



المادة: Critical Pediatric Nursing	العام الجامعي: ٢٠١٩- ٢٠١٩ م
الفرقة: الثالثة (لايحة ساعات معتمدة قديمة وحديثة)	القصل الدراسي: الاول
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أستاذ المادة: المدارحاب هانىء القزاز ، داجيهان فراج	الزمن: ٢ ساعات

Choose the correct answer: Only one choice: write the *letter* of answer only (20 mark)

- 1- A new born presenting with extreme prematurity, critical illness, and needing surgical intervention should be treated at what NICU level?
 - A. Level I
 - B. Level II
 - C. Level III
 - D. Level IIII
- 2- While assessing a child with Coarctation of aorta, the nurse would expect to find which of the following
 - A. Absent or diminished femoral pulse
 - B. Cyanosis at birth.
 - C. Squatting posture.
 - D. Cyanotic episodes
- 3- The most important independent predictor of survival in extreme prematurity is which one of the following?
 - A. Birth weight.
 - B. Sex.
 - C. Gestation at birth.
 - D. Birth length
- 4- A neonate is in the neonatal intensive care nursery with a diagnosis of large-for gestational age. The baby was born at 38 weeks' gestation and weighed 3000 grams.
 - A. The diagnosis is inaccurate because the baby's weight is too high for of a diagnosis appropriate-forgestational age.
 - B. The diagnosis is inaccurate because the baby's weight needs to be higher than 3500 grams.
 - C. The diagnosis is inaccurate because the baby's weight needs to be lower than 3500 grams.
 - D. The diagnosis is inaccurate because full-term babies are never large-for gestational age.
- 5- The appropriate intervention with RDS metabolic acidosis
 - A. Sodium bicarbonate
 - B. Ventilation support
 - C. Saline solution instilled with suction
 - D. Suctioning turn over infant and hit back
- 6- Nonobstructive a cyanotic congenital heart disease include all the following except:
 - A. Patent ductus arteriosus
 - B. Atrial septal defect
 - C. Coarctation of the aorta
 - D. Ventricular septal defect
- 7- Which is not a cause of neonatal jaundice in the first 24 hours?





- A. rhesus incompatability
- B. ABO incompatability
- C. Sepsis
- D. Physiological jaundice
- 8- Which of the following would be helpful in the immediate diagnostic evaluation of neonatal seizure?
 - A. Electroencephalogram
 - B. serum glucose level
 - C. cerebral spinal fluid gram stain
 - D. serum calcium level
- 9- A client with group AB blood whose husband has group O has just given birth. The major sign of ABO blood incompatibility in the neonate is which complication or test result?
 - A. Negative Coombs test
 - B. Bleeding from the nose and ear
 - C. Jaundice after the first 24 hours of life
 - D. Jaundice within the first 24 hours of life
- 10- A nurse in the newborn nursery is monitoring a preterm newborn infant for respiratory distress syndrome. Which assessment signs if noted in the newborn infant would alert the nurse to the possibility of this syndrome?
 - A. Hypotension and Bradycardia
 - B. Tachypnea and retractions
 - C. Acrocyanosis and grunting
 - D. The presence of a barrel chest with grunting
- 11- Aortic stenosis is:
 - A. Acynotic non obstructive congenital heart disease
 - B. Acynotic obstructive congenital heart disease
 - C. Cyanotic congenital heart disease
 - D. None of all the above
- 12- Chewing movements are an example of what kind of seizures?
 - A. Tonic-clonic
 - B. Myoclonic
 - C. Clonic
 - D. Subtle
- 13- The most common neonatal sepsis infections seen within 24 hours after birth are caused by which organism?
 - A. Chlamydia trachomatis
 - B. Candida albicans
 - C. Escherichia coli
 - D. Group B beta-hemolytic streptococci
- 14- A nurse on the newborn nursery floor is caring for a neonate. On assessment the infant is exhibiting signs of cyanosis, tachypnea, nasal flaring, and grunting. Respiratory distress syndrome is diagnosed, and the physician prescribes surfactant replacement therapy. The nurse would prepare to administer this therapy by:
 - A. Subcutaneous injection
 - B. Intravenous injection





- C. Instillation of the preparation into the lungs through an endotracheal tube
- D. Intramuscular injection
- 15- Which of the following conditions is associated with neonatal seizures?
 - A. Meningitis
 - B. Hyperglycemia,
 - C. Hypercalcemia,
 - D. Hypermagnesemia
- 16- 1-month-old term infant has persistent jaundice. His stools were green 2weeks ago and now are pale in color. Physical examination findings are unremarkable, except for a liver that is palpable 2 cm below the costal margin. The infant's total bilirubin is 6.1 mg/dL and direct bilirubin is 4.2 mg/dL. The most likely causes is:
 - A. Biliary atresia
 - B. Hypothyroidism
 - C. Congenital infection
 - D. Wilson disease
- 17- Severe respiratory distress syndrome associated with
 - A. Tachypnea (up to 80 to 120 b\m)
 - B. Dyspnea
 - C. Diminished cardiac out put
 - D. Restlessness
- 18- A baby was just born to a mother who had positive vaginal cultures for group B streptococcus. The mother was admitted to the labor room 2 hours before the birth. For which of the following should the nursery nurse closely observe this baby?
 - A. Hypothermia
 - B. Hyperthermia
 - C. Hypoglycemia
 - D. Hyperglycemia
- 19- A neonate is in the neonatal intensive care unit. The baby is 28 weeks' gestation and weighs 1000 grams. Which of the following is correct in relation to this baby's growth?
 - A. Weight is appropriate-for-gestational age.
 - B. Weight is below average for gestational age.
 - C. Baby experienced intrauterine growth restriction.
 - D. Weight is large average for gestational age.
- **20-** Jitteriness Differs from clonic seizures in these aspects:
 - A. Diminished by passive flexion or repositioning of the limb, and provoked by tactile stimulation
 - B. Stereotypic and repetitive biphasic movements
 - C. A fast contraction phase and a slower relaxation phase
 - D. They can involve any part of the body; most often involve one extremity or one side of the body
- 21- Which of the following are defects associated with Tetralogy of Fallot?
 - A. Coarctation of aorta, aortic valve Stenosis, mitral valve Stenosis, and patent duct arteriosus
 - B. Ventricular septal defect, overriding aorta, Pulmonic Stenosis, and right ventricular hypertrophy.
 - C. Tricuspid valve atresia, atrial septal defect, and hypoplastic right ventricle.
 - D. Aorta exits from the right ventricle, pulmonary artery exits from the left ventricle, and two non-communicating circulations.
- 22- All of the following are characteristics of premature baby except:





- A. Has little Lanugo hair
- B. Has a 28 weeks gestation
- C. Has no vernix caseosa
- D. Has short extremities and protruded abdomen

23- Myoclonic seizure may be

- A. focal
- B. generalized
- C. Focal or multifocal
- D. Focal, multifocal or generalized
- 24- A newborn whose estimated gestational age is 34 weeks has had worsening respiratory distress since birth. Maternal history is significant for prolonged premature rupture of membranes, urinary tract infection, and fever. Chest. Blood samples are obtained for white blood cell count with differential and culture, and antibiotic treatment is started. From the following, the MOST appropriate initial combination of antibiotics is:
 - A. ampicillin and gentamicin
 - B. ceftazidime and tobramycin
 - C. trimethoprim-sulfamethoxazole
 - D. vancomycin and amikacin

25- Congenital heart disease causing cyanosis without respiratory distress include the Following EXCEPT

- A. tricuspid atresia
- B. aortic stenosis
- C. pulmonary atresia
- D. tetralogy of Fallot

26- One of the following is a sign of right-sided heart failure

- A. edema
- B. tachypnea
- C. wheezing
- D. pulmonary edema

27- Indications for dialysis in acute kidney failure include all the following EXCEPT

- A. anuria/oliguria
- B. persistent hypercalcemia
- C. severe metabolic acidosis
- D. blood urea nitrogen >100-150 mg/dl

28- The nurse would identify which congenital heart disease as involving increased pulmonary blood flow?

- A. Triscupid atresia
- B. Patent ductus arteriosus
- C. Tetralogy of Fallot
- D. Aortic stenosis

29- Which of the following would the nurse expect to see as symptoms of digoxin toxicity in a child with congestive heart failure who is receiving digoxin?

- A. Respiratory distress
- B. Extreme bradycardia
- C. Constipation





- D. Headache
- 30- Which type of failure is occurred as the result of an obstruction in the urinary tract
 - A. Pre-renal
 - B. Post-renal
 - C. Intrar-renal
 - D. Perirenal
- 31- Destruction of tubular epithelial cells results from
 - A. Nephrotoxins
 - B. Necrosis
 - C. Antibiotic
 - D. Nephrons
- 32- Which of the following specific manifestations would the nurse expect to assess in a child who complains from prerenal failure.
 - A. Fluid shift to lungs
 - B. Electrolyte imbalances
 - C. Acidosis
 - D. Oligurea
- 33- Atrial septal defect is
 - A. It is abnormal opening between the ventricles.
 - B. It is abnormal opening between the atrium.
 - C. It is normal opening between the atrium.
 - D. It is abnormal opening between the left atrium and left ventricle.
- 34- Which of the following would be an appropriate nursing diagnosis for a child who is receiving chemotherapy?
 - A. Ineffective breathing pattern
 - B. Constipation
 - C. Impaired skin integrity
 - D. Impaired oral mucous membrane
- 35- 4 year- old child with leukemia is admitted to the health care facility because of pneumonia. which of the following is the most likely cause of his current condition
 - A. Anemia
 - B. thrombocytopenia
 - C. Leucopenia
 - D. Eosinoph
- 36- The criteria for systematic venous congestion of heart failure
 - A. weight gain.
 - B. Poor feeding.
 - C. Anorexia.
 - D. Meningitis
- 37- Agents that damage the kidney tissue are called:
 - A. Nephrons
 - B. Nephrotoxins
 - C. Antibodies
 - D. Enterotoxins
- 38- The client with renal failure should be on which type of diet?





- A. High protein, high carbohydrate, low calorie
- B. Adequate calorie intake, high carbohydrate, limited protein
- C. Limited protein, low carbohydrate, adequate calorie intake
- D. Low calorie, limited protein, low carbohydrate

39- Most common type of leukemia in children

- A. Acute lymphocytic leukemia (ALL)
- B. Acute myelogenous leukemia (AML)
- C. Chronic myelogenous leukemia (CML)
- D. Chronic lymphocytic leukemia (CLL)
- 40- Common congenital defect caused by persistent fetal circulation.
 - A. PDA
 - B. ASD
 - C. VSD
 - D. AVD

II: Read the following sentences and write only true or false (10 marks)

Item	Т	F
1. Infants born before completion of 37 weeks of gestation are considered	1	F
preterm or premature regardless of birth length		
2.In premature head appear somewhat smaller in proportion to the body size.		
3. Jaundice is observed during the 1st wk in approximately 80% of term infant and 60% of preterm infant.		
4.Kernicterus is caused by the deposition of the conjugated bilirubin in the brain		
5.One or more risk factors especially in mechanically ventilated baby with persistent metabolic acidosis should suspected sepsis		
6. The number of adults affected with leukemia is 10 times that of children		
7.In Peritoneal dialysis. Blood is filtered outside the body after the abdomen is filled with a special cleaning solution		
8. When left ventricle is unable to pump blood effectively into the pulmonary artery resulting in increased pressure in the right atrium and systemic venous circulation.		
9.Criteria for systemic venous congestion Orthopnea, Cough, Cyanosis and Wheezing.		
10.Decrease in liver size is an excellent criterion of response to therapy in heart failure		

III: Give short account about (10 marks):

- 1- Diagnostic tests for leukemia (2)
- 2- Classification of congenital heart disease (2)





- **3-** Administration of digoxin (3)
- **4-** Management of renal failure (3)

IV: Read the following situation and answer the questions (10 marks):

Male newborn, one of twin, 29 weeks gestation (1.700 Kg), presented with respiratory distress after 2 hours from the delivery. There was maternal diabetes during this pregnancy, and neonatal death of previous pregnancy. The family was low socioeconomic state. The doctor diagnosed the baby as Respiratory Distress Syndrome (RDS). He developed jaundice after 2 days of admission. Total serum bilirubin= 10 mg/dl, direct bilirubin = 0.3mg/dl. Hg=16gm

- 1-Discuss nursing assessment for this case? [5 Marks]
- 2- Design nursing care plan for this case ? [5 Marks]

Best wishes