

CHUKA



UNIVERSITY

**UNIVERSITY EXAMINATIONS**

**SECOND YEAR EXAMINATION FOR THE AWARD OF BACHELOR  
OF SCIENCE IN NURSING**

**NURS 263: PEDIATRIC AND CHILDHEALTH NURSING**

**STREAMS: BSC (NURS) Y2S2**

**TIME: 2 HOURS**

**DAY/DATE: MONDAY 06/04/2020**

**2.30 P.M. – 4.30 P.M.**

**INSTRUCTIONS:**

1. Do not write anything on the question paper.
2. Mobile phones and any other reference materials are NOT allowed in the examination room.
3. The paper has three sections. Answer ALL the questions.
4. All your answers for Section I (MCQs) should be on one page.
5. Number ALL your answers and indicate the order of appearance in the space provided in the cover page of the examination answer booklet.
6. Write your answers legibly and use your time wisely

**SECTION 1: MULTIPLE CHOICE QUESTIONS (20 MARKS)**

1. A 10-month-old child has been assessed for pain and has received a score of 2 on the Neonatal Infant Pain Scale (NIPS) tool. What does this indicate about his pain level?
  - a) He is not in pain.
  - b) He is in mild pain
  - c) He is in moderate pain.
  - d) He is in severe pain
2. A cleft lip predisposes an infant to infections primarily because of:
  - a) Poor nutrition from disturbed feeding
  - b) Poor circulation to the defective area
  - c) Waste products that accumulate along the defect
  - d) Mouth breathing, which dries the oropharyngeal mucous membranes

3. In addition to the symptoms of pallor, loss of appetite, tiredness, the nurse would expect an infant with acute non lymphoid leukemia to demonstrate:
  - a) Depressed bone marrow
  - b) Oliguria
  - c) Few stem cells
  - d) Difficulty swallowing
  
4. A disorder, following a streptococcal infection, characterized by swollen joints, fever, and the possibility of endocarditis and death is:
  - a) Tetanus
  - b) Measles
  - c) Rheumatic fever
  - d) Whooping cough
  
5. When vomiting is uncontrolled in an infant, the nurse should observe for signs of:
  - a) Tetany
  - b) Acidosis
  - c) Alkalosis
  - d) Hypersensitivity
  
6. A pediatric nurse advises a parent how to best convey the circumstances surrounding the sudden death of an infant to a four-year-old sibling. The nurse anticipates that the sibling:
  - a) May feel guilty about the infant's death.
  - b) May mistrust the parent.
  - c) Understands the permanence of death.
  - d) Will role-play the infant's death
  
7. At which stage of development are children apt to believe in the reversibility of death?
  - a) School age.
  - b) Toddler.
  - c) Adolescent.
  - d) Preschool age.

8. A one-month-old female infant, who has developmental dysplasia of the hip, is placed in a hip spica cast. The infant's mother expresses the desire to continue breastfeeding. The pediatric nurse's best response is:
- 'After breastfeeding, hold your baby upright for 45 minutes.'
  - 'Due to the weight of the cast, breastfeeding is not encouraged. I recommend that you bottle-feed expressed breast milk so your baby will get the benefits of the breast milk.'
  - 'Feed your baby 2 oz of formula to decrease her hunger frustration, and then place her upright on your lap with her legs straddling your leg.'
  - 'To breastfeed, hold your baby under your arm, with her facing you and her legs extended behind your back.'
9. A pediatric nurse instructs parents who are concerned about the spread of illness at their children's daycare centers to inquire about the facilities':
- CPR training for staff.
  - Infection control practices.
  - Reported cases of diarrhea during the previous year.
  - Staff-to-child ratios
10. In the newborn assessment, which one is the most important stage?
- First examination to evaluate the newborn adaptation to extra uterine life.
  - The golden first minute
  - Review examination for evaluation of condition
  - Monitoring of growth and development
11. An infant is admitted to the pediatric unit for surgical repair of hypospadias. The infant's urine output is 7 ml/hour. What nursing action is most appropriate?
- Notify the physician immediately.
  - Prepare to administer I.V. fluids.
  - Offer the infant formula every hour.
  - Continue to monitor urine output

12. In the 1st week of life, the weight of a normal child may decrease by:
- a) 5-10%
  - b) 5%
  - c) 8%
  - d) 8-10%
13. Which of the following is a major symptoms of integrated management of childhood illness (IMCI).
- a) Parlor
  - b) Malnutrition
  - c) Ear problem
  - d) Anemia
14. A mentally retarded school age child with the mental age of a toddler would be having an IQ of
- a) <20
  - b) 20 – 40
  - c) 35 -55
  - d) 50-70
15. The normal resting respiratory range for a 3 year old child is:
- a) 30-50
  - b) 20-40
  - c) 20- 30
  - d) 16-22
16. A child has sustained third-degree burns of the hands, face, and chest. Which nursing diagnosis takes priority?
- a) Ineffective airway clearance related to edema
  - b) Disturbed body image related to physical appearance
  - c) Impaired urinary elimination related to fluid loss
  - d) Risk for infection related to epidermal disruption

17. A three year old preschooler has been hospitalized with nephrotic syndrome. The best way to detect fluid retention would be to:
- a) Have the child urinate in a bedpan
  - b) Measure the child's abdominal girth daily
  - c) Weight the child at the same time every day
  - d) Test the child's urine for hematuria and proteinuria
18. Which of the following children is always a priority
- a) Two year old with malnutrition
  - b) Three year old with capillary refill of 3 seconds
  - c) A normal one month old baby
  - d) Two year old with hydrocephalus
19. Which inflammatory bowel disease is said to affect mucosa and the submucosa of the colon?
- a) Chronn's disease
  - b) Meckel's diverticulum
  - c) Ulcerative colitis
  - d) Necrotizing enterocolitis
20. The elements of past health history that are taken in children but not in adults include:
- a) Prenatal, drug allergies, bonding, neonatal
  - b) Prenatal, natal, weight change, bonding
  - b) Prenatal, natal, neonatal, bonding
  - c) Weight change, neonatal, pregnancy, drug allergies

**SECTION 2: Short answer questions (40 marks)**

- 1. State six(6) clinical presentation of a child with hydrocephalus (6marks)
- 2. Outline seven (7) Rights of the children as per United Nation's Declaration (7 marks)
- 3. List eight(8) signs of Possible serious bacterial infection in neonates (4 marks)
- 4. Formulate five (5)Nursing Diagnoses of Esophageal Atresia with Tracheoesophageal Fistula (5marks)
- 5. Describe three(3) principles of family centered care (FCC) (6 marks)
- 6. Explain three(3) Acyanotic disorders (6 marks)
- 7. State six(6) clinical manifestations of hypertrophic pyloric stenosis (6 marks)

**SECTION 3: Long answer questions (40 marks)**

1. Joseph a 5-months old baby is admitted to the Paediatric ward with history of cough and difficult in breathing.
    - a) Define pneumonia (1 mark)
    - b) Outline the assessment you are likely to carry out on him (5 marks)
    - c) Describe his management for the first 24 hours (13 marks)
    - d) List four (4) Complications of Pneumonia (2 marks)
  2. Childhood illness and hospitalization affects the entire family.
    - a) Define atraumatic care (2 marks)
    - b) Describe (4) factors that affect parents reaction to childhood illness (8 marks)
    - c) Explain five (5) strategies a nurse can use to minimize the stresses of the child's hospitalization on the child and the family? (10 marks)
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