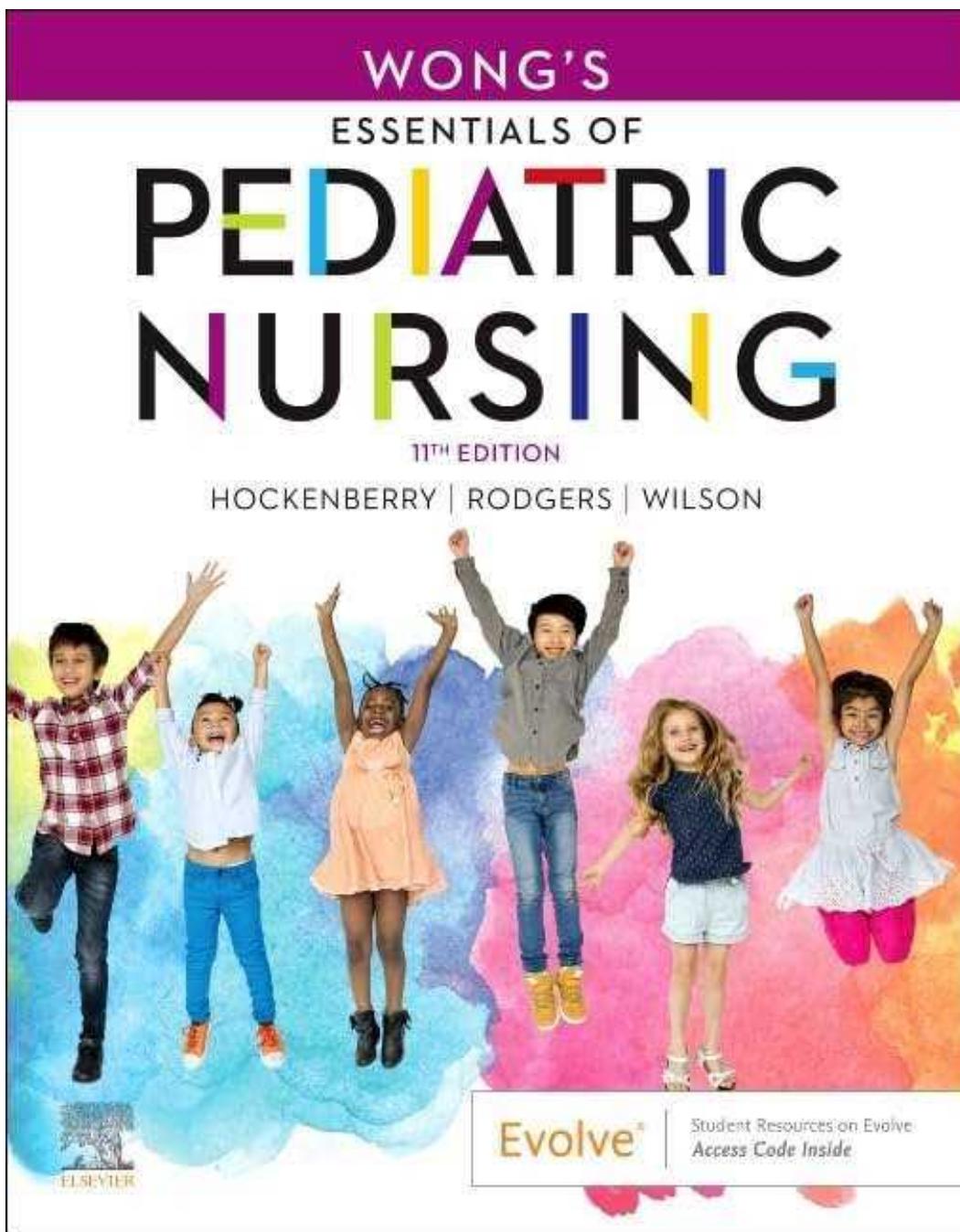


## TEST BANK

# Wong's Essentials of Pediatric Nursing

Marilyn J. Hockenberry, David Wilson, Cheryl C Rodgers

11th Edition



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Chapter 1. Perspectives of Pediatric Nursing

**MULTIPLE CHOICE**

1. The clinic nurse is reviewing statistics on infant mortality for the United States versus other countries. Compared with other countries that have a population of at least 25 million, the nurse makes which determination?

- a. The United States is ranked last among 27 countries.
- b. The United States is ranked similar to 20 other developed countries.
- c. The United States is ranked in the middle of 20 other developed countries.
- d. The United States is ranked highest among 27 other industrialized countries.

ANS: A

Although the death rate has decreased, the United States still ranks last in infant mortality among nations with a population of at least 25 million. The United States has the highest infant death rate of developed nations.

DIF: Cognitive Level: Remembering REF: dl. 6

TOP: Nursing Process: Assessment MSC: Client Needs: Health Promotion and Maintenance

2. Which is the leading cause of death in infants younger than 1 year in the United States?

- a. Congenital anomalies
- b. Sudden infant death syndrome
- c. Disorders related to short gestation and low birth weight
- d. Maternal complications specific to the perinatal period

ANS: A

Congenital anomalies account for 20.1% of deaths in infants younger than 1 year compared with sudden infant death syndrome, which accounts for 8.2%; disorders related to short gestation and unspecified low birth weight, which account for 16.5%; and maternal complications such as infections specific to the perinatal period, which account for 6.1% of deaths in infants younger than 1 year of age.

DIF: Cognitive Level: Remembering REF: dl. 7 TOP: Nursing Process: Planning

MSC: Client Needs: Health Promotion and Maintenance

3. What is the major cause of death for children older than 1 year in the United States?

- a. Heart disease
- b. Childhood cancer
- c. Unintentional injuries
- d. Congenital anomalies

ANS: C

Unintentional injuries (accidents) are the leading cause of death after age 1 year through adolescence. The leading cause of death for those younger than 1 year is congenital anomalies, and childhood cancers and heart disease cause a significantly lower percentage of deaths in children older than 1 year of age.

DIF: Cognitive Level: Understanding REF: dl. 7 TOP: Nursing Process: Planning

MSC: Client Needs: Health Promotion and Maintenance

4. In addition to injuries, what are the leading causes of death in adolescents ages 15 to 19 years?

- a. Suicide and cancer
- b. Suicide and homicide
- c. Drowning and cancer
- d. Homicide and heart disease

ANS: B

Suicide and homicide account for 16.7% of deaths in this age group. Suicide and cancer account for 10.9% of deaths, heart disease and cancer account for approximately 5.5%, and homicide and heart disease account for 10.9% of the deaths in this age group.

DIF: Cognitive Level: Remembering REF: dl. 7 TOP: Nursing Process: Planning

MSC: Client Needs: Health Promotion and Maintenance

5. The nurse is planning a teaching session to adolescents about deaths by unintentional injuries.

Which should the nurse include in the session with regard to deaths caused by injuries?

- a. More deaths occur in males.
- b. More deaths occur in females.
- c. The pattern of deaths does not vary according to age and sex.
- d. The pattern of deaths does not vary widely among different ethnic groups.

ANS: A

The majority of deaths from unintentional injuries occur in males. The pattern of death does vary greatly among different ethnic groups, and the causes of unintentional deaths vary with age and gender.

DIF: Cognitive Level: Applying REF: pp. 7-8

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Health Promotion and Maintenance

6. What do mortality statistics describe?

- a. Disease occurring regularly within a geographic location
- b. The number of individuals who have died over a specific period
- c. The prevalence of specific illness in the population at a particular time
- d. Disease occurring in more than the number of expected cases in a community

ANS: B

Mortality statistics refer to the number of individuals who have died over a specific period.

Morbidity statistics show the prevalence of specific illness in the population at a particular time.

Data regarding disease within a geographic region, or in greater than expected numbers in a community, may be extrapolated from analyzing the morbidity statistics.

DIF: Cognitive Level: Remembering REF: dl. 3 TOP: Nursing Process: Planning

MSC: Client Needs: Health Promotion and Maintenance

7. The nurse should assess which age group for suicide ideation since suicide in which age group is the third leading cause of death?

- a. Preschoolers
- b. Young school age
- c. Middle school age
- d. Late school age and adolescents

ANS: D

Suicide is the third leading cause of death in children ages 10 to 19 years; therefore, the age group should be late school age and adolescents. Suicide is not one of the leading causes of death for preschool and young or middle school-aged children.

DIF: Cognitive Level: Understanding REF: dl. 6

TOP: Nursing Process: Assessment MSC: Client Needs: Health Promotion and Maintenance

8. Parents of a hospitalized toddler ask the nurse, What is meant by family-centered care? The nurse should respond with which statement?

- a. Family-centered care reduces the effect of cultural diversity on the family.
- b. Family-centered care encourages family dependence on the health care system.
- c. Family-centered care recognizes that the family is the constant in a child's life.
- d. Family-centered care avoids expecting families to be part of the decision-making process.

ANS: C

The three key components of family-centered care are respect, collaboration, and support. Family-centered care recognizes the family as the constant in the child's life. The family should be enabled and empowered to work with the health care system and is expected to be part of the decision-making process. The nurse should also support the family's cultural diversity, not reduce its effect.

DIF: Cognitive Level: Applying REF: dl. 8

TOP: Nursing Process: Implementation MSC: Client Needs: Health Promotion and Maintenance

9. The nurse is describing clinical reasoning to a group of nursing students. Which is most descriptive of clinical reasoning?

- a. Purposeful and goal directed
- b. A simple developmental process
- c. Based on deliberate and irrational thought
- d. Assists individuals in guessing what is most appropriate

ANS: A

Clinical reasoning is a complex developmental process based on rational and deliberate thought. When thinking is clear, precise, accurate, relevant, consistent, and fair, a logical connection develops between the elements of thought and the problem at hand.

DIF: Cognitive Level: Applying REF: dl. 12

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Health Promotion and Maintenance

10. Evidence-based practice (EBP), a decision-making model, is best described as which?

- a. Using information in textbooks to guide care

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- b. Combining knowledge with clinical experience and intuition
- c. Using a professional code of ethics as a means for decision making
- d. Gathering all evidence that applies to the child's health and family situation

ANS: B

EBP helps focus on measurable outcomes; the use of demonstrated, effective interventions; and questioning what is the best approach. EBP involves decision making based on data, not all evidence on a particular situation, and involves the latest available data. Nurses can use textbooks to determine areas of concern and potential involvement.

DIF: Cognitive Level: Remembering REF: dl. 11 TOP: Nursing Process: Planning

MSC: Client Needs: Safe and Effective Care Environment

11. Which best describes signs and symptoms as part of a nursing diagnosis?

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- a. Description of potential risk factors
- b. Identification of actual health problems
- c. Human response to state of illness or health
- d. Cues and clusters derived from patient assessment

ANS: D

Signs and symptoms are the cues and clusters of defining characteristics that are derived from a patient assessment and indicate actual health problems. The first part of the nursing diagnosis is the problem statement, also known as the human response to the state of illness or health. The identification of actual health problems may be part of the medical diagnosis. The nursing diagnosis is based on the human response to these problems. The human response is therefore a component of the nursing diagnostic statement. Potential risk factors are used to identify nursing care needs to avoid the development of an actual health problem when a potential one exists.

DIF: Cognitive Level: Understanding REF: dl. 13

TOP: Integrated Process: Communication and Documentation

MSC: Client Needs: Safe and Effective Care Environment

12. The nurse is talking to a group of parents of school-age children at an after-school program about childhood health problems. Which statement should the nurse include in the teaching?

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- a. Childhood obesity is the most common nutritional problem among children.
- b. Immunization rates are the same among children of different races and ethnicity.
- c. Dental caries is not a problem commonly seen in children since the introduction of fluoridated water.

Mental health problems are typically not seen in school-age children but may be diagnosed in

- d. adolescents.

ANS: A

When teaching parents of school-age children about childhood health problems, the nurse should include information about childhood obesity because it is the most common problem among children and is associated with type 2 diabetes. Teaching parents about ways to prevent obesity is important to include. Immunization rates differ depending on the child's race and ethnicity; dental caries continues to be a common chronic disease in childhood; and mental health problems are seen in children as young as school age, not just in adolescents.

DIF: Cognitive Level: Applying REF: dl. 3

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Health Promotion and Maintenance

13. The nurse is planning care for a hospitalized preschool-aged child. Which should the nurse plan to ensure atraumatic care?

- a. Limit explanation of procedures because the child is preschool aged.
- b. Ask that all family members leave the room when performing procedures.
- c. Allow the child to choose the type of juice to drink with the administration of oral medications.
- d. Explain that EMLA cream cannot be used for the morning lab draw because there is not time for it to be effective.

ANS: C

The overriding goal in providing atraumatic care is first, do no harm. Allowing the child a choice of juice to drink when taking oral medications provides the child with a sense of control. The preschool child should be prepared before procedures, so limiting explanations of procedures would increase anxiety. The family should be allowed to stay with the child during procedures, minimizing stress. Lidocaine/prilocaine (EMLA) cream is a topical local anesthetic. The nurse should plan to use the prescribed cream in time for morning laboratory draws to minimize pain.

DIF: Cognitive Level: Applying REF: pp. 8-9 TOP: Nursing Process: Planning

MSC: Client Needs: Health Promotion and Maintenance

14. Which situation denotes a nontherapeutic nursepatientfamily relationship?

- a. The nurse is planning to read a favorite fairy tale to a patient.
- b. During shift report, the nurse is criticizing parents for not visiting their child.
- c. The nurse is discussing with a fellow nurse the emotional draw to a certain patient.
- d. The nurse is working with a family to find ways to decrease the family's dependence on health care providers.

ANS: B

Criticizing parents for not visiting in shift report is nontherapeutic and shows an underinvolvement with the parents. Reading a fairy tale is a therapeutic and age appropriate action. Discussing feelings of an emotional draw with a fellow nurse is therapeutic and shows a willingness to understand feelings. Working with parents to decrease dependence on health care providers is therapeutic and helps to empower the family.

DIF: Cognitive Level: Analyzing REF: dl. 9 TOP: Integrated Process: Caring

MSC: Client Needs: Psychosocial Integrity

15. The nurse is aware that which age group is at risk for childhood injury because of the cognitive characteristic of magical and egocentric thinking?

- a. Preschool
- b. Young school age
- c. Middle school age
- d. Adolescent

ANS: A

Preschool children have the cognitive characteristic of magical and egocentric thinking, meaning they are unable to comprehend danger to self or others. Young and middle school-aged children have transitional cognitive processes, and they may attempt dangerous acts without detailed

planning but recognize danger to themselves or others. Adolescents have formal operational cognitive processes and are preoccupied with abstract thinking.

DIF: Cognitive Level: Understanding REF: dl. 4

TOP: Nursing Process: Assessment

MSC: Client Needs: Safe and Effective Care Environment

16. The school nurse is assessing children for risk factors related to childhood injuries. Which child has the most risk factors related to childhood injury?

- a. Female, multiple siblings, stable home life
- b. Male, high activity level, stressful home life
- c. Male, even tempered, history of previous injuries
- d. Female, reacts negatively to new situations, no serious previous injuries

ANS: B

Boys have a preponderance for injuries over girls because of a difference in behavioral characteristics, a high activity temperament is associated with risk-taking behaviors, and stress predisposes children to increased risk taking and self-destructive behaviors. Therefore, a male child with a high activity level and living in a stressful environment has the highest number of risk factors. A girl with several siblings and a stable home life is low risk. A boy with previous injuries has two risk factors, but an even temper is not a risk factor for injuries. A girl who reacts negatively to new situations but has no previous serious illnesses has only one risk factor.

DIF: Cognitive Level: Analyzing REF: dl. 4

TOP: Nursing Process: Assessment

MSC: Client Needs: Safe and Effective Care Environment

17. The school nurse is evaluating the number of school-age children classified as obese. The nurse recognizes that the percentile of body mass index that classifies a child as obese is greater than which?

- a. 50th percentile
- b. 75th percentile
- c. 80th percentile
- d. 95th percentile

ANS: D

Obesity in children and adolescents is defined as a body mass index at or greater than the 95th percentile for youth of the same age and gender.

DIF: Cognitive Level: Remembering REF: dl. 3 TOP: Nursing Process: Evaluation

MSC: Client Needs: Health Promotion and Maintenance

18. The nurse is teaching parents about the types of behaviors children exhibit when living with chronic violence. Which statement made by the parents indicates further teaching is needed?

- a. We should watch for aggressive play.
- b. Our child may show lasting symptoms of stress.
- c. We know that our child will show caring behaviors.
- d. Our child may have difficulty concentrating in school.

ANS: C

The statement that the child will show caring behaviors needs further teaching. Children living with chronic violence may exhibit behaviors such as difficulty concentrating in school, memory impairment, aggressive play, uncaring behaviors, and lasting symptoms of stress.

DIF: Cognitive Level: Applying REF: dl. 6

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Health Promotion and Maintenance

19. The nurse is evaluating research studies according to the GRADE criteria and has determined the quality of evidence on the subject is moderate. Which type of evidence does this determination indicate?

- a. Strong evidence from unbiased observational studies
- b. Evidence from randomized clinical trials showed inconsistent results
- c. Consistent evidence from well-performed randomized clinical trials
- d. Evidence for at least one critical outcome from randomized clinical trials had serious flaws

ANS: B

Evidence from randomized clinical trials with important limitations indicates that the evidence is of moderate quality. Strong evidence from unbiased observational studies and consistent evidence from well-performed randomized clinical trials indicates high quality. Evidence for at least one critical outcome from randomized clinical trials that has serious flaws indicates low quality.

DIF: Cognitive Level: Remembering REF: dl. 12 TOP: Nursing Process: Evaluation

MSC: Client Needs: Safe and Effective Care Environment

20. An adolescent patient wants to make decisions about treatment options, along with his parents. Which moral value is the nurse displaying when supporting the adolescent to make decisions?

- a. Justice
- b. Autonomy
- c. Beneficence
- d. Nonmaleficence

ANS: B

Autonomy is the patients right to be self-governing. The adolescent is trying to be autonomous, so the nurse is supporting this value. Justice is the concept of fairness. Beneficence is the obligation to promote the patients well-being. Nonmaleficence is the obligation to minimize or prevent harm.

DIF: Cognitive Level: Analyzing REF: dl. 11 TOP: Nursing Process: Evaluation

MSC: Client Needs: Health Promotion and Maintenance

21. The nurse manager is compiling a report for a hospital committee on the quality of nursing-sensitive indicators for a nursing unit. Which does the nurse manager include in the report?

- a. The average age of the nurses on the unit
- b. The salary ranges for the nurses on the unit
- c. The education and certification of the nurses on the unit
- d. The number of nurses who have applied but were not hired for the unit

ANS: C

Nursing-sensitive indicators reflect the structure, process, and outcomes of nursing care. For example, the number of nursing staff, the skill level of the nursing staff, and the education and certification of nursing staff indicate the structure of nursing care. The average age of the nurses, salary range, and number of nurses who have applied but were not hired for the unit are not nursing-sensitive indicators.

## Chapter 2. Family, Social, Cultural, and Religious Influences on Child Health Promotion

### MULTIPLE CHOICE

1. Children are taught the values of their culture through observation and feedback relative to their own behavior. In teaching a class on cultural competence, the nurse should be aware that which factor may be culturally determined?

- a. Ethnicity
- b. Racial variation
- c. Status
- d. Geographic boundaries

ANS: C

Status is culturally determined and varies according to each culture. Some cultures ascribe higher status to age or socioeconomic position. Social roles also are influenced by the culture. Ethnicity is an affiliation of a set of persons who share a unique cultural, social, and linguistic heritage. It is one component of culture. Race and culture are two distinct attributes. Whereas racial grouping describes transmissible traits, culture is determined by the pattern of assumptions, beliefs, and practices that unconsciously frames or guides the outlook and decisions of a group of people. Cultural development may be limited by geographic boundaries, but the boundaries are not culturally determined.

DIF: Cognitive Level: Analyzing REF: dl. 39

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

2. The nurse is aware that if patients different cultures are implied to be inferior, the emotional attitude the nurse is displaying is what?

- a. Acculturation
- b. Ethnocentrism
- c. Cultural shock
- d. Cultural sensitivity

ANS: B

Ethnocentrism is the belief that ones way of living and behaving is the best way. This includes the emotional attitude that the values, beliefs, and perceptions of ones ethnic group are superior to those of others. Acculturation is the gradual changes that are produced in a culture by the influence of another culture that cause one or both cultures to become more similar. The minority culture is forced to learn the majority culture to survive. Cultural shock is the helpless feeling and state of disorientation felt by an outsider attempting to adapt to a different culture group.

Cultural sensitivity, a component of culturally competent care, is an awareness of cultural similarities and differences.

DIF: Cognitive Level: Understanding REF: dl. 35 TOP: Integrated Process: Caring

MSC: Client Needs: Psychosocial Integrity

3. Which term best describes the sharing of common characteristics that differentiates one group from other groups in a society?

- a. Race
- b. Culture
- c. Ethnicity
- d. Superiority

ANS: C

Ethnicity is a classification aimed at grouping individuals who consider themselves, or are considered by others, to share common characteristics that differentiate them from the other collectivities in a society, and from which they develop their distinctive cultural behavior. Race is a term that groups together people by their outward physical appearance. Culture is a pattern of assumptions, beliefs, and practices that unconsciously frames or guides the outlook and decisions of a group of people. A culture is composed of individuals who share a set of values, beliefs, and practices that serve as a frame of reference for individual perception and judgments. Superiority is the state or quality of being superior; it does not apply to ethnicity.

DIF: Cognitive Level: Understanding REF: dl. 39

TOP: Nursing Process: Assessment MSC: Client Needs: Psychosocial Integrity

4. After the family, which has the greatest influence on providing continuity between generations?

- a. Race
- b. School
- c. Social class
- d. Government

ANS: B

Schools convey a tremendous amount of culture from the older members to the younger members of society. They prepare children to carry out the traditional social roles that will be expected of them as adults. Race is defined as a division of humankind possessing traits that are transmissible by descent and are sufficient to characterize race as a distinct human type; although race may have an influence on childrearing practices, its role is not as significant as that of schools. Social class refers to the family's economic and educational levels. The social class of a family may change between generations. The government establishes parameters for children, including amount of schooling, but this is usually at a local level. The school culture has the most significant influence on continuity besides family.

DIF: Cognitive Level: Remembering REF: dl. 33

TOP: Nursing Process: Assessment MSC: Client Needs: Psychosocial Integrity

5. The nurse is planning care for a patient with a different ethnic background. Which should be an appropriate goal?

- a. Adapt, as necessary, ethnic practices to health needs.

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- b. Attempt, in a nonjudgmental way, to change ethnic beliefs.
- c. Encourage continuation of ethnic practices in the hospital setting.
- d. Strive to keep ethnic background from influencing health needs.

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ANS: A

Whenever possible, nurses should facilitate the integration of ethnic practices into health care provision. The ethnic background is part of the individual; it should be difficult to eliminate the influence of ethnic background. The ethnic practices need to be evaluated within the context of the health care setting to determine whether they are conflicting.

DIF: Cognitive Level: Applying REF: dl. 34 TOP: Integrated Process: Caring

MSC: Client Needs: Psychosocial Integrity

6. The nurse discovers welts on the back of a Vietnamese child during a home health visit. The child's mother says she has rubbed the edge of a coin on her child's oiled skin. The nurse should recognize this as what?

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- a. Child abuse
- b. Cultural practice to rid the body of disease
- c. Cultural practice to treat enuresis or temper tantrums
- d. Child discipline measure common in the Vietnamese culture

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ANS: B

This is descriptive of coining. The welts are created by repeatedly rubbing a coin on the child's oiled skin. The mother is attempting to rid the child's body of disease. Coining is a cultural healing practice. Coining is not specific for enuresis or temper tantrums. This is not child abuse or discipline.

DIF: Cognitive Level: Understanding REF: dl. 41

TOP: Nursing Process: Assessment MSC: Client Needs: Psychosocial Integrity

7. A Hispanic toddler has pneumonia. The nurse notices that the parent consistently feeds the child only the broth that comes on the clear liquid tray. Food items, such as Jell-O, Popsicles, and juices, are left. Which statement best explains this?

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- a. The parent is trying to feed the child only what the child likes most.
- b. Hispanics believe the evil eye enters when a person gets cold.
- c. The parent is trying to restore normal balance through appropriate hot remedies.
- d. Hispanics believe an innate energy called chi is strengthened by eating soup.

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ANS: C

In several cultures, including Filipino, Chinese, Arabic, and Hispanic, hot and cold describe certain properties completely unrelated to temperature. Respiratory conditions such as pneumonia are cold conditions and are treated with hot foods. The child may like broth but is unlikely to always prefer it to Jell-O, Popsicles, and juice. The evil eye applies to a state of imbalance of health, not curative actions. Chinese individuals, not Hispanic individuals, believe in chi as an innate energy.

DIF: Cognitive Level: Applying REF: dl. 40

TOP: Nursing Process: Assessment MSC: Client Needs: Psychosocial Integrity

8. How is family systems theory best described?

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- a. The family is viewed as the sum of individual members.

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