

# Chapter 32

Review

1. How does a child's anatomy differ from an adult's anatomy?

A. The child's trachea is more rigid

B. The tongue is proportionately smaller

C. The epiglottis is less floppy in a child

D. The child's head is proportionately larger

**Answer: D**

**Rationale:** There are several important anatomic differences between children and adults. A child's head—specifically the occiput—is proportionately larger. Their tongue and epiglottis are also proportionately larger, and the epiglottis is floppier and more omega-shaped. The child's airway is narrower at all levels, and the trachea is less rigid and easily collapsible.

1. How does a child's anatomy differ from an adult's anatomy?

A. The child's trachea is more rigid

**Rationale:** A child's trachea is less rigid, narrower, and more anterior than an adult's.

B. The tongue is proportionately smaller

**Rationale:** A child's tongue is proportionally larger than an adult's.

1. How does a child's anatomy differ from an adult's anatomy?

C. The epiglottis is less floppy in a child

**Rationale:** A child's epiglottis is floppier and shaped differently than an adult's.

D. The child's head is proportionately larger

**Rationale:** Correct answer

2. When a small child falls from a significant height, his or her \_\_\_\_\_ MOST often strikes the ground first.

A. head

B. back

C. feet

D. side

**Answer: A**

**Rationale:** Compared to adults, children have proportionately larger heads. When they fall from a significant height, gravity usually takes them headfirst. This is why head trauma is the most common cause of traumatic death in children.

2. When a small child falls from a significant height, his or her \_\_\_\_\_ MOST often strikes the ground first.

A. Head

**Rationale:** Correct answer

B. Back

**Rationale:** The head is heavier, and gravity tends to tilt the head in a downward direction.

2. When a small child falls from a significant height, his or her \_\_\_\_\_ MOST often strikes the ground first.

C. Feet

**Rationale:** Adults will attempt to land feet first.

D. Side

**Rationale:** The head is heavier, and gravity tends to tilt the head in a downward direction.

3. When assessing a conscious and alert 9-year-old child, you should:
- A. isolate the child from his or her parent.
  - B. allow the child to answer your questions.
  - C. obtain all of your information from the parent.
  - D. avoid placing yourself below the child's eye level.

## **Answer: B**

**Rationale:** A 9-year-old child is capable of answering questions. By allowing a child to answer your questions, you can gain his or her trust and build a good rapport, which facilitates further assessment and treatment. Do not isolate the child from his or her parent, yet do not allow the parent to do all the talking, unless the child is unable to communicate. When assessing any patient, you should place yourself at or slightly below the patient's eye level. This position is less intimidating and helps to minimize patient anxiety.

3. When assessing a conscious and alert 9-year-old child, you should:

A. isolate the child from his or her parent.

**Rationale:** Do not isolate a child from his or her parents.

B. allow the child to answer your questions.

**Rationale:** Correct answer

3. When assessing a conscious and alert 9-year-old child, you should:

C. obtain all of your information from the parent.

**Rationale:** Some information from parents is useful, but allow the child to speak.

D. avoid placing yourself below the child's eye level.

**Rationale:** Never tower over a child, instead maintain yourself at/or below eye level.

4. The purpose of a shunt is to:
- A. minimize pressure within the skull.
  - B. reroute blood away from the lungs.
  - C. instill food directly into the stomach.
  - D. drain excess fluid from the peritoneum.

**Answer: A**

**Rationale:** A ventriculoperitoneal (VP) shunt—simply called a “shunt”—is a tube that extends from the ventricles (cavities) of the brain to the peritoneal cavity. VP shunts are used to drain excess fluid from the brain, thus preventing increased pressure within the skull.

#### 4. The purpose of a shunt is to:

A. minimize pressure within the skull.

**Rationale:** Correct answer

B. reroute blood away from the lungs.

**Rationale:** The shunt is connected from the brain to the abdomen.

C. instill food directly into the stomach.

**Rationale:** The shunt drains excess cerebrospinal fluid from the brain.

D. drain excess fluid from the peritoneum.

**Rationale:** The shunt drains excess cerebrospinal fluid from the brain.

5. Which of the following statements regarding febrile seizures is correct?

- A. Febrile seizures usually indicate a serious underlying condition, such as meningitis.
- B. Most febrile seizures occur in children between the ages of 2 months and 2 years of age.
- C. Febrile seizures are rarely associated with tonic-clonic activity, but last for more than 15 minutes.
- D. Febrile seizures usually last less than 15 minutes and often do not have a postictal phase.

**Answer: D**

**Rationale:** Febrile seizures are the most common seizures in children; they are common in children between the ages of 6 months and 6 years of age. Most pediatric seizures are due to fever alone—hence the name “febrile” seizure. However, seizures and fever may indicate a more serious underlying condition, such as meningitis. Febrile seizures are characterized by generalized tonic-clonic activity and last less than 15 minutes; if a postictal phase occurs, it is generally very short.

5. Which of the following statements regarding febrile seizures is correct?

A. Febrile seizures usually indicate a serious underlying condition, such as meningitis.

**Rationale:** Most febrile seizures are caused by fever, but a fever and seizures may be an indication of a serious underlying condition.

B. Most febrile seizures occur in children between the ages of 2 months and 2 years of age.

**Rationale:** Most febrile seizures occur in children between the ages of 6 months and 6 years.

5. Which of the following statements regarding febrile seizures is correct?

C. Febrile seizures are rarely associated with tonic-clonic activity, but last for more than 15 minutes.

**Rationale:** Febrile seizures last less than 15 minutes.

D. Febrile seizures usually last less than 15 minutes and often do not have a postictal phase.

**Rationale:** Correct answer

6. You respond to a sick child late at night. The child appears very ill, has a high fever, and is drooling. He is sitting in a tripod position, struggling to breathe. You should suspect:
- A. croup.
  - B. pneumonia.
  - C. epiglottitis.
  - D. severe asthma.

**Answer: C**

**Rationale:** This child has all the classic signs of epiglottitis: high fever, drooling, and severe respiratory distress. Epiglottitis is a potentially life-threatening bacterial infection that causes the epiglottis to swell rapidly and potentially obstruct the airway.

6. You respond to a sick child late at night. The child appears very ill, has a high fever, and is drooling. He is sitting in a tripod position, struggling to breathe. You should suspect:

A. croup.

**Rationale:** This is a viral disease characterized by edema of the upper airways, a barking cough, and stridor.

B. pneumonia.

**Rationale:** This is an inflammation of the lungs caused by bacteria, viruses, fungi, and other organisms.

6. You respond to a sick child late at night. The child appears very ill, has a high fever, and is drooling. He is sitting in a tripod position, struggling to breathe. You should suspect:

C. epiglottitis.

**Rationale:** Correct answer

D. severe asthma.

**Rationale:** This is a lower airway condition resulting in intermittent wheezing and excess mucus production.

7. Treatment for a semiconscious child who swallowed an unknown quantity of pills includes:

- A. administering 1 g/kg of activated charcoal and rapidly transporting.
- B. monitoring the child for vomiting, administering oxygen, and transporting.
- C. positioning the child on his left side, elevating his legs 6", and transporting.
- D. contacting medical control and requesting permission to induce vomiting.

**Answer: B**

**Rationale:** If a semi- or unconscious child has ingested pills, poisons, or any other type of harmful substance, closely observe him or her for vomiting, give high-flow oxygen (assist ventilations if necessary), and rapidly transport to the emergency department. Do not give activated charcoal to any patient who is not conscious and alert enough to swallow. Induction of vomiting is not indicated for *anyone*—regardless of age.

7. Treatment for a semiconscious child who swallowed an unknown quantity of pills includes:

A. administering 1 g/kg of activated charcoal and rapidly transporting.

**Rationale:** Do not give anything by mouth to an individual who is not conscious and alert enough to swallow.

B. monitoring the child for vomiting, administering oxygen, and transporting.

**Rationale:** Correct answer

## 7. Treatment for a semiconscious child who swallowed an unknown quantity of pills includes:

- C. positioning the child on his left side, elevating his legs 6", and transporting.

**Rationale:** Placing the child in the recovery position is acceptable if vomiting is possible, but the patient's legs should remain flat.

- D. contacting medical control and requesting permission to induce vomiting.

**Rationale:** Inducing vomiting is not indicated for anyone at any age.

8. When using the mnemonic CHILD ABUSE to assess a child for signs of abuse, you should recall that the “D” stands for:

- A. delay in seeking care.
- B. divorced parents.
- C. dirty appearance.
- D. disorganized speech.

## **Answer: A**

**Rationale:** The mnemonic CHILD ABUSE stands for Consistency of the injury with the child's developmental age, History inconsistent with the injury, Inappropriate parental concerns, Lack of supervision, Delay in seeking care, Affect, Bruises of varying stages, Unusual injury patterns, Suspicious circumstances, and Environmental clues. A delay in care may happen when the parent or caregiver does not want the abuse noted by other people.

8. When using the mnemonic CHILD ABUSE to assess a child for signs of abuse, you should recall that the “D” stands for:

A. delay in seeking care.

**Rationale:** Correct answer

B. divorced parents.

**Rationale:** Divorce may put the child at greater risk, but does not indicate the child is being abused.

8. When using the mnemonic CHILD ABUSE to assess a child for signs of abuse, you should recall that the “D” stands for:

C. dirty appearance.

**Rationale:** This is something providers should be aware of. A potential for abuse exists, but this does not indicate that the child is being abused.

D. disorganized speech.

**Rationale:** This may indicate a learning disability or handicap.

9. A 4-year-old girl fell from a second-story balcony and landed on her head. She is unresponsive; has slow, irregular breathing; a large hematoma to the top of her head; and is bleeding from her nose. You should:
  - A. immediately perform a full-body scan to detect other injuries, administer high-flow oxygen, and transport at once.
  - B. apply a pediatric-sized cervical collar, administer high-flow oxygen via pediatric nonrebreathing mask, and prepare for immediate transport.

9. A 4-year-old girl fell from a second-story balcony and landed on her head. She is unresponsive; has slow, irregular breathing; a large hematoma to the top of her head; and is bleeding from her nose. You should:
- C. manually stabilize her head, open her airway with the jaw-thrust maneuver, insert an airway adjunct, and begin assisting her ventilations with a bag-mask device.
  - D. suction her airway for up to 10 seconds, insert a nasopharyngeal airway, apply a pediatric-sized cervical collar, and administer oxygen via pediatric nonrebreathing mask.

## Answer: C

**Rationale:** This child has a severe head injury and is not breathing adequately. You must manually stabilize her head to protect her spine, open her airway with the jaw-thrust maneuver, suction her airway if needed, insert an oropharyngeal airway, and assist her ventilations with a bag-mask device. The full-body scan is performed *after* you have performed a primary assessment to detect and correct any life threats. The nasopharyngeal airway is contraindicated for this child; she has a head injury and is bleeding from her nose.

9. A 4-year-old girl fell from a second-story balcony and landed on her head. She is unresponsive; has slow, irregular breathing; a large hematoma to the top of her head; and is bleeding from her nose. You should:

A. immediately perform a full-body scan to detect other injuries, administer high-flow oxygen, and transport at once.

**Rationale:** A full-body scan is performed after the primary assessment.

B. apply a pediatric-sized cervical collar, administer high-flow oxygen via pediatric nonrebreathing mask, and prepare for immediate transport.

**Rationale:** Assisted ventilations must be started on a patient with slow, irregular respirations.

9. A 4-year-old girl fell from a second-story balcony and landed on her head. She is unresponsive; has slow, irregular breathing; a large hematoma to the top of her head; and is bleeding from her nose. You should:

C. manually stabilize her head, open her airway with the jaw-thrust maneuver, insert an airway adjunct, and begin assisting her ventilations with a bag-mask device.

**Rationale:** Correct answer

9. A 4-year-old girl fell from a second-story balcony and landed on her head. She is unresponsive; has slow, irregular breathing; a large hematoma to the top of her head; and is bleeding from her nose. You should:

D. suction her airway for up to 10 seconds, insert a nasopharyngeal airway, apply a pediatric-sized cervical collar, and administer oxygen via pediatric nonrebreathing mask.

**Rationale:** A nasopharyngeal airway is contraindicated with potential facial injuries. Ventilations need to be maintained with a bag-mask device.

10. The AVPU scale is used to monitor a patient's level of consciousness. What does the "P" stand for?

- A. Pallor
- B. Pediatric
- C. Painful
- D. Pale

**Answer: C**

**Rationale:** The “P” in the AVPU scale stands for painful. If the patient is responsive to pain they should withdraw from it.

10. The AVPU scale is used to monitor a patient's level of consciousness. What does the "P" stand for?

A. Pallor

**Rationale:** Pallor means that the skin is pale. This has nothing to do with level of consciousness.

B. Pediatrics

**Rationale:** The same AVPU scale is used for adults and pediatrics.

10. The AVPU scale is used to monitor a patient's level of consciousness. What does the "P" stand for?

C. Painful

**Rationale:** correct answer

D. Positioning

**Rationale:** The patient's position may provide clues to the patient's condition but it is not part of the AVPU scale.