

Test Bank for Pediatric Nursing Care - A Concept-Based Approach 2nd Linnard- Palmer

Chapter 2

1. Which is reviewed when conducting an interval history for a patient who is 13 years of age?

- A. SSHADESS screen
- B. SCARED for anxiety
- C. Pediatric symptom checklist
- D. Ages and Stages Questionnaires

[Answer: A: SSHADESS screen]

[Rationale: For pediatric patients older than 12 years of age, the SSHADESS screen is appropriate to review when conducting an interval history. The SCARED for anxiety and pediatric symptom checklist is appropriate for a pediatric patient between the ages of 7 and 12 years. The Ages and Stages Questionnaires are reviewed when conducting an interval history for a pediatric patient who is 6 years of age or younger.]

2. When conducting an interval social history, which information is collected from the pediatric patient and family?

- A. Use of media
- B. Family structure
- C. Frequency of meals
- D. Prescription medications

[Answer: A: Use of media]

[Rationale: During the interval social history, information related to the use of media and the Internet is collected. The family structure is collected during the interval family history.]

Frequency of meals is collected during the interval nutrition history. Use of prescription medications is assessed during the interval medication history.]

3. Which age does the practitioner ask a pediatric patient about drug and alcohol use?

- A. 8
- B. 9
- C. 10
- D. 11

[Answer: D: 11]

[Rationale: Children older than 10 years of age should be asked if they or their friends tried alcohol or drugs. The practitioner can use the brief alcohol/drug-screening tool at each episodic visit.]

4. Which question does the practitioner ask when conducting an interval history to collect data regarding the chest and lungs for a pediatric patient?

- A. “Has your child ever fainted?”
- B. “Does your child have any rashes?”
- C. “Has your child ever had a nosebleed?”
- D. “Does your child have difficulty swallowing?”

[Answer: A: “Has your child ever fainted?”]

[Rationale: When collecting data for the chest and lungs during an interval history, the pediatric patient is assessed for syncope; therefore, it is appropriate to ask if the child has ever fainted. The practitioner asks questions about rashes when collecting data for the musculoskeletal system

during an interval history. Questions regarding nosebleeds and swallowing are appropriate when collecting data for the head and neck.]

5. Which question does the practitioner ask when collecting data regarding the abdomen during the interval history for a female school-age patient who has secondary sex characteristics?

- A. “Has your child started menstruating?”
- B. “Does your child have any darkened skin?”
- C. “Does your child experience any stiffness?”
- D. “Has your child ever experienced difficulty swallowing?”

[Answer: A: “Has your child started menstruating?”]

[Rationale: When collecting interval history data for the abdomen, it is appropriate for the practitioner to ask if the female pediatric patient has started menstruating when the school-age patient has secondary sex characteristics. Data related to the skin and stiffness is appropriate when collecting interval history data for the musculoskeletal system. Difficulty swallowing is assessed when collecting interval history data for the head and neck.]

6. What is the purpose of conducting an interval history?

[Sample Answer: Although comprehensive history is used to establish initial health promotion plans, analysis of data collected during interval history is often to continue established health promotion plan; identify new healthcare problems and establish new health promotion; plan health promotion strategies based on new data obtained in the interval history; identify treatment plan to resolve presenting problems; and change health promotion plan to meet immediate and future needs of child and family (e.g., child has new diagnosis of chronic illness).]

7. What actions are completed prior to beginning data collection for an interval history?

[Sample Answer: Prior to beginning data collection for interval history, review comprehensive history and any prior interval histories available on medical record.]

8. What is the major focus when conducting an interval history with a pediatric patient?

[Sample Answer: The major focus for interval history for each pediatric patient should include questions concerning eating, sleeping, bladder and bowel patterns, and any unusual behaviors or changes in behaviors. Additional questions are then age related.]

9. The practitioner is conducting an interval history for a pediatric patient whose parent states, “My child has a chronic cough.” What question should the practitioner ask to collect more information?

[Sample Answer: To collect more information about a chronic cough the practitioner will ask, “What can you tell me about your child’s chronic cough?”]

10. What action does the practitioner implement after completing the interval history for a pediatric patient?

[Sample Answer: After completing interval history and physical examination, compare findings in comprehensive history to data obtained in interval history. If no significant changes found in interval history, the practitioner will advise the parent and/or infant/child to continue to follow established health promotion plan. If significant changes are found in interval history, the practitioner will revise the health promotion plan. If significant changes are found in interval history in relation to the child’s health, the practitioner will establish a new health promotion plan with the patient and family.]