



AMREF INTERNATIONAL UNIVERSITY
SCHOOL OF MEDICAL SCIENCES
DEPARTMENT OF NURSING AND MIDWIFERY SCIENCES
KENYA REGISTERED COMMUNITY HEALTH NURSING
END OF MARCH-AUGUST SEMESTER EXAMINATIONS

DNS 221 : Pediatric Nursing and IMCI

TIME: 2 HOURS

Start: 0900 HOURS

Finish: 1100 HOURS

DATE: Monday 11th August 2025

INSTRUCTIONS

1. This exam will be marked **out of 70 Marks**
2. ALL Questions are compulsory.
3. The Examination has Three Sections: Section A- Multiple Choice Questions, Section B: Short Answer Questions, Section C: Long Essay Questions
4. Answer all Questions in the ANSWER BOOKLET provided
5. Do not write anything on the question paper
6. Use the back of your booklet for rough work if need be.

SECTION I: MULTIPLE CHOICES QUESTIONS

(20

MARKS)

1. The following is least indicative of an acute asthma exacerbation:-
 - a) Use of accessory muscles
 - b) Prolonged expiratory phase
 - c) Nasal flaring
 - d) Bradycardia
2. The congenital heart defect often presenting with "cyanotic spells" ("tet spells") is:-
 - a) Ventricular septal defect
 - b) Atrial septal defect
 - c) Tetralogy of Fallot
 - d) Patent ductus arteriosus
3. In pediatric CPR performed by a single rescuer, the recommended compression-to-ventilation ratio is:-
 - a) 15 : 2
 - b) 30 : 2
 - c) 5 : 1
 - d) 10 : 1
4. The earliest and most sensitive sign of dehydration in infants is:
 - a) Sunken fontanelle
 - b) Dry mucous membranes
 - c) Decreased urine output
 - d) Tachycardia
5. The test that is the gold standard for diagnosing cystic fibrosis is:-
 - a) Sweat chloride test
 - b) Chest X-ray
 - c) Genetic mutation analysis
 - d) Pulmonary function tests
6. A child in anaphylactic shock should receive first-line treatment of:
 - a) Intravenous corticosteroids
 - b) Intramuscular epinephrine
 - c) Nebulized bronchodilators
 - d) Intravenous antihistamines
7. In suspected pediatric pulmonary tuberculosis, what is the most appropriate initial diagnostic test is:-
 - a) Induced sputum culture
 - b) Chest radiograph
 - c) Mantoux tuberculin skin test
 - d) Interferon-gamma release assay

8. A hallmark sign of bronchiolitis in an infant is:-
 - a) High-grade fever
 - b) Inspiratory stridor
 - c) Wheezing with fine crackles
 - d) Persistent cough
9. The most common cause of pediatric cardiac arrest:-
 - a) Congenital heart disease
 - b) Sepsis
 - c) Trauma
 - d) Respiratory failure
10. The fluid therapy is most appropriate as the initial management of hypovolemic shock in a child:-
 - a) Oral rehydration solution
 - b) Isotonic crystalloid bolus
 - c) Colloid infusion
 - d) Hypertonic saline
11. The laboratory finding is characteristic of iron-deficiency anemia in children is:-
 - a) High mean corpuscular volume (MCV)
 - b) Low serum ferritin
 - c) Elevated reticulocyte count
 - d) Increased serum iron
12. In pediatric patients with severe burns, the "rule of nines" estimates:-
 - a) Depth of injury
 - b) Percentage of total body surface area
 - c) Pain severity
 - d) Risk of infection
13. The following signs is **not** characteristic of shock in children:-
 - a) Tachycardia
 - b) Prolonged capillary refill
 - c) Early hypotension
 - d) Cool, clammy skin
14. The primary management for a child with uncomplicated falciparum malaria is:
 - a) Chloroquine
 - b) Artemisinin-based combination therapy
 - c) Doxycycline
 - d) Quinine
15. A 2-year-old with suspected bacterial meningitis should receive which intervention **before** lumbar puncture:-
 - a) Blood culture and antibiotic administration
 - b) Complete blood count
 - c) CT scan of the head
 - d) Placement of an IV line

16. The immunization recommended at birth is:-
- a) DTP (Diphtheria, Tetanus, Pertussis)
 - b) MMR (Measles, Mumps, Rubella)
 - c) Hepatitis B
 - d) Varicella
17. A child with untreated severe asthma is at risk for:-
- a) Pulmonary hypertension
 - b) Cardiac tamponade
 - c) Respiratory alkalosis
 - d) Atrial septal defect
18. The type of seizure most common in school-aged children is:-
- a) Absence seizures
 - b) Myoclonic seizures
 - c) Tonic-clonic seizures
 - d) Atonic seizures
19. In pediatric patients, the earliest sign of increased intracranial pressure is often:-
- a) Bradycardia
 - b) Irritability or lethargy
 - c) Dilated pupils
 - d) Decorticate posturing
20. Poor feeding, temperature instability, and lethargy in a neonate is classical of:-
- a) Neonatal sepsis
 - b) Pyloric stenosis
 - c) Intussusception
 - d) Bronchiolitis

SECTION B: SHORT ANSWER QUESTIONS**(30 MARKS)**

1. State four (4) strategies for implementing atraumatic care in pediatric nursing. (4 marks)
2. Explain the role of a nurse in growth and monitoring of a pediatric client (5 marks)
3. As a nurse in a pediatric clinic, what are the emergency and priority signs you will look out for when assessing a pediatric client? (6 marks)
4. Describe the nursing management of a 10-year-old with pneumonia. (5 marks)
5. State four benefits of adopting the integrated management of child health in the management of the pediatric population. (4 marks)
6. Describe the management of an 8-year-old presenting with severe dehydration. (6 marks)

SECTION C: LONG ANSWER QUESTIONS**(20MARKS)**

1. Baby Y, a 6-month-old infant with known sickle cell disease is brought to the emergency department by her mother. Over the past two days, the baby has been increasingly irritable, refusing feeds, and crying inconsolably. The mother reports the infant's hands and feet appear swollen and the baby has had a low-grade fever (38.2 °C). On arrival, the infant is tachycardic (heart rate 170 bpm), tachypneic (respiratory rate 50 bpm), and exhibits pallor with mild scleral jaundice. The extremities are cool to touch, and there is noticeable swelling of the hands (dactylitis). Capillary refill time is 3 seconds.
 - a. List six (6) clinical manifestations an vaso occlusive crisis in sickle cell disease (3 marks)
 - b. Outline Four (4) potential complications of a vaso occlusive crisis ic sickle cell disease (4 Marks)
 - c. Using four (4) actual nursing diagnoses discuss the nursing management of Baby Y (13 Marks)