

Test Bank for Samour and King's Pediatric Nutrition in Clinical Care 5th Konek

Multiple Choice

1. A Nutrition screening:

- A. Is a simple quick tool that identifies children who are *At Risk of malnutrition, that does not require formal nutrition training to complete.*
- B. Identifies nutrition related problems / diagnosis through the gathering, verifying and interpretation of information, their cause and significance.

Answer: A

2. A Nutrition assessment:

- A. Is a simple quick tool that Identifies children who are *At Risk of malnutrition, that does not require formal nutrition training to complete.*
- B. Identifies nutrition related problems / diagnosis through the gathering, verifying and interpretation of information, their cause and significance.

Answer: B

3. Anthropometric data collection:

- A. Should be done upon admission or first visit.
- B. Should include height/length, weight and head circumference for children under 2 years of age.
- C. Should be repeated at specified intervals and/or all visits.
- D. Should be plotted on age appropriate growth charts.
- E. All of these

Answer: E

4. Key elements of a child's diet history include:

- A. kind and amount of food-beverages-formula-human milk eaten
- B. methods of food-formula preparation
- C. feeding history/introduction of solids
- D. meal/snack frequency/duration
- E. use/skill with eating utensils/cup
- F. All of these

Answer: F

5. The gold stand for Energy calculation in children is:

- A. The World Health Organization BEE equation
- B. The Institute of Medicine TEE equation
- C. Measured resting energy via indirect calorimetry
- D. Schofield BEE equation

Answer: C

6. Nutrition focused physical examination: clinical signs of a malnourished child include

- A. Weight loss, weight gain, sedentary behavior
- B. Below normal weight gain velocity, pluckable hair, petechiae
- C. Stunting, heart defect, elevated HgA1C
- D. Test results such as gastric emptying study, muscle wasting, pale conjunctiva

Answer: B

7. Subjective Global Assessment (SGA) has been modified and validated for use in some pediatric populations. It is call the Pediatric Subjective Global Nutrition Assessment. It includes which of the following:

- A. information provided by patient/family about nutritional status.
- B. observations made by the clinicians.
- C. results in evaluation using clinical judgment.
- D. All of these

Answer: D

Multiple Selection

8. Feeding difficulties can present in a variety of ways. Which of the following could be a sign/symptom of feeding difficulties?

- A. prolonged meal times
- B. disruptive and stressful mealtimes
- C. cheerful participation in mealtimes
- D. need for distraction to allow for intake

Answer: A, B, and D

Multiple Choice

9. Mid-Upper Arm Circumference (MUAC) is used for the assessment of nutritional status for the following reasons:

- A. It is a good predictor of mortality.
- B. The MUAC measurement requires little equipment.
- C. It is easy to perform even on the most debilitated individuals.
- D. Trained individuals in the community setting can perform this measure.
- E. All of these

Answer: E

10. Serum Albumen levels are not used as a routine test of nutritional status in pediatrics because it is affected by many factors including:

- A. liver disease
- B. nephrosis
- C. thermal injury
- D. dehydration
- E. sepsis
- F. trauma
- G. All of these

Answer: G

11. Measurement of _____ may help determine whether a low serum protein level is caused by stress or nutritional deficiency.

- A. transferrin
- B. albumin
- C. C-reactive protein
- D. Interleukin 10

Answer: C