

ATI Pediatric Proctored Exam

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AND OTHER ATI EXAMS)

- 1) A nurse is providing discharge teaching to the parents of a 6-month-old infant who is postoperative following hypospadias repair with a stent placement. Which of the following instructions should the nurse include in the teaching?
 - a) "You may bathe your infant in an infant bathtub when you go home."
 - b) "Apply hydrocortisone cream to your infant's penis daily."
 - c) "You should clamp your infant's stent twice daily."
 - d) **"Allow the stent to drain directly into your infant's diaper."**
- 2) A nurse is monitoring the oxygen saturation level of an infant using pulse oximetry. The nurse should secure the sensor to which of the following areas on the infant?
 - a) Wrist
 - b) **Great toe**
 - c) Index finger
 - d) Heel
- 3) A nurse is caring for a school-age child who has primary nephrotic syndrome and is taking prednisone. Following 1 week of treatment, which of the following manifestations indicates to the nurse that the medication is effective?
 - a) **Decreased edema**
 - b) Increased abdominal girth
 - c) Decreased appetite
 - d) Increased protein in the urine
- 4) A nurse is planning care for a newly admitted school-age child who has generalized seizure disorder. Which of the following interventions should the nurse plan to include?
 - a) Ensure that a padded tongue blade is at the child's bedside.

- b) Allow the child to play video games on a tablet computer.
 - c) Allow the child to take a tub bath independently.
- d) **Ensure the oxygen source is functioning in the child's room.**
- 5) A nurse is receiving change-of-shift report for four children. Which of the following children should the nurse assess first?
- a) **A toddler who has a concussion and an episode of forceful vomiting**
 - b) An adolescent who has infective endocarditis and reports having a headache
 - c) An adolescent who was placed into halo traction 1 hr ago and reports pain as 6 on a scale of 0 to 10
 - d) A school-age child who has acute glomerulonephritis and brown-colored urine
- 6) A nurse is providing dietary teaching to the guardian of a school-age child who has cystic fibrosis. Which of the following statements should the nurse make?
- a) **"You should offer your child high-protein meals and snacks throughout the day."**
 - b) "You should decrease your child's dietary fat intake to less than 10% of their caloric intake."
 - c) "You should restrict your child's calorie intake to 1,200 per day."
 - d) "You should give your child a multivitamin once weekly."
- 7) A nurse assessing a school-age child who has an infratentorial brain tumor. Which of the following findings should the nurse identify as a manifestation of increased intracranial pressure?
- a) Hypotension

b) Reports insomnia

c) **Difficulty concentrating**

d) Tachycardia

8) A nurse is providing teaching to an adolescent about how to manage tinea pedis. Which of the following statements by the adolescent indicates an understanding of the teaching?

a) "I should buy plastic shoes to wear at the swimming pool."

b) **"I should wear sandals as much as possible."**

c) "I should place the permethrin cream between my toes twice daily."

d) "I should seal my nonwashable shoes in plastic bags for a couple of weeks."

9) A nurse is caring for a school-age child who has diabetes mellitus and was admitted with a diagnosis of diabetic ketoacidosis. When performing the respiratory assessment, which of the following findings should the nurse expect?

a) **Deep respirations of 32/min**

b) Shallow respirations of 10/min

c) Paradoxical respirations of 26/min

d) Periods of apnea lasting for 20 seconds

10) A nurse is planning an educational program to teach parents about protecting their children from sunburns. Which of the following instructions should the nurse plan to include?

a) "Allow your child to play outside during the hours between 10:00 a.m. and 2:00 p.m."

b) **"Choose a waterproof sunscreen with a minimum SPF of 15."**

c) "Dress your child in loose weave polyester fabric prior to sun exposure."

- d) "Reapply sunscreen every 4 hours."**
- 11) A nurse is providing teaching to the parents of a preschooler who has heart failure and a new prescription for digoxin twice daily. Which of the following instructions should the nurse include in the teaching?
- a) "Use a kitchen teaspoon to measure the medication."**
 - b) "Brush the child's teeth after giving the medication."**
 - c) "Double the next dose if the child misses a dose."**
 - d) "Repeat the dose if the child vomits."**
- 12) A nurse is providing teaching to the family of a school-age child who has juvenile idiopathic arthritis. Which of the following instructions should the nurse include in the teaching?
- a) "Limit movement of the child's large joints."**
 - b) "Encourage the child to perform independent self-care."**
 - c) "Provide the child with a soft mattress for sleeping."**
 - d) "Schedule a 2-hour daily nap for the child in the afternoon."**
- 13) A nurse is creating a plan of care for a child who has varicella. Which of the following interventions should the nurse include?
- a) Maintain the child's room temperature at 80° F.**
 - b) Prepare the child for a lumbar puncture.**
 - c) Administer aspirin to the child for a temperature greater than 38.3° C (101° F).**
 - d) **Initiate airborne precautions for the child.****
- 14) A nurse is assessing a school-age child who has an acute spinal cord injury following a sports injury 1 week ago. Identify the area the nurse should tap to elicit the bicep reflect.

i) **Correct answer is A**

15) A school nurse is providing an in-service for faculty about improving education for students who have ADHD. Which of the following statements by a faculty member indicates an understanding of the teaching?

- a) "I will plan to increase the amount of homework I assign to students who have ADHD."
- b) "I will give students who have ADHD the same amount of time as other students to complete tests."
- c) "I will allow students who have ADHD one rest break throughout the day."
- d) **"I will teach challenging academic subjects to students who have ADHD in the morning."**

1. **A nurse is assisting with the care of a child who is postoperative and received a transfusion during a surgical procedure. Which of the following findings indicates the child is having a hemolytic reaction?**

- a) **Chills and flank pain** (Chills and flank pain are findings that indicate an incompatibility of the transfused blood product with the client's blood. The nurse should identify this finding as an indication that the child is having a hemolytic reaction.)
- b) Pruritus and flushing
- c) Rales and cyanosis
- d) Bradycardia and diarrhea

2. **A nurse is collecting data from a child during a well-child visit. The nurse should recognize that which of the following findings places the child at a higher risk for abuse?**

- a) The child is 6 years old.
- b) The child is male.
- c) **The child was born at 30 weeks of gestation.** (The nurse should identify that children who are born prematurely are at greater risk for abuse because of the potential for

impaired bonding during early infancy.)

- d) The child was born via cesarean birth.

3. A nurse is reinforcing teaching with the guardian of a child who has a new diagnosis of rheumatic fever. Which of the following statements by the guardian indicates an understanding of the teaching?

- a) "I should not give my child aspirin for pain or fever."
- b) "My child will take antibiotic for 6 months."
- c) "**My child might have a period of irregular movement of the extremities.**" (The nurse should instruct the guardian that the child might experience chorea weeks or months after the initial diagnosis. Chorea is a temporary lack of coordination and the presence of sudden, irregular movements or periods of clumsiness.)
- d) "I should expect there to be blood in my child's urine."

4. A nurse is collecting data from an infant during a well-child visit. Which of the following sites should the nurse use when obtaining the infant's heart rate?

- a) **Apical** (The nurse should use the apical pulse to obtain the infant's heart rate and count it for a full minute, because it gives a reliable rate and rhythm and provides accurate baseline assessment data. In an infant, the apical heart rate is auscultated at the fourth intercostal space lateral to the midclavicular line.)
- b) Radial
- c) Carotid
- d) Femoral

5. A nurse is preparing a toddler for suturing of a minor facial laceration. The nurse should place the toddler in which of the following restraints?

- a) **Mummy restraint** (The nurse should use a mummy wrap when a short-term restraint is needed for treatment of the toddler that involves the head and neck. The nurse should always use the least amount of restraint necessary.)
- b) Jacket restraint
- c) Elbow restraint
- d) Wrist restraint

6. A nurse is reinforcing dietary teaching with the parent of a 2-year-old toddler. Which of the following should the nurse include in the teaching?

- a) "It is recommended that the toddler consumes no more than 12 ounces of fruit juice each day."
- b) "An appropriate serving size is 1 tablespoon of food per year of age." (The nurse should include that an appropriate serving size for a 2-year-old toddler is 1 tbsp of food per year of age.)
- c) "Introduce healthy finger foods like carrots and celery sticks."
- d) "Encourage 5 cups of low-fat milk each day."

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