Chapter 19: Review Questions

* Multiple Choice

1. Immediate conditions that pose nursing concerns for the small for gestational age (SGA) newborn include which of the following?
2. Long-term chronic or end of life care
3. Bronchopulmonary dysplasia and ischemia
4. Muscle contractures and hyperthermia
5. Hypothermia and pain management
6. Upon assessing the newborn, the nurse notes shallow rapid respirations, palmar sweating, decreased oxygen saturation, and a high-pitched cry. These clinical assessments are indicative of which of the following?
7. A neurological problem
8. Hypoglycemia
9. Pain
10. Transient tachypnea of the newborn (TTN)
11. A 24-hour-old newborn is being treated for hyperbilirubinemia with phototherapy bilirubin lights. The patient is in an incubator fully undressed. All EXCEPT, which of the following measures should be included in the nursing plan of care?
12. Apply eye patches to prevent retinal damage and a covering over the genital area.
13. Ensure periodic removal from the incubator for feedings and bonding purposes.
14. Apply a head covering (stockinet hat) to prevent heat loss.
15. Maintain adequate hydration to promote excretion
16. A 42-week gestational aged newborn is assessed 20 hours after delivery by the nurse. On assessment the nurse auscultates rales and rhonchi, notes the newborn is tachypneic and has meconium stained nails. The nurse suspects that the newborn has:
17. Sepsis
18. Meconium aspiration pneumonia
19. Transient tachypnea of the newborn (TTN)
20. Respiratory distress syndrome (RDS)
21. A 30-week gestational aged neonate has anemia of prematurity. The neonatologist has ordered recombinant human erythropoietin 250 U/kg subcutaneous 3 times a week. The nursing implication related to this medication include:
22. Administering the medication prior to feedings
23. Applying pressure to the injection site for 5 min
24. Assessing hematocrit levels as per hospital policy
25. Assessing electrolyte levels weekly

* True or False

1. When discussing survival rates with nursing students the NICU nurse teaches that newborns who are 24 weeks of gestational age have a 58% chance of survival. (True)
2. The nursery nurse is aware that the infant with a diabetic mother may experience a chronic hyperglycemic state. (True)
3. The NICU nurse recognizes that the infant born at 28 weeks of gestational age has a greater chance of developing respiratory distress syndrome (RDS) than the infant born at 36 weeks gestational age. (True)
4. The NICU nurse understands that the administration of synthetic surfactant is the first line of defense to treat and prevent bronchopulmonary dysplasia (BPD). (False)
5. Nonnutritive sucking is promoted for the preterm and high-risk newborn for physiological and psychological reasons. (True)

* Fill-in-the-Blank

1. A nurse should perform an accurate respiratory assessment of the infant with a diabetic mother to assess for transient tachypnea of the newborn (TTN) 1 to 2 hours post delivery. The neonate’s respiratory rate must be below 60, without any grunting, nasal flaring, retractions and a peripheral pulse oximeter of greater than 92% in room air. Otherwise immediate attention and supplemental oxygen should be administered.
2. Abdominal circumference of the preterm newborn should be measured frequently by the nurse in order to assess for distention which may indicate the development of NEC.
3. The NICU nurse must perform a neurological assessment of the preterm newborn, which includes measuring the head circumference and assessing for a bulging anterior fontanel.
4. The nursery nurse alerts a group of nursing students that newborns with a respiratory rate of greater than 60 should never be fed orally because of the risk of aspiration pneumonia.
5. One of the main nursing priorities for a preterm infant is assessing adequate intake and output. Adequate urine output for a preterm infant is 1–3mL/kg/hr. Oliguria is defined as 1mL/kg/hr.