

- third-grader before taking her blood pressure
- d. Using a single consistent approach with the adolescent will help allay anger and hostility
3. These general approaches can be helpful when performing a physical exam. Select all that apply.
- a. With toddlers, restraint may be necessary, and requesting a parent's assistance is appropriate.
 - b. When examining a preschooler, giving a choice of which parts to examine may be helpful in gaining the child's cooperation.
 - c. With a school-age child, it is always best to have the parents present when examining.
 - d. Giving explanations about body systems can make adolescents nervous due to their egocentricities.
 - e. An infant physical exam is done head to toe, similarly to the adult.
4. When assessing BP in a child:
- a. Knowledge of normal mean is important: newborn, 65/41; 1 month to 2 years old, 95/58; and 2 to 5 years old, 101/57.
 - b. Cuff size is the most important variable and should be measured using limb length.
 - c. The child is considered normotensive if the BP is below the 95th percentile.
 - d. Check upper- and lower-extremity BP to look for abnormalities, such as aortic stenosis, which causes lower-extremity BP to be higher than upper-extremity BP.
5. Growth measurement is a key element in children of their health status. One measurement for height is linear growth measurement. What should the nurse do to perfect this technique? Select all that apply.
- a. Understand the difference in measurement for children who can stand alone and for those who must lie recumbent.
 - b. Use a length board and footboard or a stadiometer, which is the best technique, or use a tape measure.
 - c. Two measurers are usually required for a recumbent child, although one measurer may be sufficient for a cooperative