pneumonia.

- f. Administer an analgesic such as acetaminophen for pain.
- 3. A 3-month-old infant is seen in the clinic with the following symptoms: irritability, crying, refusal to nurse for more than 2 to 3 minutes, rhinitis, and a rectal temperature of 101.8° F (38.8° C). The labor, delivery, and postpartum history for this term infant is unremarkable. The nurse anticipates a diagnosis of:
  - a. Acute otitis media (AOM)
  - b. Otitis media with effusion (OME)
  - c. Otitis externa
  - d. Respiratory syncytial virus (RSV)
- 4. A 5-year-old is seen in the urgent care clinic with the following history and symptoms: sudden onset of severe sore throat after going to bed, drooling and difficulty swallowing, axillary temperature of 102.2° F (39.0° C), clear breath sounds, and absence of cough. The child appears anxious and is flushed. Based on these symptoms and history, the nurse anticipates a diagnosis of:
  - a. Group A beta-hemolytic streptococcus (GABHS) pharyngitis
  - b. Acute tracheitis
  - c. Acute epiglottitis
  - d. Acute laryngotracheobronchitis (LTB)
- 5. A 2-month-old formerly healthy infant born at term is seen in the urgent care clinic with intercostal retractions, respiratory rate of 62, heart rate of 128, refusal to breastfeed, abundant nasal secretions, and a pulse oximeter reading of 88% in room air. The diagnosis of respiratory syncytial virus (RSV) is made, and a bronchodilator is administered. The infant's oxygen saturation (SaO<sub>2</sub>) remains 95% in room air, and the respiratory rate is 54, with intercostal retractions; heart rate is 120 bpm. After 2 hours of observation and an intravenous (IV) bolus of fluids, the infant is being discharged home. The nurse provides which of the following home care instructions for this infant? Select all that apply.
  - a. Continue breastfeeding infant.