NCLEX Review Questions – Growth and Development

1. A first time mother brings in her 5-day old baby for a well-child visit. The nurse weighs the infant and reports a weight of 7 pounds 5 ounces to the mother. The mother looks concerned and tells the nurse that her baby weighed 7 pounds 10 ounces when she was discharged 4 days ago. The nurse's best response to the mother is:
   a) "I will let the doctor know, and he will talk to you about possible causes of your infant's weight loss".
   b) "A weight loss of a few ounces is common among newborns, especially for breast-feeding mothers".
   c) "I can tell you are a first-time mother. Don't worry; we will find out why she is losing weight".
   d) "Maybe she isn't getting enough milk. How often are you breastfeeding her?"

2. Which finding would the nurse consider abnormal when performing a physical assessment on a 6-month old?
   a) Posterior fontanel is open.
   b) Anterior fontanel is open.
   c) Beginning signs of tooth eruption.
   d) Able to track and follow objects.

3. What should parents understand is one of the most common causes of injury and death for a 7-month old infant?
   a) Poisoning.
   b) Child abuse.
   c) Aspiration.
   d) Dog bites.

4. The mother of an 11-month old with iron deficiency anemia tells the nurse that her infant is currently taking iron and a multivitamin. Which statement by the mother should be of concern to the nurse?
   a) "I give the iron and multivitamin at the same time each morning".
   b) "I give the iron and multivitamin in the morning 6-oz bottle".
   c) "I give the iron and multivitamin 2 hours before I feed the morning bottle".
   d) "I five the iron and multivitamin in oral syringes toward the back of the cheek".

5. The nurse is using the FLACC scale to rate the pain level in a 9-month old. Which is the nurse's best response to the father's question of what the FLACC scale is?
   a) "It estimates a child's level of pain utilizing vital sign information".
   b) "It estimates a child's level of pain based on parent's perception".
   c) "It estimates a child's level of pain utilizing behavioral and physical responses".
   d) "It estimates a child's level of pain utilizing a numeric scale from 0 to 5".

6. Which statement by the mother of an 18-month old would lead the nurse to believe that the child should be referred for further evaluation for developmental delay?
   a) "My child is able to stand but is not yet taking steps independently".
   b) "My child has a vocabulary of approximately 15 words".
   c) "My child is still sucking his thumb".
   d) "My child seems to be quite wary of strangers".

7. The mother of a child 2 years 6 months has arranged a play date with the neighbor and her child 2 years 9 months. During the play date the two mothers should expect that the children will do which of the following?
   a) Share and trade their toys while playing.
   b) Play with one another with little or no conflict.
   c) Play alongside one another but not actively with one another.
   d) Only play with one or two items, ignoring most of the other toys.

8. Which should the nurse do to prevent separation anxiety in a hospitalized toddler?
   a) Assume the parental role when parents are not able to be at the bedside.
   b) Encourage the parents to always remain at the bedside.
   c) Establish a routine similar to that of the child's home.
   d) Rotate nursing staff so the child becomes comfortable with a variety of nurses.

9. According to developmental theories, which important event is essential to the development of the toddler?
   a) The child learns to feed self.
   b) The child develops friendships.
   c) The child learns to walk.
   d) The child participates in being potty-trained.

10. Which action is a developmentally appropriate method for eliciting a 4-year old's cooperation in obtaining the blood pressure?
    a) Have the child's parents help put on the blood pressure cuff.
    b) Tell the child that if he sits still, the blood pressure machine will go quickly.
    c) Ask the child if he feels a squeezing of his arm.
    d) Tell the child that measuring the blood pressure will not hurt.

11. Which nursing action is most appropriate to gain information about how a child is feeling?
    a) Actively attempt to make friends with the child before asking about her feelings.
    b) Ask the child's parents what feeling she has expressed in regard to her diagnosis.
    c) Provide the child with some paper to draw a picture of how she is feeling.
    d) Ask the child direct questions about how she is feeling.

12. Which statement would indicate to the nurse that a school-age child is not developmentally on track for age?
    a) The child is able to follow a four-to five step command.
    b) The child started wetting the bed on admission to the hospital.
    c) The child has an imaginary friend named Kelly.
    d) The child enjoys playing board games with her sister.

13. Which technique should the nurse suggest to the other of an 8-year old who does not want to complete her chores?
    a) Grounding.
    b) Time-out.
    c) Reward system.
    d) Spanking.

14. An 18-year old with a rash and itching in the groin area is concerned that he has contracted a sexually transmitted disease and does not want his parents to find out. The nurse's best response is:
    a) "We will need to contact your parents to let them know".
    b) "We will not contact your parents regarding this visit".
    c) "Who would you like us to contact about your visit here today".
    d) "We cannot promise that the hospital will not contact your parents".

15. The mother of an adolescent complains that he has had some recent behavioral changes. He comes home from school every day, closes his door, and refrains from interaction with his family. The nurse's best response to the mother is:
    a) "You should speak with your son and ask him directly what is wrong with him".
    b) "You should set limits with your son and tell him that this is unacceptable behavior".
    c) "Your son's behavior is abnormal, and he is going to need a psychiatric referral".
    d) "Your son's behavior is normal. You should listen to him without being judgmental".