Ball/Bindler/Cowen, *Principles of Pediatric Nursing: Caring for Children* 5th Edition Test Bank

Chapter 3

Question 1
Type: MCSA

There is significant impact from genetic and genomic advances on health promotion and maintenance. Personalized health care can be based on environmental factors and:

1. The genes a person inherited.

2. Common conditions with known treatment strategies.

3. Teaching strategies.

4. The health of the person.

Correct Answer: 1

Rationale 1: Personalized health care is based on environmental factors and the genes the person inherited. Common conditions and the current health of the person are not part of personalized health care. Teaching strategies are not part of personalized health care.

Rationale 2: Personalized health care is based on environmental factors and the genes the person inherited. Common conditions and the current health of the person are not part of personalized health care. Teaching strategies are not part of personalized health care.

Rationale 3: Personalized health care is based on environmental factors and the genes the person inherited. Common conditions and the current health of the person are not part of personalized health care. Teaching strategies are not part of personalized health care.

Rationale 4: Personalized health care is based on environmental factors and the genes the person inherited. Common conditions and the current health of the person are not part of personalized health care. Teaching strategies are not part of personalized health care.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: LO 01. Explain the role of genetic and genomic concepts in health promotion, disease prevention, screening, diagnostics, selection of treatment, and monitoring of treatment effectiveness.

Question 2
Type: MCSA

A three-generation pedigree is constructed around the designated "index" patient. The term *proband* means:

1. The "index" patient has the disorder of interest.

2. One parent of the "index" patient has the disorder of interest.

3. The "index" patient does not have the disorder of interest.

4. Siblings of the "index" patient do not have the disorder of interest.

Correct Answer: 1

Rationale 1: The proband indicates that the "index" patient has the disorder of interest. A consultand is an "index" patient seeking genetic counseling for a disorder she is not affected by at present.

Rationale 2: The proband indicates that the "index" patient has the disorder of interest. A consultand is an "index" patient seeking genetic counseling for a disorder she is not affected by at present.

Rationale 3: The proband indicates that the "index" patient has the disorder of interest. A consultand is an "index" patient seeking genetic counseling for a disorder she is not affected by at present.

Rationale 4: The proband indicates that the "index" patient has the disorder of interest. A consultand is an "index" patient seeking genetic counseling for a disorder she is not affected by at present.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: LO 02. Elicit a minimum three-generation family health history and construct a pedigree using standardized symbols and terminology.

Question 3
Type: MCSA

When discussing inheritance with parents of a child with a genetic disorder, which statement by the parents indicates they understand inheritance risk?

1. "This child has a genetic disorder, so future children will not have it."

2. "Each pregnancy carries the same percent risk of inheritance."

3. "I cannot have any more children, because they will all have the disorder."

4. "There is a good chance future children will be normal."

Correct Answer: 1

Rationale 1: Each pregnancy carries the same percent risk of having a child with the disorder in question.

Rationale 2: Each pregnancy carries the same percent risk of having a child with the disorder in question.

Rationale 3: Each pregnancy carries the same percent risk of having a child with the disorder in question.

Rationale 4: Each pregnancy carries the same percent risk of having a child with the disorder in question.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: LO 03. Incorporate knowledge of genetic and genomic influences and risk factors into physical assessment.

Question 4
Type: MCSA

Parents of a child with a congenital heart defect ask what the chances are of recurrence in future pregnancies. The correct response by the nurse would be:

1. "There is a 50% chance of recurrence in a future pregnancy."

2. "There is a very low chance of recurrence."

3. "It should not happen again with a future pregnancy."

4. "There is a strong chance of recurrence."

Correct Answer: 2

Rationale 1: There is a very low rate of recurrence with congenital heart defects. The other answers are incorrect.

Rationale 2: There is a very low rate of recurrence with congenital heart defects. The other answers are incorrect.

Rationale 3: There is a very low rate of recurrence with congenital heart defects. The other answers are incorrect.

Rationale 4: There is a very low rate of recurrence with congenital heart defects. The other answers are incorrect.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: LO 04. Identify children or families who might benefit from genetic information and services.

Question 5
Type: MCSA

A family with a child who had a cleft lip and palate at birth are planning another pregnancy. What intervention should be recommended?

1. A genetic family history.

2. A family pedigree.

3. A genetic physical assessment.

4. A maternal health history.

Correct Answer: 1

Rationale 1: A genetic family history is recommended when there is history of a congenital anomaly, such as cleft lip and palate. A pedigree is a more comprehensive family history, and could follow a genetic family history if needed. The previous anomaly is already known, so a genetic history would be recommended over a genetic physical assessment. A maternal health history is not comprehensive enough for this case.

Rationale 2: A genetic family history is recommended when there is history of a congenital anomaly, such as cleft lip and palate. A pedigree is a more comprehensive family history, and could follow a genetic family history if needed. The previous anomaly is already known, so a genetic history would be recommended over a genetic physical assessment. A maternal health history is not comprehensive enough for this case.

Rationale 3: A genetic family history is recommended when there is history of a congenital anomaly, such as cleft lip and palate. A pedigree is a more comprehensive family history, and could follow a genetic family history if needed. The previous anomaly is already known, so a genetic history would be recommended over a genetic physical assessment. A maternal health history is not comprehensive enough for this case.

Rationale 4: A genetic family history is recommended when there is history of a congenital anomaly, such as cleft lip and palate. A pedigree is a more comprehensive family history, and could follow a genetic family history if needed. The previous anomaly is already known, so a genetic history would be recommended over a genetic physical assessment. A maternal health history is not comprehensive enough for this case.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: LO 05. Recognize when to make a referral to a genetics professional.

Question 6
Type: MCSA

A father is a known carrier of an X-linked condition, and asks when he will know whether his newborn son has the condition he carries. The nurse's correct response would be:

1. "Genetic studies have been ordered, and they will take about a week to determine the results."

2. "We plan to run additional tests this afternoon, and should have results by the end of the day."

3. "Your son cannot have the condition, because the condition is X-linked, and cannot be passed on to him."

4. "There is a 50% chance you passed it on, but further tests are not recommended until he is a month old."

Correct Answer: 3

Rationale 1: A male child does not inherit any X chromosome from the father; therefore, the male child will not have the condition.

Rationale 2: A male child does not inherit any X chromosome from the father; therefore, the male child will not have the condition.

Rationale 3: A male child does not inherit any X chromosome from the father; therefore, the male child will not have the condition.

Rationale 4: A male child does not inherit any X chromosome from the father; therefore, the male child will not have the condition.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: LO 06. Integrate basic genetic and genomic concepts into care planning and child and family education.

Question 7
Type: MCSA

When asked by students what carrier testing is, the nurse answers:

1. "Carrier testing involves testing an asymptomatic individual for carrier status for a genetic condition."

2. "Carrier testing is used to establish a diagnosis of a genetic disorder in an individual who is symptomatic or has had a positive screening test."

3. "Carrier testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors."

4. "Carrier testing follows in vitro fertilization (IVF) testing to identify embryos with a particular genetic condition."

Correct Answer: 1

Rationale 1: Carrier testing involves testing an asymptomatic individual for carrier status for a genetic condition. Diagnostic testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Prenatal testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Pre-implantation testing follows in vitro fertilization (IVF) testing to identify embryos with a particular genetic condition.

Rationale 2: Carrier testing involves testing an asymptomatic individual for carrier status for a genetic condition. Diagnostic testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Prenatal testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Pre-implantation testing follows in vitro fertilization (IVF) testing to identify embryos with a particular genetic condition.

Rationale 3: Carrier testing involves testing an asymptomatic individual for carrier status for a genetic condition. Diagnostic testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Prenatal testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Pre-implantation testing follows in vitro fertilization (IVF) testing to identify embryos with a particular genetic condition.

Rationale 4: Carrier testing involves testing an asymptomatic individual for carrier status for a genetic condition. Diagnostic testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Prenatal testing is testing to identify a fetus with a genetic disease or condition. Some prenatal testing is offered routinely; other testing may be initiated due to family history or maternal factors. Pre-implantation testing follows in vitro fertilization (IVF) testing to identify embryos with a particular genetic condition.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance

Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: LO 08. Discuss the significance of recent advances in human genetics and genomics and their impact on health care delivery.

Question 8
Type: MCSA

There are over 1800 genetic tests available. Which one would be best for a family who have no children and a prospective father who recently had a positive screen for a genetic condition?

1. Carrier testing.

2. Predictive testing.

3. Diagnostic testing.

4. Prenatal testing.

Correct Answer: 3

Rationale 1: Diagnostic testing is best for an individual who has a positive screen for a genetic disorder. Prenatal testing would be done with a pregnancy. Carrier testing is done with an asymptomatic individual who wishes to know whether he or she is a carrier of a condition. Predictive testing predicts the likelihood of a condition later in life.

Rationale 2: Diagnostic testing is best for an individual who has a positive screen for a genetic disorder. Prenatal testing would be done with a pregnancy. Carrier testing is done with an asymptomatic individual who wishes to know whether he or she is a carrier of a condition. Predictive testing predicts the likelihood of a condition later in life.

Rationale 3: Diagnostic testing is best for an individual who has a positive screen for a genetic disorder. Prenatal testing would be done with a pregnancy. Carrier testing is done with an asymptomatic individual who wishes to know whether he or she is a carrier of a condition. Predictive testing predicts the likelihood of a condition later in life.

Rationale 4: Diagnostic testing is best for an individual who has a positive screen for a genetic disorder. Prenatal testing would be done with a pregnancy. Carrier testing is done with an asymptomatic individual who wishes to know whether he or she is a carrier of a condition. Predictive testing predicts the likelihood of a condition later in life.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Assessment

Learning Outcome: LO 08. Discuss the significance of recent advances in human genetics and genomics and their impact on health care delivery.

Question 9
Type: MCSA

While looking at a three-generation family pedigree, the nurse notes that the darkened circles represent:

1. Males unaffected by the disease.

2. Males affected by the disease.

3. Females unaffected by the disease.

4. Females affected by the disease.

Correct Answer: 4

Rationale 1: A circle is the standard symbol for a female, and darkening the circle represents a female affected by a disease. A male is represented by a square.

Rationale 2: A circle is the standard symbol for a female, and darkening the circle represents a female affected by a disease. A male is represented by a square.

Rationale 3: A circle is the standard symbol for a female, and darkening the circle represents a female affected by a disease. A male is represented by a square.

Rationale 4: A circle is the standard symbol for a female, and darkening the circle represents a female affected by a disease. A male is represented by a square.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: LO 02. Elicit a minimum three-generation family health history and construct a pedigree using standardized symbols and terminology.

Question 10
Type: MCSA

A family desire genetic testing for their adolescent. What response by the clinic nurse is appropriate?

1. "The child is a minor, and cannot give consent."

2. "It is not advisable, because insurance does not pay for this test."

3. "Let me discuss this with the adolescent and then we can discuss it more fully."

4. "There is a chance the adolescent might be discriminated against because of the test."

Correct Answer: 3

Rationale 1: The adolescent is old enough to understand the pros and cons of testing. It would be advisable to discuss the matter with the adolescent and then more fully with the parents. That the minor is not able to give consent is true, but this answer cuts off discussion, and is not appropriate. Insurance and discrimination can play a role in the decision, but still are not the appropriate answers, because they do not address the issue of the request for testing.

Rationale 2: The adolescent is old enough to understand the pros and cons of testing. It would be advisable to discuss the matter with the adolescent and then more fully with the parents. That the minor is not able to give consent is true, but this answer cuts off discussion, and is not appropriate. Insurance and discrimination can play a role in the decision, but still are not the appropriate answers, because they do not address the issue of the request for testing.

Rationale 3: The adolescent is old enough to understand the pros and cons of testing. It would be advisable to discuss the matter with the adolescent and then more fully with the parents. That the minor is not able to give consent is true, but this answer cuts off discussion, and is not appropriate. Insurance and discrimination can play a role in the decision, but still are not the appropriate answers, because they do not address the issue of the request for testing.

Rationale 4: The adolescent is old enough to understand the pros and cons of testing. It would be advisable to discuss the matter with the adolescent and then more fully with the parents. That the minor is not able to give consent is true, but this answer cuts off discussion, and is not appropriate. Insurance and discrimination can play a role in the decision, but still are not the appropriate answers, because they do not address the issue of the request for testing.

Global Rationale:

Cognitive Level: Analyzing
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: LO 04. Identify children or families who might benefit from genetic information and services.

Question 11
Type: MCSA

A nurse is planning an education session on genetic testing. What would not concern the nurse when planning the session?

1. Cultural beliefs.

2. Religious beliefs.

3. Family values.

4. Insurance reimbursement.

Correct Answer: 4

Rationale 1: Cultural and religious beliefs and family values are all considerations when planning a teaching session on genetic testing. Insurance plays a factor in determining whether the test is done, but is not a consideration in the teaching session itself.

Rationale 2: Cultural and religious beliefs and family values are all considerations when planning a teaching session on genetic testing. Insurance plays a factor in determining whether the test is done, but is not a consideration in the teaching session itself.

Rationale 3: Cultural and religious beliefs and family values are all considerations when planning a teaching session on genetic testing. Insurance plays a factor in determining whether the test is done, but is not a consideration in the teaching session itself.

Rationale 4: Cultural and religious beliefs and family values are all considerations when planning a teaching session on genetic testing. Insurance plays a factor in determining whether the test is done, but is not a consideration in the teaching session itself.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: LO 06. Integrate basic genetic and genomic concepts into care planning and child and family education.

Question 12
Type: MCSA

When evaluating results of genetic screening, an appropriate outcome of nursing care would be that the family will:

1. Decide whether social issues outweigh genetic issues.

2. Make a voluntary decision related to genetic health issues.

3. Not consider the influence of genetics on health promotion.

4. Look closely at the present before considering the future as it relates to genetic screening.

Correct Answer: 2

Rationale 1: The goal of nursing care is to allow informed, voluntary decisions when it comes to genetic screening.

Rationale 2: The goal of nursing care is to allow informed, voluntary decisions when it comes to genetic screening.

Rationale 3: The goal of nursing care is to allow informed, voluntary decisions when it comes to genetic screening.

Rationale 4: The goal of nursing care is to allow informed, voluntary decisions when it comes to genetic screening.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: LO 07. Understand implications of genome science on the nursing role with particular attention to ethical, legal, and social issues.

Question 13
Type: MCSA

The nurse notes some dysmorphic facial features when examining a toddler in the well child clinic. Which measurement taken by the nurse would not be considered when looking at dysmorphic facial features?

1. Interpupillary distance.

2. Intercanthal distance.

3. The distance from the outer canthus to the pinna.

4. Outer cantus distance.

Correct Answer: 3

Rationale 1: The distance from the outer canthus to the pinna does not apply to the face. The other measurements would be necessary when evaluating facial dysmorphic features.

Rationale 2: The distance from the outer canthus to the pinna does not apply to the face. The other measurements would be necessary when evaluating facial dysmorphic features.

Rationale 3: The distance from the outer canthus to the pinna does not apply to the face. The other measurements would be necessary when evaluating facial dysmorphic features.

Rationale 4: The distance from the outer canthus to the pinna does not apply to the face. The other measurements would be necessary when evaluating facial dysmorphic features.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Assessment
Learning Outcome: LO 03. Incorporate knowledge of genetic and genomic influences and risk factors into physical assessment.

Question 14
Type: MCSA

When doing a health history on a 12-year-old, what would the nurse document as a dysmorphic feature?

1. A repaired cleft palate.

2. A 10% burn to the face.

3. A severed finger.

4. A flat anterior fontanel.

Correct Answer: 1

Rationale 1: A dysmorphic feature was present at birth. A cleft palate, even though repaired, would be included in a health history as a dysmorphic feature. The burns and a severed digit were not present at birth, and would not be considered dysmorphic. A soft fontanel would be considered normal.

Rationale 2: A dysmorphic feature was present at birth. A cleft palate, even though repaired, would be included in a health history as a dysmorphic feature. The burns and a severed digit were not present at birth, and would not be considered dysmorphic. A soft fontanel would be considered normal.

Rationale 3: A dysmorphic feature was present at birth. A cleft palate, even though repaired, would be included in a health history as a dysmorphic feature. The burns and a severed digit were not present at birth, and would not be considered dysmorphic. A soft fontanel would be considered normal.

Rationale 4: A dysmorphic feature was present at birth. A cleft palate, even though repaired, would be included in a health history as a dysmorphic feature. The burns and a severed digit were not present at birth, and would not be considered dysmorphic. A soft fontanel would be considered normal.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:
Nursing/Integrated Concepts: Nursing Process: Implementation
Learning Outcome: LO 03. Incorporate knowledge of genetic and genomic influences and risk factors into physical assessment.

Question 15
Type: MCMA

When doing a pedigree, what factors should be included?

Standard Text: Select all that apply.

1. Full siblings only.

2. Begin with the proband.

3. Mark each generation with a Roman numeral.

4. Include at least three generations.

5. Use only standard pedigree symbols.

Correct Answer: 2,3,4,5

Rationale 1: It is important to include half-siblings in addition to full siblings, as half-siblings have half the genetic history that the full siblings do. The other answers are all important to include in a pedigree.

Rationale 2: It is important to include half-siblings in addition to full siblings, as half-siblings have half the genetic history that the full siblings do. The other answers are all important to include in a pedigree.

Rationale 3: It is important to include half-siblings in addition to full siblings, as half-siblings have half the genetic history that the full siblings do. The other answers are all important to include in a pedigree.

Rationale 4: It is important to include half-siblings in addition to full siblings, as half-siblings have half the genetic history that the full siblings do. The other answers are all important to include in a pedigree.

Rationale 5: It is important to include half-siblings in addition to full siblings, as half-siblings have half the genetic history that the full siblings do. The other answers are all important to include in a pedigree.

Global Rationale:

Cognitive Level: Applying
Client Need: Health Promotion and Maintenance
Client Need Sub:

Nursing/Integrated Concepts: Nursing Process: Planning
Learning Outcome: LO 02. Elicit a minimum three-generation family health history and construct a pedigree using standardized symbols and terminology.