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NCC C-ELBW

Care of the Extremely Low Birth Weight Neonate



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Question: 1

What is the treatment for developmental dysplasia of the hip (DDH)?

- A. Pavlik harness to immobilize infant in flexed position
- B. A recommendation of the AAP for infants born less than 37 weeks
- C. 1. Skin injury to nose
2. Varying oxygen concentrations
3. Drying of nasal mucosa
- D. Immature neutrophils include promyelocyte, myelocyte, metamyelocyte, and bands
Mature neutrophils include polymorphonuclear neutrophils

Answer: A

Question: 2

Where should the pulse oximeter be placed on the infant at delivery for the most accurate Oxygen saturation reading?

- A. 2 and 6 weeks
- B. 134 - 145 meq/l
- C. right wrist (preductal)
- D. complete blood count (cbc)

Answer: C

Question: 3

When can antenatal steroids be administered?

- A. 24 - 28 weeks
- B. 24 - 37 weeks
- C. 12 - 37 weeks
- D. 48 - 37 weeks

Answer: B

Question: 4

What are the three mechanisms related to NEC?

- A. Thin, sticky, transparent/translucent, gelatinous/red, visible vasculature
- B. 1. Gestational/chronic HTN
2. HELLP
3. Antenatal corticosteroids
4. Magnesium sulfate
5. Maternal analgesia/anesthesia
6. Maternal medications
7. PROM
8. Diabetes
9. Multiple gestation
- C. 1. Intestinal ischemia
2. Bacterial colonization
3. Volume feedings
- D. Spontaneous: isolated pocket of free air in the pleural space, may be asymptomatic
Tension: addition of new air through the rupture with each breath, resulting in lung collapse and compromised cardiac function

Answer: C

Question: 5

What challenges may be unique to teen parents with an ELBW infant?

- A. "Blueberry muffin" appearance caused by purpuric skin lesions that result from extramedullary hematopoiesis
- B. The choice of antibiotic agents should be based on the specific organisms associated with sepsis, the sensitivities of the bacterial pathogen, and the prevailing nosocomial infection trends in the nursery.
- C. Teen parents often experience:
 - 1. Loss of their peer support group
 - 2. Disruption with their parents and extended family
 - 3. Suffer emotional distress as they have poor coping skills
- D. Spontaneous: isolated pocket of free air in the pleural space, may be asymptomatic
Tension: addition of new air through the rupture with each breath, resulting in lung collapse and compromised cardiac function

Answer: C

Question: 6

What steps should be taken to promote proper positioning for neurodevelopment?

- A. 1. Posture
- 2. Square window
- 3. Arm recoil
- 4. Popliteal angle
- 5. Scarf sign
- 6. Heel to ear
- B. "Blueberry muffin" appearance caused by purpuric skin lesions that result from extramedullary hematopoiesis
- C. 1. Identify and treat cause
- 2. Strict I&O
- 3. Daily weight
- 4. Monitor BP, electrolytes, nutrition
- D. 1. Neutral head position
- 2. Log roll when repositioning
- 3. Elevate HOB 30 - 45 degrees
- 4. Shoulders should be gently flexed and softly rounded forward to midline
- 5. Upper back should not be flat or concave
- 6. Position hands close to midline towards trunk/face
- 7. Hips should be in neutral position (avoid hips flexed, abducted, or frogged)

Answer: D

Question: 7

GBS, staphylococcus aureus, and listeria are examples of gram-positive pathogens.

- A. True
- B. False

Answer: A

Question: 8

What is the newborn screen (PKU test)?

- A. To detect early hearing loss to prevent speech, language, and cognitive delays
- B. Gestational HTN is diagnosed after 20 weeks gestation
- Chronic HTN is diagnosed before 20 weeks gestation or before pregnancy
- C. Indomethacin is an NSAID given in the first 12 hours of life to treat (promote closure of) Patent Ductus Arteriosus (PDA)

D. The newborn screen (PKU test) is a blood test done 24 - 72 hours after birth that screens for 21 different metabolic disorders (including PKU)

Answer: D

Question: 9

An infant with renal failure or overwhelming sepsis may result in _____.

- A. Metabolic acidosis
- B. Respiratory alkalosis
- C. Respiratory acidosis
- D. Cholestasis

Answer: A

Question: 10

What is hyperbilirubinemia?

- A. Free flow oxygen from bag-mask or oxygen tubing held near infant's face
Used for short- oxygen delivery in delivery room and/or during care/procedures
- B. Excess of bilirubin in the blood
Elevated bilirubin level > 5 mg/dL
- C. Osteopenia is calcium deficiency and Rickets is vitamin D deficiency
- D. Nearby surfaces are cooler than infant (sides of crib, windows)

Answer: B

Question: 11

How can a NICU nurse care for a family experiencing loss?

- A. 1. Encourage the parents/family to spend time with the baby
- 2. Offer privacy
- 3. Mementos
- 4. Support groups
- 5. Spiritual support/offer baptism
- B. 1. Positive touch
- 2. Hand hugs
- 3. Use rolls/positioning devices to reduce flexed position
- 4. Hold infant's hand (stimulates the grasp reflex)

- 5. Offer pacifier
- C. Immature neutrophils include promyelocyte, myelocyte, metamyelocyte, and bands
Mature neutrophils include polymorphonuclear neutrophils
- D. 1. Should be performed at 4 weeks of life or 31 weeks (whichever is the latest)
- 2. Repeat every 2 weeks if no ROP
- 3. Repeat weekly if ROP is present
- 4. Repeat twice weekly if pre ROP or rapidly progressing ROP is diagnosed

Answer: A

Question: 12

What is the definition of neonatal sepsis?

- A. Located at the superior poles of the kidneys
Composed of two organs:
 - 1. Adrenal medulla produces and stores catecholamines
 - 2. Adrenal cortex produces steroids (glucocorticoids, mineralocorticoids, and androgens)
- B. Physiologic develops in 3 - 5 days after birth.
 - Resolves in 7 days for and 9-10 days for pre
 - Unconjugated bilirubin level <12.9 mg/dLPathologic is present at birth or develops within 24 hours
 - Persists beyond 7 days
 - Bili > 12.9 mg/dL
 - Bili > 15 mg/dL pre
- C. Systemic bacterial, viral, or fungal infection that occurs in the first 28 days of life with hemodynamic changes that result in significant morbidity or mortality.
- D. Premature human milk contains:
 - 1. Higher concentrations of protein, sodium, chloride
 - 2. More lipids, trace elements, vitamins, and energy
 - 3. Lower concentrations of phosphorus and calcium
 - 4. Lower osmolality

Answer: C

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