

**Alternate Format Multiple Choice****Data Collection in Assessment**

Presenting to the emergency with chest pain and lethargy, a 3-year-old toddler is diagnosed with acute chest syndrome, secondary to sickle cell anemia. On assessment of the patient, which signs and symptoms should the nurse anticipate finding? Select all that apply.

- A. Arthralgia
- B. Circumoral cyanosis\*
- C. Hematuria
- D. Sclera jaundice
- E. Temperature 37° C
- F. Tachypnea\*

**Prioritizing Interventions**

A 4-year-old child is being discharged home with a medical diagnosis of sickle cell anemia. The nurse prioritizes a nursing diagnosis as risk for injury related to abnormal hemoglobin and decreased ambient oxygen levels. An expected patient outcome is risk control. Appropriate nursing interventions for this care plan should include:

**Answer Choices**

- A. 1, 2, 5
- B. 1, 3, 5, 7
- C. 2, 4\*
- D. 2, 3, 4
- E. 4, 6, 7

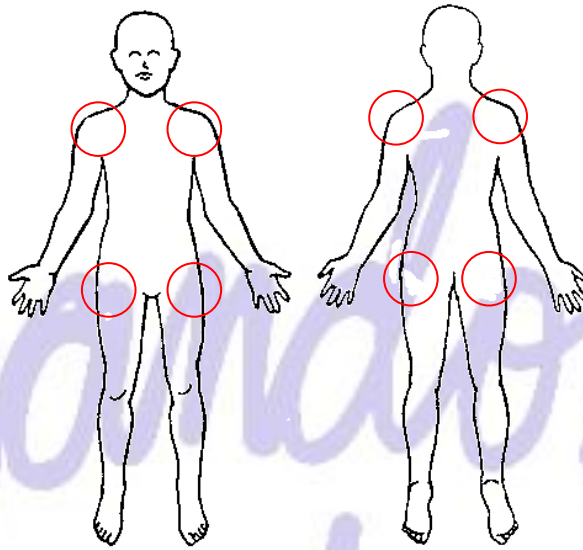
**Interventions**

- 1. Airway management
- 2. Behavior education
- 3. Fluid management
- 4. Health education
- 5. Nutrition management
- 6. Pain management
- 7. Vital sign monitoring

**Hot Spot / Chart Exhibit**

**Identifying patient assessment data**

Your 16-year-old patient has a history of sickle cell anemia. Identify the most common areas where he may present with avascular necrosis.



**Evaluate Care**

Your shift assignment includes managing a 6-year-old sickle cell patient presenting with vasoocclusive crisis. After receiving report, the nurse reviews the patient's recent assessment and laboratory data.

	0800	1200	0400	
HR	113	89	131	BPM
BP	103/72	117/70	133/89	mm Hg
RR	21	26	37	breaths/min
SaO2	96	98	94	%
pH	7.36		7.18	mmol/L
PaCO2	37		57	mm Hg
PO2	101		88	mm Hg
HCO3	21		25	mEq/L
Na	137		158	mmol /L
K	3.7		3.6	mmol/L
Cl	102		104	mmol /L
CO2	23		24	mmol /L
Glucose	86		101	mg/dl
BUN	13		26	mg/dl
Creatinine	0.7		0.8	mg/dl

After analyzing the data, which of the following should the priority for the nurse to evaluate upon physical assessment?

- A. If the patient is awake, alert, and oriented\*
- B. If the patient has been or is currently experiencing any pain
- C. If the patient is pink, warm, and well perfused
- D. If the patient has any urinary output to be measured

**Multiple Choice****Analyze Data to Determine Patient Problems**

The nurse is admitting a 6-year-old sickle cell patient with a diagnosis of secondary hyperhemolytic crisis. Patient history and assessment reveals all of these findings. Which finding best supports the diagnosis of secondary hyperhemolytic crisis?

- A. Arthralgia
- B. Dactylitis
- C. Hepatosplenomagaly
- D. Jaundice\*
- E. Pulmonary Infiltrates

**Planning Goals for Care**

The nurse is prioritizing outcomes for a 3-year-old sickle cell patient whose assessment reveals sunken eyes, rapid thread pulse, rapid breathing, lethargy, and weakness. Which of the following is the most appropriate expected patient outcome?

- A. The child and/or family will demonstrate understanding of the disease, its cause and treatment.
- B. The child will experience no or minimal pain.
- C. The child will maintain adequate circulatory perfusion.
- D. The child will maintain an effective breathing pattern and ventilatory perfusion.
- E. The child will take adequate amounts of fluids and show no signs of dehydration.\*

**Drag and Drop****Nursing Interventions**

A 5-year-old sickle cell patient presents to the ICU with a complex presentation of *streptococcus pneumonia* and acute chest syndrome requiring ventilatory support. After stabilization, a nasogastric tube is placed to maintain enteral nutrition. You are preparing to give an enteral feeding. Drag and drop the following interventions in the correct order.

1. Assess for bowel sounds (1)
2. Auscultate tube placement and check pH (2)
3. Flush the tube with water (4)
4. Reflush the tube with water (6)
5. Administer feeding (5)
6. Check for residual volume (3)

## References

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