state.
- 3. Expressing empathy toward the caller.
- 4. Avoiding entropy.

ANS: 1

7. An 8-year-old boy with a history of hallucinations and violent behavior has been place in a seclusion room

at the hospital because he has been hurting others. The nurse checks on the patient and realizes she must take

him out of the seclusion room when:

1. He is crying to be released.

2. He states, I will be a good boy now.

- 3. He starts headbutting the window.
- 4. He complains that his parents will file a lawsuit.

ANS: 3

8. A child has been exhibiting the MacDonald Triad. These behaviors include: 1. Enuresis, pushing others, and pyromania.

2. Swinging a cat by the tail, bed-wetting, and lighting paper on fire in the trash can.

3. Playing with other children, laughing, and conversing with adults.

4. Playing with a campfire, watching television, and seeking adult attention. ANS: 2

9. A teenager diagnosed with borderline personality disorder should have discharge planning instructions of:

- 1. A consistent caregiver.
- 2. Monitoring of media, such as the Internet, television, and video games.
- 3. Obtaining support from family and friends.

4. Seeking medical attention when the teenager feels good. ANS: 3

10. A mental health nurse is teaching the mother of a child with executive functioning issues ways to help

her child. Interventions the mother should use include:

1. Placing visual aids on the bathroom mirror so that the child will follow the morning routine.

2. Give the child a choice in foods to eat.

- 3. Allowing the child to ask for help when needed.
- 4. Reminding the child to be nice to others.

ANS: 1

11. Ellie, a 9-year-old girl, was adopted by a family at the age of 4 after several years of severe neglect by her birth family. The adoptive family has been reporting that Ellie is angry a lot, manipulative with her

teachers, and does not seek positive attention. The nurse working with Ellie will need to:

1. Provide education on decreasing stimuli in the home environment that triggers the anger.

2. Realize Ellie may have attachment issues related to her previous history and will need to encourage the

family to be active in her care.

3. Support the family in the decision-making process of continuing to let Ellie live in the home.

4. Discuss inpatient therapy to decrease Ellies manipulative behavior patterns.

ANS: 2

12. An infant displays depression by:

1. Smiling at strangers.

2. Bonding to someone other than the immediate family.

3. Crying more than an average infant.

4. Looks away when an adult attempts to play with the infant. ANS: 4