NCLEX Review Questions

- 1. When administering a medication to a child, the nurse knows that:
 - a. The most accurate means for measuring small amounts of medication is the plastic disposable calibrated oral syringe.
 - b. A teaspoon is often the unit of measurement for pediatric medication and is especially helpful when working with families.
 - c. Using a dropper is also acceptable, remembering that thick fluids are easier to measure than viscous fluids.
 - d. For more exact measuring, emptying dropper contents into a medicine cup can be helpful.
- 2. During hospitalization there may be a reason to use restraints. Protocol for using restraints may include which of the following? Select all that apply.
 - a. One finger breadth should be left between the skin and the device, and knots should be tied to allow for quick release.
 - b. Elbow restraints fashioned from a variety of materials function well when a child's hands must be kept from his face (for example, after cleft lip or palate surgery).
 - c. A papoose board with straps or a mummy wrap effectively controls the child's movements when an infant or small child requires short-term restraint for examination or treatment that involves the head and neck.
 - d. Before initiating a behavioral restraint, the nurse should assess the patient's mental, behavioral, and physical status to determine the cause for the child's potentially harmful behavior.
 - e. Unless state law is more restrictive, behavioral restraints for children must be reordered every 2 hours for children younger than 9 years old and every 3 hours for children 9 to 17 years old.
- 3. You are working with a new nurse to give an intramuscular (IM) injection. Which principles do you want to include when doing this teaching? Select all that apply.