



UNIVERSITY OF SWAZILAND  
Faculty of Health Sciences  
Department of General Nursing Science

**SUPPLEMENTARY EXAMINATION PAPER  
JULY 2017**

TITLE OF PAPER : PAEDIATRIC NURSING

COURSE CODE : GNS 318

DURATION : 2 HOURS

MARKS : 75

INSTRUCTIONS : READ THE QUESTIONS AND INSTRUCTIONS  
CAREFULLY

: THERE ARE TWO SECTIONS: A AND B

: ANSWER ALL QUESTIONS

: WRITE NEATLY & CLEARLY

: NO PAPER SHOULD BE BROUGHT INTO OR OUT  
OF THE EXAMINATION ROOM.

: BEGIN EACH QUESTION ON A SEPARATE SHEET  
OF PAPER.

**DO NOT OPEN THIS QUESTION PAPER UNTIL PERMISSION IS GRANTED  
BY THE INVIGILATOR.**

**SECTION A MULTIPLE CHOICE QUESTIONS**

For each question, chose the most appropriate response and write the corresponding letter only, in **capital letters**, e.g. 27 B. Each correct answer carries 1 mark.

1. When performing a physical examination on an infant, the nurse notes that the infant has low set ears. This finding is associated with
  - A. Otogenous tetanus
  - B. Congenital heart defects
  - C. Renal anomalies
  - D. Tracheoesophageal fistula
  
2. Which age group would have a tendency towards eating disorders?
  - A. Toddlerhood
  - B. Childhood
  - C. Infancy
  - D. Adolescence
  
3. The nurse is assessing a 6 month old baby. Which developmental skills are normal and should be expected?
  - A. Speaks in short sentences
  - B. Can feed self with a spoon
  - C. Sits alone
  - D. Pulling up to a standing position
  
4. Which of the following best explains why an emetic is not administered in the case of poison ingestion?
  - A. An emetic speeds up the absorption of the poison into the blood stream
  - B. The emetic becomes deactivated by the poison in the stomach
  - C. It increases the risk of aspiration and regurgitation damages mucosa
  - D. It only works well when the amount of toxin ingested is known.
  
5. Which of the following is the most common type of anaemia in children?
  - A. Megaloblastic anaemia
  - B. Aplastic anaemia
  - C. Iron-deficiency anaemia
  - D. Anaemia of chronic disease
  
6. The nurse is teaching a group of parents about otitis media. When discussing risk factors for this disorder, the nurse should mention the significance of which anatomical feature?
  - A. Nasopharynx
  - B. Tympanic membrane
  - C. Eustachian tube
  - D. External ear canal

7. Which of the following is the best method for performing a physical examination on a toddler?
- A. From head to toe
  - B. Distally to proximally
  - C. From least to most intrusive
  - D. From abdomen to toes, then to lungs
8. The nurse is assessing a 9-month old baby boy for a well-baby check-up. Which of the following observations would be of most concern?
- A. The child does not sit unsupported
  - B. The baby cannot say "Mama" when he wants his mother
  - C. The mother has not given the baby finger foods
  - D. The baby cries whenever the mother goes out
9. Which of the following is an appropriate nursing intervention for a hospitalized child with croup?
- A. Administer a sedative to keep the child calm
  - B. Stimulate the child to be more active
  - C. Use a mist tent
  - D. Monitor the child's vital signs more frequently
10. A 4 week old infant with a cough is sleeping more and not breastfeeding as often as usual. What respiratory rate is a danger sign according to the Integrated Management of Childhood Illnesses?
- A. 20
  - B. 30
  - C. 40
  - D. 50
11. Asthma is a reactive airway disease often associated with wheezing. Children sometimes present without wheezing. Which of the following is a common symptom of asthma in children?
- A. Pruritis
  - B. Night cough
  - C. Sputum production
  - D. Perioral cyanosis
12. A mother comes rushing into the OPD with her 11 month old child who has stridor and cough. These symptoms started 20 minutes ago when she was eating lunch which consisted of meat and beans. You suspect the child is choking. Which of the following actions will you perform first?
- A. Hold the child head up and administer 5 heel thrusts on the back
  - B. Hold the child head down on your arm and administer 5 heel thrusts on the back
  - C. Hold the child head down on your arm and administer 5 sternal thrusts.
  - D. Hold the child head up and administer 5 sternal thrusts

13. A 10 year old child with burns over 21% of the body has not been immunized since age 5 years. Which of the following vaccine is essential for him to receive?
- A. Oral polio
  - B. Measles
  - C. Tetanus toxoid
  - D. Diphtheria and tetanus
14. Which of the following children is a risk for bacterial infection when fever without localizing signs is present?
- A. Neonate
  - B. Child aged 1 year who lives in a high malaria risk area
  - C. Full-term baby now 3 months old
  - D. 4month old baby whose weight is normal for age
15. Dehydration is a serious complication of diarrhoea. Which of the following is a sign of severe dehydration?
- A. Irritability
  - B. Lethargy
  - C. Thirsty and drinks eagerly
  - D. Skin pinch goes back rapidly
16. When administering an I.M. injection to an infant, the nurse should use which site?
- A. Deltoid
  - B. Vastus lateralis
  - C. Dorsogluteal
  - D. Ventrogluteal
17. A 12 year old boy presents with 'sandpaper' rash which started in the groin and axillary areas. It is now peeling. He does not complain of being ill recently. You are concerned he may have which of the following conditions?
- A. Steven-Johnson syndrome
  - B. Rheumatic fever
  - C. Scarlet fever
  - D. Measles
18. The most effective treatment for Group A beta-haemolytic streptococcus is
- A. Ibuprofen
  - B. Amoxicillin
  - C. Penicillin
  - D. Metronidazole
19. The mother of a 5 year old boy refuses to have him immunized against the vaccine-preventable diseases because her religious beliefs are against the use of health facilities. You decide to report this matter to the Ministry of Health and the child was immunized against the will of the mother. Which role of the paediatric nurse did you assume?
- A. Responsible health care provider

- B. Social worker
  - C. Consultant
  - D. Key informant
20. A working mother who is HIV positive tells you that she wants to introduce solid foods to her 3 months old baby because she is going back to work and will not be able to exclusively breastfeed or afford replacement feeding. What advice would you give this mother?
- A. Stop breastfeeding abruptly and introduce the solid foods
  - B. Stop breastfeeding gradually whilst introducing solid foods
  - C. Express the breast milk into a container to be used when the child gets hungry
  - D. Express enough breast milk so that the child can still continue on exclusive breastfeeding.
21. Which of the following physical examination findings of a 3 year old child will lead to a suspicion of TB?
- A. Extreme weight gain
  - B. Failure to gain weight after stepped up nutritional support
  - C. Fever due to upper respiratory tract infection
  - D. Fatigue and lack of interest in play
22. According to IMCI, a child with visible severe wasting or severe palmar pallor may be classified as
- A. Moderate malnutrition/anaemia
  - B. Severe malnutrition/anaemia
  - C. Not very low weight to anaemia
  - D. Anaemia/very low weight
23. The child with no dehydration needs home treatment. Which of the following is not included in the rules for home treatment in this case?
- A. Continue feeding the child
  - B. Give aerosol every 4hours
  - C. Know when to return to the health centre
  - D. Give the child extra fluids.
24. A child who has had diarrhea for 14 days but has no sign of dehydration is classified as:
- A. Severe persistent diarrhea
  - B. Dysentery
  - C. Cholera
  - D. Persistent diarrhea
25. An under 5 year old HIV negative child who has had a TB contact should be given which of the following?
- A. Cotrimoxazole prophylaxis for life
  - B. TB treatment
  - C. Isoniazid preventive therapy

D. Rifampicin preventive therapy

*[Total: 25 Marks]*

**SECTION B SHORT ESSAY QUESTIONS**

**Question 1**

Nono is a 6 year old who has been admitted into the paediatric ward with a history of burns on the right thigh and leg. On examination, the skin looks red, has blisters and is painful to touch.

- (a) State the total body surface area burned [1]
- (b) Formulate any 3 actual nursing diagnoses for this child [3]
- (c) For each nursing diagnosis above, indicate one [1] nursing intervention with a scientific rationale [6]
- (d) Describe the 3 zones seen in burn wounds [3]
- (e) State the signs and symptoms you would look for in a child with non-accidental burns [5]

*[Sub-total Marks 18]*

**Question 2**

A 7 year old male child presents with the mother to the health centre with history of shortness of breath that is noticeable during swimming lessons. The child tires before the other children and usually shows less interest in playing. On examination, T 37 °C, HR: 92, RR 25, BP 127/86, neck exam normal. Heart exam: normal 1<sup>st</sup> and 2<sup>nd</sup> heart sounds, grade 1/6 systolic ejection murmur along left sternal border. Lungs clear. Extremities noted to have slightly diminished femoral pulses, no clubbing or cyanosis of nail beds.

- (a) Name the three most common acyanotic congenital heart lesions [3]
- (b) Discuss the four defects in congenital heart diseases that are collectively referred to as the Tetralogy of Fallot. [12]
- (c) Describe the health education you would give to the parent and the child [5]

*[Sub-total Marks 20]*

**Question 3**

Differentiate between:

- a) Phimosis and paraphymosis [4]
- b) Asthma and bronchitis [4]

***[Sub-total Marks 8]***

**Question 4**

Using your knowledge of pathophysiology, explain the following;

- (a) Infection in children who have burns [2]
- (b) Paresthesias in children who are on Isoniazid Preventive therapy [2]

***[Sub-total Marks 4]***