

ADJUSTED INDIVIDUAL  
TOTAL SCORE

63.2%

TIME SPENT

31:53

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Program Type: BSN

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### Focused Review Progress

View missed topics and launch study materials below.

Last accessed: 12/6/2023

Time spent: 03:00:55

## Management of Care

Hematologic disorders: Immunizations for sickle cell anemia:

- Make sure the patient is up to date with pneumonia vaccinations.
- Make sure the patient has a meningococcal vaccine.
- Ensure the patient is up to date with a Haemophilus influenzae type B vaccine.

Epidemiology and Communicable diseases: Nationally notifiable STI's

- Chlamydia is a reported STI to the public health department.
- Syphilis is a reported STI to the public health department.
- Gonorrhea is a reported STI to the public health department.

## Safety and Infection Control

Health promotion of child about bicycle safety

- Wear a bicycle helmet when riding a bike.
- Go with the traffic flow; do not ride on the opposite side of the road.
- Check bike equipment, like brakes and inflated tires, before riding a bike.

Safe administration of medication: restraining methods for an infant

- Use therapeutic holding when holding a child down.
- Use mitten restraint to prevent the child from pulling out tubes and IVs.
- Ensure restraints are not too tight when used on an infant.

## Health Promotion and Maintenance

Planning care for a child with autism

- Decrease environmental stimulation to not over stimulate the patient.
- Encourage age-appropriate play to keep patient occupied.
- Introduce the child to new situations slowly to not overstimulate the patient.

## **Psychosocial Integrity**

Death and Dying: age-appropriate response.

- Preschool children view dying as temporary because of the lack of concept of time.
- School age children start to respond to logical or factual explanations.
- Infants and toddlers can mirror parental emotions.

## **Basic Care and Comfort**

Bowel elimination: child with encopresis

- Have child sit on toilet 5-10 minutes after eating a meal.
- Give child laxatives to help child pass stool.
- Maintain adequate hydration as this can soften and make bowel movements easier to pass.

Complications of infants: Meal planning with a toddler with phenylketonuria

- Provide consults to a dietician for the family to learn what foods to provide to their child.
- Provide a low-protein diet; examples include such as low protein breads and pasta.
- Avoid using artificial sweeteners as they contain aspartame, which is then converted to phenylalanine in the body.

## **Pharmacological and Parenteral therapies**

Cardiovascular disorders: Findings with infant taking furosemide.

- Monitor daily weights to see if the patient is gaining or losing weight while taking this diuretic.
- Monitor intake and outputs; this is important to see how much the patient is intaking and expelling.
- Provide a diet high in potassium, as furosemide is potassium-sparing.

Intravenous therapy: Planning antibiotic therapy for an infant.

- Monitor infant's vital signs.
- Monitor the IV site in an infant.
- Provide education to parents about what to expect with given IV antibiotics.

Miscellaneous pain medications: applying lidocaine and prilocaine cream

- Gently rub the medication into the skin.
- Wash hands before and after applying cream.
- Apply to intact skin one hour prior to the procedure.

## **Reduction of Risk Potential**

Cardiovascular disorders: Care for cardiac catheterization

- Assess insertion site for hematoma or bleeding.
- Monitor intake and output for urine output or dehydration.
- Assess temperature and color of affected extremity.

Diabetes Mellitus: Priority findings of an adolescent with type 1 diabetes

- Hypoglycemia occurs when the blood sugar is less than 60 mg/dL.
- Hyperglycemia occurs when the blood sugar is higher than 250 mg/dL.
- Monitor intake and outputs and daily weights.

Oxygen and inhalation: Tracheostomy care

- Limit suction time to less than 5 seconds for infants and less than 10 seconds for children.
- When suctioning, assist the child in a semi/high fowlers position.
- Obtain baseline vital signs and continuously monitor oxygen saturation levels during the procedure.

Pediatric emergencies: Assess for lead poisoning.

- Provide a low-stimulation environment.
- Assess blood lead test to see results on blood lead levels in the patient.
- Assess for symptoms of lead poisoning in the patient.

## **Physiologic Adaptation**

Acute and Infectious respiratory illnesses: Child with epiglottitis

- Maintain and protect the patient's airway.
- Place patient on droplet isolation precautions for first 24 hours after IV antibiotics initiated.
- Prepare patient for an intubation plus monitor oxygen saturations continuously.

Acute and Infectious respiratory illnesses: Interventions after a tonsillectomy

- Discourage coughing, nose blowing, and throat clearing to protect the surgical site.
- Place patient in a position to facilitate drainage.
- Administer pain medication on a regular schedule.

Blood neoplasms: Child with acute lymphoblastic leukemia

- Provide emotional support to patient.
- Manage adverse effects of medication given to the patient.

- Provide resources and support to patient and their families.

Burns: Nursing interventions

- Maintain airway and ventilation.
- Monitor for manifestations of septic shock.
- Manage pain and prevent infection.

Communicable diseases: Varicella management

- Apply mittens if the child scratches.
- Keep the skin clean and dry to prevent secondary infection.
- Provide calamine lotion for topical relief.

HIV/Aids: education to parents

- Educate parents to encourage child to eat a diet high in calories and protein.
- Educate parents to keep their child's skin dry and clean.
- Educate the parents and the child about transmission of the virus.

Pediatric emergencies: Action for a submersion injury

- Assess and monitor vital signs.
- Administer medications and IV fluids as prescribed.
- Use a calm approach with the child and family.

### **Clinical Judgement**

Dermatitis and Acne: education for a guardian of a toddler

- Educate parents to avoid harsh soaps and use mild soaps.
- Educate parents in keeping toddlers nails cut short and filed smoothly.
- Educate parents to avoid dressing child in wool and synthetic fabrics.

Hematologic disorder: Adolescent experiencing a vaso-occlusive crisis.

- Provide adequate hydration to patient and monitor intakes and outputs.
- Apply warm packs to painful joints.
- Administer oxygen as prescribed if hypoxia is present.