

AACN CCRN-Neonatal Exam

Volume: 214 Questions

Question: 1

A nurse is educating a new mother about infant care. The mother asks when her baby should be seen for check up. The nurse informs the mother that the schedule of well-baby visits is done:

- A. Every month until the 12th month
- B. At 1, 2 and 6 months
- C. At 1, 2, 4, 6, and 9 months
- D. At 1, 2, 4, 6, 9, and 18 months

Answer: C

Explanation: The recommended schedule of visits is set at 1, 2, 4, 6, and 9 months. This schedule follows the timing of the recommended immunizations.

Question: 2

A 25-year-old mother with a 6-month-old baby asks the nurse if her son should receive the Hepatitis A vaccine. What is the best response of the nurse?

- A. "No. The Hepatitis A vaccine is given to those who are sexually active."
- B. "No. Hepatitis A is given to those who work with contaminated blood specimens."
- C. "Yes. Children who are 6 months of age must receive the vaccine."
- D. "No. The Hepatitis A vaccine is recommended at ages 12 months or 24 months."

Answer: D

Explanation: The Hepatitis A vaccine is recommended at 12 months of age or 24 months of age. It is also recommended for individuals who are travelling outside the country. The Hepatitis B vaccine is given to newborn babies during birth and to individuals who are working with contaminated specimens. Children receive the DTaP at 18 months.

Question: 3

A 39 year old mom, named Sophia, arrives to the Emergency Department with her 2 month old

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girl, however, she only speaks French. What is the best method of communicating with her?

- A. use sign language
- B. use a translation service
- C. have a bilingual staff member translate
- D. both B and C

Answer: B

Explanation: The best method to communicate with a French speaking 39 year old mom who arrives to the Emergency Department with her 2 month old baby would be to use a translation service. This is outlined in many hospitals and nursing professional associations as this is a legal matter and translation services are readily available and should be utilized.

Question: 4

Baby Christopher is rushed to the Emergency Department with a nose bleed that is ceasing to stop, upon history the nurse finds that Christopher's parents are of Ashkenozic descent. What type hemophilia is baby Christopher most likely to have?

- A. Hemophilia A
- B. Hemophilia C
- C. Hemophilia B
- D. Hemophilia A/B

Answer: B

Explanation: Baby Christopher is most likely to have Hemophilia C since his parents are of Ashkenozic descent. This is an X-linked genetic disorder common in those of Ashkenozic descent.

Question: 5

David's mom demonstrates understanding of his proper care of bathing when she states which of the following as taught by nurse Ellen prior to her discharging them?

- A. Use mild baby soap except on face

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- B. Give him a tub bath
- C. Give him a sponge bath until the umbilical cord falls off
- D. Both A and C

Answer: D

Explanation: David's mom demonstrates understanding of his proper care of bathing when she states that she should use mild baby soap except on face and give him a sponge bath until the umbilical cord falls off. This is the safest for proper hygiene and prevention of infection.

Question: 6

Nurse Lilian is teaching her students about post circumcision care of baby Steven. Which of the following show(s) they have understood?

- A. Inspecting the penis immediately after circumcision
- B. Observe the first void after circumcision.
- C. Record the first void post circumcision.
- D. Both B and C

Answer: D

Explanation: Observing and recording the first void after circumcision shows that the students have understood about post circumcision care of baby. While inspecting the penis immediately after circumcision is important it does not show an understanding of the more important need to ensure the infant can properly urinate post-circumcision. The inspecting the penis is usually done by the physician for signs of bleeding and is not as critical for examining functioning post circumcision.

Question: 7

What are important sign for the students to recognize as a positive Ortoloni's sign on baby George?

- A. Hip subluxation.
- B. Clicking sound.

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C. Clunking sound.

D. All of the above.

Answer: D

Explanation: For the students to recognize as a positive Ortoloni's sign on baby George, they should observe all of the above including hip subluxation, clicking and clunking sounds. Ortoloni's test should be performed within a few hours of birth especially to detect any congenital dysplasia of the hip which can be a life debilitating condition if not recognized immediately.

Question: 8

Baby Allan has just been born and Nurse Wayne is checking him for appropriate sensory behavior. Which finding is true about baby Allan's sensory behaviors at birth?

A. Nurse Wayne should stand between 30" and 33" away and wave.

B. Nurse Wayne should stand between 7" to 12" away and wave.

C. Nurse Wayne should stand between 38" to 40" away and wave.

D. Nurse Wayne should stand between 3" to 6" away and wave.

Answer: B

Explanation: In order to check baby Allan's sensory behaviors at birth, Nurse Wayne should stand between 7" to 12" away and wave. This is to ensure that baby Allan can utilize his sense of vision, including visual acuity and fields as well, his sense of detecting a being or object in his vicinity.

Question: 9

A baby Darcy has just been born to mother Helen. A nurse is teaching Helen how to elicit an appropriate palmar reflex in baby Darcy. How should the nurse teach baby Darcy's mother Helen to elicit a good palmar reflex?

A. Place a finger in each of Darcy's hands to stimulate the grasp.

B. Run a finger down his arm.

C. Stroke the bottom of his feet.

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D. None of the above.

Answer: A

Explanation: The nurse should teach baby Darcy's mother Helen to elicit a good palmer reflex by placing a finger in each of Darcy's hands to stimulate the grasp. This is vitally important to detect in the first few hours after birth as a defect could lead to a long term disability if not detected early for intervention.

Question: 10

Nicole, a 29 year old mom, brings baby Andrew to the Emergency Department because she finds some bluish black marks on his back and sacrum that appear like bruises. What should the triage nurse do in this situation?

- A. Call the abuse hotline.
- B. Explain these are not ordinary.
- C. Find out when they appeared.
- D. Explain these are Mongolian spots.

Answer: D

Explanation: In this case, Nicole, the 29 year old mom brings baby Andrew to the Emergency Department because she finds some bluish black marks on his back and sacrum that appear like bruises, the triage should explain that these are Mongolian spots. Mongolian spots are common in neonates and infants and do not have any pathological basis and should not be a cause for alarm.

Question: 11

Sylvia is a 30 year old pregnant mother with a known history of drug abuse including cocaine. During her prenatal visits, she is constantly reminded by the nursing staff not to use cocaine or any drugs during her pregnancy; however she doesn't listen and her baby is born with which possible complication(s)?

- A. Vomiting.
- B. Irritability.
- C. High pitched cry.

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D. All of the above.

Answer: D

Explanation: The pre-natal nursing staff instructed Sylvia not to use cocaine or any drugs during her pregnancy however she did not listen and her baby is born with complication like vomiting, irritability and high pitched cry. This is unfortunate as these are just initial symptoms and longer term outcomes of Sylvia's baby are still to be revealed including not meeting developmental milestones in speech and language.

Question: 12

A very anxious primigravida mother is being seen in the pre-natal clinic at 39 weeks and has indicated that she read that she was not to change the cat box filler but she did early in her pregnancy. She is worried about the possible consequences to her baby. Which of the following is the most common infectious disease for a child being born with whom a mother changed the cat filler box?

- A. Rubella.
- B. Toxoplasmosis.
- C. Herpes virus type 2.
- D. Cytomegalovirus.

Answer: B

Explanation: For a mother who changed the cat filler box, Toxoplasmosis is the most common infectious disease. Toxoplasmosis is found in the feces of cats and pregnant mothers are particular susceptible to passing the disease onto their child and so are readily advised during pre-natal visits not to change the cat box filler while pregnant.

Question: 13

Baby Dwayne was born at 35 weeks premature and is in the neonatal intensive care unit, the nurse taking care of him walks over to baby Dwayne's bassinet and finds him bradycardic and blue. What course of action should be taken?

- A. Provide respiratory support
- B. Provide immediate suction

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- C. Tactile stimulation
- D. All of the above

Answer: D

Explanation: The course of action that should be taken when the neonatal intensive care unit nurse notices baby Dwayne bradycardic and blue should provide respiratory support, tactile stimulation and suction him. This can be an emergency but often times the neonate is just sleeping and is having an apnea episode which can often be resolved with the above maneuvers. If this becomes a frequent occurrence the attending physician should be notified.

Question: 14

Nicole has just given birth to baby Alex and you are the neonatal nurse teaching proper breast feeding technique. Which positions should Nicole NOT use to breast feed baby Alex?

- A. Cradle
- B. Side-lying
- C. Football
- D. Front-lying

Answer: D

Explanation: The position Nicole should not use to breast feed baby Alex is front lying. This is dangerous as regurgitation as well as improper nutrition delivery can be consequences of this position.

Question: 15

Nurse Diane has explained to baby Michael's parents the tips for ensuring safety and preventing possible illness. Which demonstrates comprehension of this?

- A. Expose him to everyone who wants to visit
- B. Use of a proper car seat
- C. Ensure little or no clothing in the beginning
- D. Both B and C.

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Answer: B

Explanation: The demonstration of comprehension by baby Michael's parents for ensuring safety and preventing possible illness for baby Michael include use of a proper care seat. This is important as many infants are not put in proper car seats and thus risk injury in the event of a motor vehicle collision. Infants should not be exposed to anyone with an illness and should be properly dressed and insulated to provide protection from cold weather and other possible pathogens while their immune system develops.

Question: 16

The neonatal nurse assigned to baby Keith notices that his mother has left baby Keith alone with a bottle propped in his mouth. Why should the neonatal nurse be concerned about leaving baby Keith alone with his bottle propped in his mouth?

- A. He may aspirate formula
- B. He may swallow air
- C. He may be at increase risk for otitis media
- D. All of the above.

Answer: D

Explanation: The neonatal nurse should be concerned about leaving baby Keith alone with his bottle propped in his mouth because he may aspirate formula or swallow air as well it is an increased risk for otitis media. This is a dangerous practice and neonatal nurses should be on the constant look out for this as well as instructing the parents not to do this.

Question: 17

Baby Tyrone was just born at term and has been given to the neonatal nursing for APGAR scoring and initial management. What initial injection should Baby Tyrone receive?

- A. Vitamin K 0.5-1mg IM
- B. VitaminK 0.5-1mg SC
- C. Vitamin B 0.5-1mg IM
- D. Vitamin B 0.5-1mg SC

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Answer: A

Explanation: The initial injection baby Tyrone should receive is Vitamin K 0.5-1 mg IM. Vitamin K is a coagulant made in the body into platelets that protects the neonate from bleeding.

Question: 18

After being born and receiving initial care, the neonatal nurse is determining and infants physical maturity. Which tool is most appropriate to utilize?

- A. Ballard assessment tool
- B. Glasgow Coma Scale
- C. FAACS scale
- D. All of the above

Answer: A

Explanation: The most appropriate tool to utilize in this situation is the Ballard gestational age assessment tool. This tool measures the physical maturity of the neonate by assessing different domains in gross motor function.

Question: 19

Upon birth Baby Richard is noticed by his mother Lorraine to have beautiful blue eyes. Lorraine asks the nurse on duty in the nursery when will baby Richard's permanent eye be established?

- A. 3 to 12 months
- B. 12 to 24 months
- C. 24 to 36 months
- D. 36 to 48 months

Answer: A

Explanation: The nurse on duty should inform Lorraine that permanent eye color will be established in 3 to 12 months from birth. The range is due many factors and is dependent heavily upon genetics.

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Question: 20

Baby Amelia is admitted into the neonatal intensive care unit after being born prematurely. When the neonatal nurse rounds on baby Amelia, her mother is quite frightened because baby Amelia is having Doll's eye. How long can this usually go on for?

- A. 5 days
- B. 10 days
- C. 30 days
- D. Permanently

Answer: B

Explanation: Doll's eye usually go on for 10 days and although may be frightening to the parents, are on no pathological or serious concern.

Question: 21

The neonatal nurse on duty is examining baby Mark. Why should the neonatal nurse be very gentle with baby Mark's neck?

- A. He can't support his neck
- B. He can't rotate his head freely
- C. His neck is weak
- D. All of the above

Answer: D

Explanation: The neonatal nurse should be very gentle with baby Mark's neck because baby Mark's neck is weak, he can't support his neck and he can't rotate his head freely. This is very common for neonates as the neonatal nurse can cause permanent damage to the neck if they are not careful and gentle.

Question: 22

The neonatal nurse is called to baby Jack's incubator by his mother because baby Jack is acting 'funny'. The neonatal nurse finds baby Jack to be jittery and having a high pitched cry. What is the most crucial immediate action the neonatal nurse needs to take?