



CPNP-AC Peds Nurse Exam Prep

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Practice Questions

Try all 30 first, then check the answer key at the back.

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1. A 2-year-old presents with sudden onset of stridor and barking cough. Which physical assessment finding is most important to document immediately?

- A. Temperature
- B. Capillary refill
- C. Level of consciousness
- D. Work of breathing and respiratory rate

2. When assessing a 14-year-old with new onset seizures, which component of the family history is most relevant?

- A. Diabetes
- B. Autoimmune conditions
- C. History of genetic disorders or epilepsy
- D. Cardiovascular disease

3. A 5-month-old with bronchopulmonary dysplasia on home oxygen presents with increased work of breathing. What is the most important initial assessment?

- A. Immunization status
- B. Current oxygen requirement compared to baseline
- C. Weight gain since last visit
- D. Feeding schedule

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4. When assessing a 16-year-old following a motor vehicle accident, which physical examination component takes priority?

- A. Cervical spine stabilization and neurological status
- B. Extremity range of motion
- C. Abdominal tenderness
- D. Facial injuries



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5. During assessment of a 3-year-old with suspected sepsis, which vital sign trend is most concerning?

- A. Mild fever
- B. Slightly elevated respiratory rate
- C. Normal heart rate with hypertension
- D. Tachycardia with normal blood pressure

6. Which assessment finding is most concerning in an 8-year-old with diabetic ketoacidosis?

- A. Polydipsia
- B. Abdominal pain
- C. Altered mental status
- D. Polyuria

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7. When assessing a 6-month-old with congenital heart disease, which finding requires immediate intervention?

- A. Weight gain plateau
- B. Central cyanosis with respiratory distress
- C. Mild tachypnea
- D. Feeding difficulties

8. Which assessment finding is most important in a 4-year-old with suspected intussusception?

- A. Intermittent severe abdominal pain with lethargy
- B. Low-grade fever
- C. Decreased appetite
- D. Mild dehydration

9. In assessing a 12-year-old with acute asthma exacerbation, which finding indicates need for immediate intervention?

- A. Occasional wheezing
- B. Mild tachypnea
- C. Cough
- D. Silent chest on auscultation



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10. When assessing a 2-month-old with fever, which finding warrants immediate sepsis workup?

- A. Occasional cough
- B. Fussy behavior
- C. Temperature of 38.5°C (101.3°F) with poor feeding
- D. Mild congestion

11. Which assessment finding is most concerning in a 5-year-old post-tonsillectomy patient?

- A. Low-grade fever
- B. Fresh bright red blood from mouth or nose
- C. Mild sore throat
- D. Decreased oral intake

12. When assessing a 15-year-old with sickle cell crisis, which finding indicates severe disease?

- A. Chest pain with decreased oxygen saturation
- B. Joint pain
- C. Mild fever
- D. Fatigue

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13. Which assessment finding requires immediate intervention in a 3-year-old with pneumonia?

- A. Decreased appetite
- B. Occasional cough
- C. Low-grade fever
- D. Nasal flaring with intercostal retractions



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14. In assessing a 7-year-old with new onset type 1 diabetes, which finding requires immediate attention?

- A. Frequent urination
- B. Weight loss
- C. Fruity breath with confusion
- D. Increased thirst

15. When assessing a 10-year-old with severe head injury, which pupillary finding is most concerning?

- A. Tear production
- B. Unilateral pupil dilation
- C. Bilateral reactive pupils
- D. Mild photophobia

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16. Which assessment finding is most concerning in a 6-year-old on mechanical ventilation?

- A. Decreasing tidal volumes with increasing peak pressures
- B. Occasional cough
- C. Clear secretions
- D. Stable oxygen requirements

17. When assessing a 4-month-old with bronchiolitis, which finding indicates need for hospitalization?

- A. Occasional cough
- B. Clear rhinorrhea
- C. Mild fever
- D. Respiratory rate >70 with poor feeding

18. Which assessment finding is most concerning in an 8-year-old post-appendectomy patient?

- A. Decreased appetite
- B. Low-grade fever
- C. Severe abdominal pain with rigid abdomen
- D. Mild incisional pain



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19. In assessing a 13-year-old with status epilepticus, which finding requires immediate intervention?

- A. Mild confusion
- B. Duration of seizure activity >5 minutes
- C. Post-ictal drowsiness
- D. Muscle soreness

20. When assessing a 1-year-old with suspected child abuse, which documentation is most critical?

- A. Detailed description and photographs of injuries
- B. Growth chart
- C. Immunization record
- D. Developmental milestones

21. A 3-year-old presents with fever, painful joints, salmon-colored rash that appears with fever spikes, and lymphadenopathy. Which diagnosis should be highest on the differential?

- A. Kawasaki Disease
- B. Acute Lymphoblastic Leukemia
- C. Viral Exanthem
- D. Systemic Juvenile Idiopathic Arthritis

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22. A 2-month-old presents with projectile vomiting after feeds, hungry after vomiting, and a palpable olive-shaped mass in the epigastrium. What is the most likely diagnosis?

- A. Gastroenteritis
- B. Malrotation
- C. Pyloric Stenosis
- D. Gastroesophageal Reflux Disease



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23. A 6-year-old presents with sudden onset of left-sided weakness, facial droop, and slurred speech. Recent history includes varicella infection 3 months ago. What is the most likely diagnosis?

- A. Todd's Paralysis
- B. Acute Stroke
- C. Bell's Palsy
- D. Complex Migraine

24. A 14-year-old athlete presents with acute knee pain after hearing a 'pop' during a soccer game. Physical exam reveals positive anterior drawer test and effusion. What is the most likely diagnosis?

- A. Anterior Cruciate Ligament Tear
- B. Meniscal Injury
- C. Patellar Dislocation
- D. Tibial Plateau Fracture

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25. A 5-year-old presents with fever, strawberry tongue, cervical lymphadenopathy, and desquamating rash on hands and feet. What is the most likely diagnosis?

- A. Scarlet Fever
- B. Stevens-Johnson Syndrome
- C. Toxic Shock Syndrome
- D. Kawasaki Disease

26. A 12-year-old presents with fever, severe headache, photophobia, and neck stiffness. Recent history includes sinusitis. What diagnosis needs to be ruled out first?

- A. Viral Meningitis
- B. Tension Headache
- C. Bacterial Meningitis
- D. Migraine Headache

27. A 4-month-old presents with poor feeding, tachypnea, and diaphoresis during feeds. Physical exam reveals a harsh systolic murmur. What is the most likely diagnosis?

- A. Atrial Septal Defect
- B. Ventricular Septal Defect
- C. Patent Ductus Arteriosus
- D. Tetralogy of Fallot



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28. A 16-year-old presents with acute chest pain, shortness of breath, and anxiety following a long car trip. What diagnosis should be considered first?

- A. Pulmonary Embolism
- B. Panic Attack
- C. Costochondritis
- D. Pneumothorax

29. A 7-year-old presents with fever, right lower quadrant pain, anorexia, and migration of pain from periumbilical area. What is the most likely diagnosis?

- A. Gastroenteritis
- B. Mesenteric Adenitis
- C. Ovarian Cyst
- D. Acute Appendicitis

30. A 3-month-old presents with poor feeding, lethargy, and temperature instability. Labs show hyperammonemia and metabolic acidosis. What diagnosis should be considered?

- A. Viral Infection
- B. Formula Intolerance
- C. Inborn Error of Metabolism
- D. Sepsis



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Answer Key & Explanations

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1. D — Work of breathing and respiratory rate

In a case suggesting croup, immediate assessment of work of breathing and respiratory rate is crucial as it indicates severity and need for urgent intervention.

2. C — History of genetic disorders or epilepsy

Family history of genetic disorders or epilepsy is crucial in evaluating new onset seizures as many seizure disorders have genetic components.

3. B — Current oxygen requirement compared to baseline

In technology-dependent patients, comparing current oxygen needs to baseline helps determine acuity and deterioration.

4. A — Cervical spine stabilization and neurological status

In trauma cases, cervical spine protection and neurological assessment are priority to prevent further injury and assess severity.

5. D — Tachycardia with normal blood pressure

Tachycardia with normal blood pressure can be an early sign of compensated shock in pediatric sepsis.

6. C — Altered mental status

Altered mental status in DKA can indicate cerebral edema, a life-threatening complication requiring immediate intervention.

7. B — Central cyanosis with respiratory distress

Central cyanosis with respiratory distress indicates severe cardiovascular compromise requiring immediate intervention.

8. A — Intermittent severe abdominal pain with lethargy

Intermittent severe abdominal pain with lethargy is characteristic of intussusception and helps differentiate it from other conditions.

9. D — Silent chest on auscultation

Silent chest in asthma indicates severe bronchospasm and impending respiratory failure requiring immediate intervention.

10. C — Temperature of 38.5°C (101.3°F) with poor feeding

In infants under 3 months, fever $\geq 38.0^{\circ}\text{C}$ requires full sepsis evaluation due to risk of serious bacterial infection.

11. B — Fresh bright red blood from mouth or nose

Fresh bright red blood indicates active hemorrhage, a serious post-tonsillectomy complication requiring immediate attention.



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12. A — Chest pain with decreased oxygen saturation

Chest pain with decreased oxygen saturation suggests acute chest syndrome, a serious complication of sickle cell disease.

13. D — Nasal flaring with intercostal retractions

Nasal flaring with intercostal retractions indicates significant respiratory distress requiring immediate intervention.

14. C — Fruity breath with confusion

Fruity breath with confusion suggests diabetic ketoacidosis, requiring immediate medical intervention.

15. B — Unilateral pupil dilation

Unilateral pupil dilation can indicate increasing intracranial pressure or brain herniation requiring immediate intervention.

16. A — Decreasing tidal volumes with increasing peak pressures

Decreasing tidal volumes with increasing peak pressures suggest worsening lung compliance or airway obstruction.

17. D — Respiratory rate >70 with poor feeding

Respiratory rate >70 with poor feeding indicates significant respiratory distress requiring hospitalization.

18. C — Severe abdominal pain with rigid abdomen

Severe abdominal pain with rigid abdomen may indicate postoperative complications like peritonitis requiring immediate evaluation.

19. B — Duration of seizure activity >5 minutes

Seizure activity lasting >5 minutes meets criteria for status epilepticus and requires immediate medical intervention.

20. A — Detailed description and photographs of injuries

Detailed documentation and photographs of injuries are crucial for legal purposes and appropriate intervention in suspected abuse cases.

21. D — Systemic Juvenile Idiopathic Arthritis

The combination of fever, arthritis, evanescent salmon-colored rash that coincides with fever spikes, and lymphadenopathy are classic findings of systemic JIA (Still's disease).

22. C — Pyloric Stenosis

The classic triad of projectile vomiting, persistent hunger, and a palpable olive-shaped mass in the epigastrium strongly suggests pyloric stenosis in an infant of typical age.

23. B — Acute Stroke

Acute onset of unilateral weakness with facial involvement and speech changes suggests stroke, particularly with recent varicella infection as a risk factor for post-varicella arteriopathy.

24. A — Anterior Cruciate Ligament Tear

The mechanism of injury, audible pop, and positive anterior drawer test are classic findings for an ACL tear, common in adolescent athletes.



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25. D — Kawasaki Disease

These findings represent classic diagnostic criteria for Kawasaki Disease, including fever, strawberry tongue, lymphadenopathy, and characteristic desquamation.

26. C — Bacterial Meningitis

Given the presentation and recent sinusitis (potential source), bacterial meningitis must be ruled out first due to its life-threatening nature.

27. B — Ventricular Septal Defect

The combination of feeding difficulties, tachypnea, diaphoresis with feeds, and harsh systolic murmur suggests VSD as the most likely congenital heart defect.

28. A — Pulmonary Embolism

The combination of symptoms with recent prolonged immobility (car trip) raises concern for pulmonary embolism, which must be considered first due to its severity.

29. D — Acute Appendicitis

The classic presentation of migratory pain from periumbilical to right lower quadrant, along with fever and anorexia, strongly suggests acute appendicitis.

30. C — Inborn Error of Metabolism

The combination of poor feeding, lethargy, hyperammonemia, and metabolic acidosis in an infant suggests an inborn error of metabolism.



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