

## Chapter 30

1. When caring for a child, you should:
  - A) avoid separating the child from his or her parents when possible.
  - B) always assume that the child is frightened and attempt to provide a familiar object such as a toy to reduce fear.
  - C) never remove clothing from the area around the perineum.
  - D) never tell the child that treatment is going to hurt, because the child will refuse to cooperate and may overreact to the pain.
  
2. Communication with adolescents can be enhanced by:
  - A) letting them participate in decision making.
  - B) reassuring them that you will not discuss their illness or injury with their parents.
  - C) telling them things will not hurt, even if they will.
  - D) minimizing their fears.
  
3. When caring for a small child, it is important to:
  - A) ask parents to sit beside the gurney to enlist cooperation.
  - B) not warn them of painful procedures to avoid frightening them.
  - C) speak to both the child and the parent during your assessment.
  - D) use a loud voice and assertive approach to your assessment.
  
4. At what age of development will an infant begin to become anxious around strangers?
  - A) 1 to 3 months
  - B) 3 to 6 months
  - C) 6 to 12 months
  - D) 1 to 2 years
  
5. The assessment of a toddler may be improved by:
  - A) using distraction.
  - B) restraining the child.
  - C) clearly explaining procedures.
  - D) not allowing the child to cry.
  
6. Which age group has a rich fantasy life?
  - A) toddler
  - B) preschool
  - C) school age
  - D) adolescent

7. The preschool age child believes that injuries:
- A) are preventable.
  - B) have a literal cause-and-effect relationship.
  - C) are a result of punishment or bad behavior.
  - D) result in permanent disfigurement.
8. Which of the following would be an appropriate question for a school age child?
- A) Should I listen to your heart or lungs first?
  - B) May I take your blood pressure please?
  - C) Is it all right if I put a splint on your arm?
  - D) Do you want to go home?
9. In which age group is a pediatric patient able to differentiate between physical and emotional pain?
- A) infant
  - B) toddler
  - C) preschool
  - D) school age
10. Body image and appearance are important to which age group?
- A) toddler
  - B) preschool
  - C) school age
  - D) adolescent
11. Adolescents are more comfortable with procedures when explained:
- A) without warning.
  - B) in simple terms.
  - C) immediately before performing them.
  - D) well in advance of performing them.
12. Obtaining vital signs in most children is easier when:
- A) they are restrained.
  - B) they are allowed to play with the equipment first.
  - C) parents are removed from their immediate view.
  - D) they are completed simultaneously.

13. Which of the following statements about an upper airway obstruction in children is true?
- A) Abdominal thrusts are not effective and should not be used on an unconscious child.
  - B) An inability to speak or cry suggests a complete airway obstruction.
  - C) You should perform two blind finger sweeps when an upper airway obstruction is suspected.
  - D) An upper airway obstruction should not be suspected in children with acute respiratory distress.
14. Your patient is a 4-month-old infant who is awake but appears to be lethargic and dehydrated. His mother states that he has a 3-day history of diarrhea. Your treatment should include:
- A) giving two baby bottles of water.
  - B) providing prompt transport.
  - C) giving oxygen with a nonrebreathing mask at 4 L/min.
  - D) helping the mother to give the infant 2 tablespoons of an antidiarrheal medication.
15. Your patient is an 8-month-old infant with a complete airway obstruction. What technique should you use to clear the airway?
- A) five back blows and five chest thrusts
  - B) five back blows and five abdominal thrusts
  - C) five abdominal thrusts and five chest thrusts
  - D) blind finger sweep, five back blows, and five abdominal thrusts
16. You and your partner have responded to a 2-year-old patient. The patient's mother states that the child swallowed a quarter. The child is cyanotic and gasping for air. You should:
- A) try two blind finger sweeps to locate the quarter.
  - B) give five back blows followed by five chest thrusts until the airway is clear.
  - C) give five abdominal thrusts followed by a blind finger sweep.
  - D) perform abdominal thrusts alternating with rescue breathing.
17. While assessing a 4-month-old patient, you notice that the mouth is dry and the skin is cool and mottled with poor turgor. What condition could this indicate?
- A) dyspnea
  - B) dehydration
  - C) congestive heart failure
  - D) increased intracranial pressure

18. A viral illness that causes acute swelling of the lining of the larynx below the vocal cords is known as:
- A) croup.
  - B) epiglottitis.
  - C) stridor.
  - D) crepitus.
19. What causes febrile seizures?
- A) genetic defect
  - B) severe lack of oxygen
  - C) head injury from a fall
  - D) very high body temperature
20. Your patient is a 1-year-old child who has a very high body temperature. How should you reduce the temperature?
- A) Put the child in ice water to lower the child's core temperature.
  - B) Apply rubbing alcohol. The child will cool through the evaporation of the alcohol.
  - C) Apply chemical "cold packs" on the skin, covering the arteries that are close to the surface of the skin.
  - D) Undress the child and place moist towels on him or her.
21. Which of the following signs would not indicate that a child is in respiratory failure?
- A) cyanosis
  - B) decreased effort of breathing
  - C) unaltered level of consciousness
  - D) respiratory rate greater than 60 breaths/min
22. A common cause of shock in an infant is:
- A) febrile seizures.
  - B) vomiting and diarrhea.
  - C) cigarette burns on the arms.
  - D) venous bleeding from a 1-inch laceration of the hand.
23. One way to evaluate the urine output of a 4-month-old infant is to:
- A) ask the caregiver about the frequency of wet diaper changes.
  - B) give the infant 1 L of soda pop and measure the amount of time it takes for urine to be produced.
  - C) evaluate the fontanel. If it is bulging, urine output will be diminished.
  - D) evaluate the fontanel. If it is depressed, urine output will be very high.

24. What is the procedure to relieve a complete airway obstruction in a 6-year-old child?
- A) abdominal thrusts
  - B) back blows and chest thrusts
  - C) back blows and abdominal thrusts
  - D) blind finger sweeps, back blows, and abdominal thrusts
25. The definition of an infant is a child between the ages of:
- A) birth and 1 year.
  - B) 1 month and 6 months.
  - C) 1 month and 18 months.
  - D) 1 month and 2 years.
26. A child who has no recent history of illness suddenly appears cyanotic after playing with a small toy. You should immediately:
- A) perform the abdominal thrust maneuver.
  - B) give low-concentration oxygen.
  - C) use finger probes to clear the airway.
  - D) transport the child to the emergency department.
27. To clear a foreign body airway obstruction in an infant, you should perform:
- A) the Heimlich maneuver.
  - B) sets of five back blows and five chest thrusts.
  - C) four to six subdiaphragmatic thrusts.
  - D) blind finger sweeps to clear the obstruction.
28. If your first attempt to clear a foreign body airway obstruction in an infant fails, you should next:
- A) repeat the Heimlich maneuver.
  - B) repeat the back blows and chest thrusts.
  - C) pronounce the patient dead.
  - D) stop any additional attempts to clear the airway and immediately transport the patient to the emergency department.
29. What is the primary difference in caring for an infant who has an airway obstruction compared with a child who has the same condition?
- A) Oxygen should not be given to the infant once the airway is cleared.
  - B) You should deliver abdominal thrusts to an infant.
  - C) You should perform the Heimlich maneuver on infants only.
  - D) You should deliver back blows and chest thrusts to the infant.

30. When caring for a child with a significant airway obstruction due to an illness, you should:
- A) use a tongue blade to examine the upper airway for white spots.
  - B) use back blows to help force exhalation.
  - C) insert an oropharyngeal airway.
  - D) give oxygen and transport immediately.
31. Care for a child in early respiratory distress should include:
- A) using an oral airway.
  - B) inserting a nasal airway.
  - C) giving oxygen and providing prompt transport.
  - D) vigorous suctioning to remove secretions.
32. You have responded to the scene where a child has decreased work of breathing, decreased chest rise with inspiration, and cyanosis. What is this respiratory condition called?
- A) respiratory failure
  - B) dyspnea
  - C) tachypnea
  - D) orthopnea
33. To clear a foreign body airway obstruction in an infant, you should deliver a series of:
- A) three back blows and three chest thrusts.
  - B) five back blows and five chest thrusts.
  - C) five back blows and five abdominal thrusts.
  - D) five abdominal thrusts and five back blows.
34. Which of the following statements about a child's respiratory anatomy is false?
- A) A child has a smaller trachea.
  - B) A child's epiglottis is relatively smaller.
  - C) A child's cricoid cartilage is less rigid.
  - D) A child's tongue takes up more space in the mouth.
35. An infant is brought to the aid room in respiratory distress. Your partner begins questioning the infant's mother as you assess the patient. There are no visible signs of trauma. Which of the following maneuvers should be used to open the patient's airway?
- A) jaw thrust
  - B) head-tilt to a neutral plus position
  - C) head tilt-jaw thrust
  - D) place a 1-inch thick towel under the shoulders

36. When ventilating infants or small children, you should position the patient's neck in:
- A) slight flexion.
  - B) slight extension.
  - C) hyperextension.
  - D) a neutral sniffing position.
37. Cardiac arrest in children is commonly caused by:
- A) a heart attack.
  - B) a congenital defect.
  - C) primary heart disease.
  - D) respiratory problems.
38. What is the most common cause of cardiac arrest in children?
- A) trauma to the chest
  - B) respiratory problems
  - C) myocardial infarction
  - D) massive head injury
39. Which of the following is true about taking children's vital signs?
- A) Pulse and respirations are all that are needed in the field.
  - B) Respirations should be counted for 15 seconds.
  - C) The blood pressure cuff should measure two thirds of the upper arm.
  - D) Blood pressure should be assessed first.
40. The treatment of burns for a child should include:
- A) giving oxygen with a nasal cannula at 2 L/min.
  - B) covering the burn with dry bandages and clean sheets.
  - C) putting the child in ice water to stop the burning process.
  - D) asking the caregiver for butter to cover the burn.
41. You and your partner have responded to a call in which you suspect a 6-year-old child is a victim of child abuse. What should you do?
- A) Ask the parents why they would abuse the child.
  - B) Do not treat any of the injuries because a doctor needs to verify child abuse.
  - C) Refuse to treat the child because you know that you could be held liable in court.
  - D) Record the history you are given by the parent or caregiver, and promptly transport the child.

42. Which of the following statements about trauma to the abdomen in a child is false?
- A) Injuries can be difficult to locate in the abdominal cavity.
  - B) Air in the stomach will not interfere with a child's breathing.
  - C) The abdomen is a more common site of injury in children than adults.
  - D) Abdominal injury should be considered in a multiple-trauma patient who is getting worse but has no external signs.
43. What should you do when you suspect child abuse?
- A) Wait until law enforcement arrives before beginning care.
  - B) Advise the parents that you are going to have the police arrest them for child abuse.
  - C) Remove the child from the parents, and transport the child without the parents' permission.
  - D) Provide the necessary treatment, and make a full report to the emergency department staff, as well as social services.
44. The best way to transport a 4-year-old patient with a head injury is:
- A) cradled in your arms.
  - B) on the patient's side.
  - C) on a long backboard with the legs slightly elevated.
  - D) using a pediatric immobilization device.
45. A head injury should be suspected with any child who, after a traumatic injury, has:
- A) nausea and vomiting.
  - B) respiratory distress.
  - C) poor capillary refill.
  - D) hunger and thirst.
46. Blood loss in a child exceeding \_\_\_\_\_ of volume significantly increases the risk of shock.
- A) 10%
  - B) 15%
  - C) 20%
  - D) 25%
47. Partial-thickness burns on a child covering less than 10% of the body surface area are considered a:
- A) minor burn.
  - B) moderate burn.
  - C) critical burn.
  - D) life-threatening burn.

48. When stabilizing a possible spinal injury on a child, the rescuer should never use:
- A) a long backboard.
  - B) a child car seat.
  - C) sandbags.
  - D) cervical collars.
49. One problem that is associated with effective management of abdominal injuries in children is the presence of:
- A) food in the esophagus.
  - B) air in the stomach.
  - C) incontinence.
  - D) excessive excitability.
50. A child who is withdrawn, fearful, and/or hostile and refuses to talk about how an injury occurred might be a victim of:
- A) malnutrition.
  - B) over medication.
  - C) abuse.
  - D) head injuries.
51. In splinting extremities of a child, it is important for the rescuer to use:
- A) any adult-sized equipment that is available.
  - B) only equipment that fits the size of the child.
  - C) only rigid splints.
  - D) only air or vacuum splints.
52. A basic premise in caring for children is to remember that:
- A) parental care must be completed first.
  - B) most children will fully cooperate.
  - C) you can talk to a child just like any other patient.
  - D) children are not simply little adults.
53. Tachycardia, poor capillary refill, and mental status changes in a child are indications of:
- A) head trauma.
  - B) hypoglycemia.
  - C) shock.
  - D) hyperglycemia.

54. A 9-year-old child has fallen 12 feet and hit his head. Which of the following would not be an appropriate intervention?
- A) immobilization to an adult spine board
  - B) good alignment of the head
  - C) hyperventilation with a BVM device
  - D) oxygen with a nonrebreathing mask
55. A unique change in vital signs of pediatric patients in shock when compared to adults in shock is:
- A) tachycardia.
  - B) decreased capillary refill.
  - C) mental status changes.
  - D) hypotension.
56. A 6-year-old is removed from a swimming pool. After several minutes of unresponsiveness, the child woke up and began breathing. Your assessment reveals a frightened but normal child. You should:
- A) refer the child to his pediatrician.
  - B) release the child without concern.
  - C) package and transport to the hospital.
  - D) observe for 30 minutes and release if no change.
57. When using an adult immobilization device to immobilize a pediatric patient:
- A) use plenty of padding.
  - B) secure with tape rather than straps.
  - C) place the child at the foot of the device.
  - D) place a towel under the head and torso.
58. A viral infection of the respiratory tract is known as:
- A) croup.
  - B) epiglottitis.
  - C) stridor.
  - D) crepitus.
59. Status epilepticus is defined as:
- A) a seizure that lasts for less than 15 minutes.
  - B) a very mild seizure.
  - C) a continuous seizure for 13 minutes or more.
  - D) a seizure with no known cause.

60. Which is not a common cause of poisoning in children?
- A) houseplants
  - B) aspirin and acetaminophen
  - C) household cleaning products
  - D) spoiled milk

## Answer Key

1. A
2. A
3. C
4. C
5. A
6. B
7. C
8. A
9. D
10. D
11. D
12. B
13. B
14. B
15. A
16. D
17. B
18. A
19. D
20. D
21. C
22. B
23. A
24. A
25. A
26. A
27. B
28. B
29. D
30. D
31. C
32. A
33. B
34. B
35. D
36. D
37. D
38. B
39. C
40. B
41. D
42. B
43. D
44. D

- 45. A
- 46. D
- 47. A
- 48. C
- 49. B
- 50. C
- 51. B
- 52. D
- 53. C
- 54. C
- 55. B
- 56. C
- 57. A
- 58. A
- 59. C
- 60. D