

ENPC 4th Edition: Practice Test

1. **A preschooler has a small laceration that required 2 stitches. The nurse covers the wound with a bandage knowing that it will comfort the child to have it covered. What is the developmental reason for this intervention?**
 - a. Preschoolers are magical thinkers and imagine bandages keep their insides from coming out
 - b. Preschoolers fear physical disability and believe a bandage will prevent disability
 - c. Preschoolers explore orally and will likely chew or suck on the stitches if left uncovered
 - d. Preschoolers are concerned with body image and don't want to appear different than peers

2. **A 7-month-old presents to the emergency department with a complaint of fever. Assessment reveals a patent airway and slight cyanosis around his lips and nail beds. He is alert and interactive. His vital signs are 38.5° C (101.3° F), HR 134, RR 32, BP 78/54 mm Hg, and SpO₂ 84%. The nurse notes a healed surgical scar on his chest. Based on this assessment, what is the nurse's priority?**
 - a. Administer ibuprofen to treat the fever
 - b. Begin oxygen via a nonrebreather mask
 - c. Obtain a surgical history
 - d. Ask if the SpO₂ is normal for him

3. **An 11-year-old presents to the emergency department with a complaint of hitting his head while playing soccer. The nurse enters the room and performs an across-the-room assessment. He is staring at the wall. He has no increased work of breathing, and his color is pink. Using the pediatric assessment triangle (PAT), what classification will the nurse assign?**
 - a. Well
 - b. Sick
 - c. Sicker
 - d. Sickest

4. **The pediatric prioritization process components include the focused assessment, focused history, acuity rating decision and:**
 - a. the pediatric assessment triangle (PAT).
 - b. developmental characteristics.
 - c. head-to-toe assessment.
 - d. life-saving interventions.

5. **A 2-year-old is brought to the emergency department by her father when he found her face down in the pool. She remains unresponsive and is breathing shallowly and slowly. Her color is pale. What is the priority?**
 - a. Administer 100% oxygen
 - b. Immobilize the cervical spine
 - c. Begin bag-mask ventilation
 - d. Insert an oral airway

6. **A 2-year-old has a suspected cervical spinal injury. In order to ensure neutral spinal alignment, padding should be placed under which area?**
 - a. Shoulders
 - b. Head
 - c. Neck
 - d. Waist

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7. **The nurse is preparing to administer a feeding through a nasogastric feeding tube. The tube position was verified by radiograph after insertion 2 hours ago. What is the best way to verify placement before feeding?**
 - a. Instill air and listen over the epigastrium
 - b. Test the pH of the gastric contents
 - c. Observe color of a gastric aspirate sample
 - d. Repeat the radiograph

8. **What is the best method to rapidly administer a 20 mL/kg bolus of 0.9% normal saline to a pediatric patient weighing 8 kg?**
 - a. A 20-mL syringe with a stopcock
 - b. A syringe pump
 - c. A rapid infuser
 - d. A pressure bag

9. **Immediately after intraosseous insertion the nurse assesses the infusion and notes that the fluid is not dripping. How should the nurse respond?**
 - a. Use an infusion pump to deliver the fluids
 - b. Remove the device and insert in another site
 - c. Advance the device and reassess the flow
 - d. Attempt to aspirate bone marrow

10. **A 13-month-old presents to the emergency department with a 2-day history of a low-grade fever, increased work of breathing, and tonight developed a barking cough and inspiratory stridor. What condition does the nurse suspect?**
 - a. Epiglottitis
 - b. Foreign body aspiration
 - c. Tracheomalacia
 - d. Croup

11. **In providing education to a family regarding obtaining baseline peak airway flow for a child with asthma, the nurse will recommend what time of day?**
 - a. At bedtime
 - b. Before exercise
 - c. In the morning
 - d. After meals

12. **The nurse is planning to begin oral rehydration therapy for a 9-month-old with mild dehydration. She provides the caregivers with a glucose and sodium solution and instructs them to administer small amounts:**
 - a. Every 2 to 5 minutes
 - b. Every 10 to 12 minutes
 - c. Every 15 minutes
 - d. Every 30 minutes

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13. Caregivers bring in their 3-week-old neonate and describe nonbilious vomiting after every feeding that is becoming more forceful over the past 24 hours. The last time he vomited the vomitus hit a chair 2 feet away. They say he cries, roots, and sucks vigorously on his pacifier right after vomiting as though still hungry. He is not experiencing any diarrhea. What condition is the most likely cause of these signs and symptoms?
- Intussusception
 - Volvulus
 - Gastroenteritis
 - Pyloric stenosis
14. A neonate is delivered in the emergency department and placed on a radiant warmer. There is no staining of the amniotic fluid. What is the first step in neonatal resuscitation?
- Dry and warm the neonate
 - Suction the mouth and nose
 - Assess for effective breathing
 - Palpate a central pulse rate
15. In discussing the legal care of the adolescent patient, what is a mature minor?
- A minor who lives independently and is legally able to make health decisions
 - A minor who is able to make decisions regarding his or her own sexual or mental health
 - A minor who is able to make decisions regarding healthcare as a parent of his or her own child
 - A minor who lives with a parent or guardian but legally is able to make health decisions
16. Which of the following screening statements/questions is most appropriate in assessing an adolescent for dating violence?
- “What triggers for violence have you experienced from your partner?”
 - “Does your partner feel entitled to sex even if you say ‘no’?”
 - “Tell me about a time when you’ve felt unsafe in your relationship.”
 - “Do you feel if you tried harder to please, your partner will not become violent?”
17. Which sign distinguishes compensated shock from decompensated shock in the pediatric patient?
- Peripheral pulses
 - Blood pressure
 - Capillary refill
 - Level of consciousness
18. A 5-year-old arrives to the emergency department unconscious with a heart rate of 32 beats/minute, weak, thready pulses, and pale, mottled skin. The team has begun bag-mask ventilation with 100% oxygen and chest compressions with no improvement in the heart rate. An intraosseous line is in place. Which of the following interventions is the priority?
- Administration of atropine
 - Transcutaneous pacing
 - Administration of epinephrine
 - Attempt vagal stimulation

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19. A 9-month-old infant pulled himself up onto the hearth of a fireplace. While doing so, he fell forward onto the hot glass doors and sustained deep partial thickness burns to the bilateral palmar aspects of both hands. What is the approximate percentage of total body surface area burned?
- 1%
 - 2%
 - 4%
 - 5%
20. An ambulance arrives with a 13-year-old pedestrian hit by a car. Identified injuries reported by paramedics include multiple abrasions to the head and face, a large, actively bleeding laceration to the forehead, hip pain with the leg externally rotated, and bruising across the chest and abdomen. The patient is in full spinal immobilization and has two intravenous catheters and a nonrebreather oxygen mask in place. Vital signs are BP 110/70 mm Hg, HR 118 beats/minute, RR 24 breaths/minute, and SpO₂ 96%. The Glasgow coma scale score is 15. What is the priority?
- Computed tomography
 - Immobilize the femur
 - A pressure dressing to the forehead
 - Focused assessment with sonography for trauma (FAST)
21. A 15-year-old with a history of schizophrenia is taking risperidone (Risperdal) and lithium (Eskalith). She presents with dystonia, akinesia, a shuffling gait, muscle rigidity, and tremors. What does the nurse suspect is the cause of these signs and symptoms?
- Extrapyramidal symptoms
 - Tardive dyskinesia
 - Neuroleptic malignant syndrome
 - Serotonin syndrome
22. Which of the following burn injury patterns and history indicates suspected child maltreatment?
- A 5-cm (2-inch) linear, superficial partial-thickness burn with irregular edges on the leg of a preschooler, reportedly from touching a curling iron left on a low table
 - A deep partial-thickness, sharply demarcated burn on the buttocks of a toddler, reportedly from the child turning on the hot water while in the bath
 - A 2-cm (0.75 inch) linear partial-thickness burn on the arm of toddler, reportedly from walking and bumping into a lighted cigarette
 - A partial-thickness burn with irregular edges and splash pattern on the chest and right hand of a 7-year-old reportedly spilling a bowl of soup from the microwave
23. A mother presents to the emergency department with a 6-week-old infant with no medical issues after a normal delivery, until yesterday. Mom states he has been eating poorly, vomiting, and that “he’s hard to wake up.” The infant is responsive only to painful stimuli. The anterior fontanel is bulging. He is mildly tachycardic, but otherwise vital signs are normal. What diagnostic evaluation will the nurse expect for this infant?
- Upper gastrointestinal (GI) series
 - Skeletal survey
 - Lumbar puncture
 - Blood gas analysis

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- 24. A malfunctioning oxygen tank explodes near a child's bed in the emergency department, resulting in an extensive burn injury to the child. Four nurses participate in the child's immediate care. Which nurse requires intervention after this critical incident?**
- a. One who refuses to participate in critical incident stress debriefing
 - b. One who readily talks about the incident and how he reacted
 - c. One who admits experiencing burnout and asks for a week leave of absence
 - d. One who is not sleeping because of dreams of the incident
- 25. Two ambulances collide in front of the hospital. The victims include three pediatric victims. Using the JumpSTART triage system, which category assignment will the nurse give to a 2-year-old who is lying on the ground, alert and crying with spontaneous respirations of 36 breaths/minute and present peripheral pulses?**
- a. Green
 - b. Yellow
 - c. Red
 - d. Black