

# CAPSTONE NURSING CARE OF CHILDREN PRACTICE EXAM (SAMPLE)

## STUDY GUIDE



*Prepare with structure. Pass with confidence*



**Copyright © 2026 by Examzify - A Kaluba Technologies Inc. product.**

**ALL RIGHTS RESERVED.**

No part of this book may be reproduced or transferred in any form or by any means, graphic, electronic, or mechanical, including photocopying, recording, web distribution, taping, or by any information storage retrieval system, without the written permission of the author.

Notice: Examzify makes every reasonable effort to obtain accurate, complete, and timely information about this product from reliable sources.

SAMPLE

# Table of Contents

|                             |    |
|-----------------------------|----|
| Copyright .....             | 1  |
| Table of Contents .....     | 2  |
| Introduction .....          | 3  |
| How to Use This Guide ..... | 4  |
| Questions .....             | 5  |
| Answers .....               | 8  |
| Explanations .....          | 10 |
| Next Steps .....            | 16 |

SAMPLE

# Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

# How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

## 1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

## 2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 – 45 minutes). Review a handful of questions, reflect on the explanations.

## 3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

## 4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

## 5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

## 6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

## Questions

SAMPLE

- 1. What approach should a nurse recommend to prevent gastroesophageal reflux in infants?**
  - A. Feed smaller, more frequent meals
  - B. Ensure baby sleeps on the stomach
  - C. Limit liquid intake
  - D. Give formula only
- 2. What finding during a well-child visit for a 6-month-old infant should be reported to the provider?**
  - A. The infant is teething
  - B. The infant does not roll over from his abdomen to his back
  - C. The infant is able to sit with support
  - D. The infant responds to his name
- 3. What is the key focus for a nurse when teaching parents about managing diabetes in children?**
  - A. Emphasizing the importance of extended physical activity
  - B. Providing information on carbohydrate counting
  - C. Encouraging unrestricted sweet treats
  - D. Suggesting regular weight gain tracking
- 4. In planning care for a child with an acute head injury, what should the nurse prioritize?**
  - A. Administer pain medication
  - B. Provide emotional support to the family
  - C. Initiate seizure precautions for the child
  - D. Monitor vital signs continuously
- 5. What instruction should be given to the parent of a school-age child with a throat infection caused by group A beta-hemolytic streptococci?**
  - A. Discontinue antibiotics if symptoms improve
  - B. Continue to administer the prescribed antibiotic for 10 days
  - C. Increase the child's intake of dairy products
  - D. Test the child's throat regularly for recurrence

- 6. What symptom should the nurse expect in a child experiencing a vaso-occlusive crisis due to sickle cell anemia?**
- A. Fever
  - B. Fatigue
  - C. Pain
  - D. Blue-tinged skin
- 7. What important instruction should be given to an adolescent newly prescribed metformin for type 2 diabetes?**
- A. Take it after meals
  - B. Skip doses when not feeling well
  - C. Take the medication at the same time each day
  - D. Use it only when blood sugar is high
- 8. What is an expected physical finding in a child with a kidney infection?**
- A. Abdominal pain
  - B. Flank pain
  - C. Chest pain
  - D. Headache
- 9. What value for urine specific gravity should a nurse expect in a child who has experienced diarrhea for 24 hours?**
- A. 1.000
  - B. 1.020
  - C. 1.035
  - D. 1.050
- 10. What should a parent of a 1-month-old with gastroesophageal reflux do to help manage the condition?**
- A. Add rice cereal to feedings
  - B. Reduce feeding frequency
  - C. Switch to formula
  - D. Thicken all liquids

## **Answers**

SAMPLE

1. A
2. B
3. B
4. C
5. B
6. C
7. C
8. B
9. C
10. A

SAMPLE

## **Explanations**

SAMPLE

**1. What approach should a nurse recommend to prevent gastroesophageal reflux in infants?**

- A. Feed smaller, more frequent meals**
- B. Ensure baby sleeps on the stomach
- C. Limit liquid intake
- D. Give formula only

*Feeding smaller, more frequent meals is an effective approach to help prevent gastroesophageal reflux (GER) in infants. This strategy allows for easier digestion and can reduce the amount of stomach content that may flow back into the esophagus, a common issue in infants. By breaking down feedings into smaller volumes, there is less pressure on the gastrointestinal system, which can help minimize reflux episodes. In addition, smaller meals can contribute to a more comfortable feeding experience, as infants may be less likely to become overly full, thus reducing the potential for reflux symptoms. Maintaining an upright position during and after feedings can further support this strategy, as gravity can help keep the stomach contents in place. Other options, such as having the baby sleep on the stomach, are not recommended due to the increased risk of sudden infant death syndrome (SIDS). Limiting liquid intake is not practical or beneficial for infants who need adequate nutrition for growth and development. Providing formula only excludes breast milk, which can be an important source of nutrition and antibodies for infants. Therefore, the recommendation of smaller, more frequent meals aligns best with clinical practices for managing gastroesophageal reflux in infants.*

**2. What finding during a well-child visit for a 6-month-old infant should be reported to the provider?**

- A. The infant is teething
- B. The infant does not roll over from his abdomen to his back**
- C. The infant is able to sit with support
- D. The infant responds to his name

*During a well-child visit for a 6-month-old infant, it is critical to monitor developmental milestones to ensure that the child is progressing normally. Rolling over is a significant milestone typically achieved by most infants by this age. If an infant does not roll over from their abdomen to their back, it may indicate a delay in motor skill development that could warrant further assessment or intervention by a healthcare provider. Early identification of developmental delays is essential in pediatrics, as it allows for timely support and potential therapies that can facilitate a child's growth and development. In contrast, teething is a common occurrence in infants and may cause discomfort but is not a medical concern that requires reporting unless accompanied by concerning symptoms. Sitting with support is a typical acquisition of gross motor skills around this age. Similarly, responding to their name indicates appropriate social and cognitive development. While all these findings provide valuable information about the infant's growth, the lack of rolling over is the most concerning and should be communicated to the provider for further evaluation.*

**3. What is the key focus for a nurse when teaching parents about managing diabetes in children?**

- A. Emphasizing the importance of extended physical activity
- B. Providing information on carbohydrate counting**
- C. Encouraging unrestricted sweet treats
- D. Suggesting regular weight gain tracking

*The focus on providing information on carbohydrate counting is essential when teaching parents about managing diabetes in children. Carbohydrate counting directly impacts blood glucose levels by helping parents understand how to adjust insulin doses based on the carbohydrate content of their child's meals and snacks. This approach promotes better glycemic control, enabling parents to make informed food choices that stabilize their child's blood sugar levels. Carbohydrate counting also fosters a sense of autonomy and responsibility in children as they learn to understand the relationship between the foods they eat, their insulin administration, and their blood glucose readings. It is an effective strategy that supports both immediate and long-term health goals for children with diabetes. The other options do not align as closely with the immediate needs of diabetes management. While physical activity is important for overall health, it is not the primary focus when educating parents about immediate dietary management. Encouraging unrestricted sweet treats conflicts with the principles of managing diabetes, as it can lead to fluctuating blood glucose levels. Lastly, regular weight gain tracking, while useful in certain contexts, is not as directly related to the daily management of diabetes as carbohydrate counting is.*

**4. In planning care for a child with an acute head injury, what should the nurse prioritize?**

- A. Administer pain medication
- B. Provide emotional support to the family
- C. Initiate seizure precautions for the child**
- D. Monitor vital signs continuously

*Prioritizing the initiation of seizure precautions for a child with an acute head injury is essential due to the potential for neurological compromise. Head injuries can lead to increased intracranial pressure, brain swelling, or changes in mental status, all of which may increase the risk of seizures. Seizures can be a common complication following such injuries, and having precautions in place—such as ensuring a safe environment, using padded side rails, and preparing for seizure management—can help prevent additional injury and provide immediate safety for the child. While administering pain medication, providing emotional support to the family, and monitoring vital signs continuously are also important aspects of care, they do not directly address the immediate risks associated with head injuries, particularly the risk of seizures. Monitoring vital signs is crucial but can be part of the broader ongoing care plan. Emotional support is vital but is generally pursued after immediate physiological concerns are stabilized. Therefore, focusing on seizure precautions takes precedence in the acute setting to protect the patient from the heightened vulnerabilities presented by a head injury.*

**5. What instruction should be given to the parent of a school-age child with a throat infection caused by group A beta-hemolytic streptococci?**

- A. Discontinue antibiotics if symptoms improve
- B. Continue to administer the prescribed antibiotic for 10 days**
- C. Increase the child's intake of dairy products
- D. Test the child's throat regularly for recurrence

*Continuing to administer the prescribed antibiotic for 10 days is crucial in treating a throat infection caused by group A beta-hemolytic streptococci. This bacteria can lead to complications, such as rheumatic fever or post-streptococcal glomerulonephritis, if not fully eradicated. Completing the full course of antibiotics, even if the child feels better before the medication is finished, ensures that all the bacteria are eliminated, reducing the risk of complications and recurrence. Shortening the antibiotic treatment duration based on symptom improvement can lead to the remaining bacteria developing resistance or persistence, thus worsening the child's condition or leading to further health issues. It's also important to note that while dietary changes may be relevant in some scenarios, increasing dairy intake is not specifically beneficial in managing bacterial throat infections and could cause discomfort in some children. Regular throat testing for recurrence, while potentially useful in certain cases, is not a standard recommendation for uncomplicated cases treated effectively with appropriate antibiotics.*

**6. What symptom should the nurse expect in a child experiencing a vaso-occlusive crisis due to sickle cell anemia?**

- A. Fever
- B. Fatigue
- C. Pain**
- D. Blue-tinged skin

*In a vaso-occlusive crisis associated with sickle cell anemia, the most prominent symptom the nurse would expect is pain. This type of crisis occurs when sickle-shaped red blood cells block blood flow in small blood vessels, leading to tissue ischemia and subsequent pain. The intense pain often manifests in the bones, chest, abdomen, or joints and can vary in intensity. While fever, fatigue, and blue-tinged skin can occur in various medical conditions or situations involving sickle cell anemia, they are not the hallmark symptoms directly associated with a vaso-occlusive crisis. Fever might present if there is an infection or another concurrent condition, fatigue can be a generalized symptom due to anemia or chronic illness, and blue-tinged skin indicates cyanosis, which could occur with severe hypoxia but is not specific to vaso-occlusive crises. Pain, therefore, is the defining symptom clinicians expect to see in this situation.*

**7. What important instruction should be given to an adolescent newly prescribed metformin for type 2 diabetes?**

- A. Take it after meals
- B. Skip doses when not feeling well
- C. Take the medication at the same time each day**
- D. Use it only when blood sugar is high

*The instruction to take metformin at the same time each day is crucial for maintaining stable blood glucose levels. Consistency in taking medication helps ensure that the drug maintains an effective level in the bloodstream, which is essential for its therapeutic effects in managing type 2 diabetes. This practice also aids in establishing a routine, which can improve adherence to the medication regimen, particularly for adolescents who may benefit from structure and reminders. Taking metformin regularly can help minimize peaks and troughs in blood sugar levels, thereby preventing fluctuations that can lead to complications. Establishing a habit of taking the medication at the same time each day reinforces its importance in the management of diabetes and helps the individual remember to take it consistently. In contrast, other options present less effective or potentially harmful behaviors. For instance, taking medication after meals may not optimize the medication's effectiveness, while skipping doses when not feeling well can lead to poor glucose control. Using metformin only when blood sugar is high diverges from the intent of regular use to maintain stable glucose levels, further complicating diabetes management. Therefore, emphasizing the importance of a consistent routine underscores the foundation of effective treatment for type 2 diabetes in adolescents.*

**8. What is an expected physical finding in a child with a kidney infection?**

- A. Abdominal pain
- B. Flank pain**
- C. Chest pain
- D. Headache

*Flank pain is a common and expected physical finding in a child with a kidney infection, also known as pyelonephritis. This pain typically occurs in the lower back on the side of the affected kidney. In children, a kidney infection may cause inflammation and irritation in the renal tissue, leading to discomfort that can be felt in the flank area. While abdominal pain may sometimes accompany a kidney infection, it is not as specific or characteristic as flank pain. Chest pain is not associated with kidney infections and could suggest a different type of condition, such as a respiratory issue. Likewise, headaches, while they can occur for various reasons, are not a direct indication of a kidney infection. The presence of flank pain in the context of other symptoms such as fever, urinary urgency, and possibly nausea strongly suggests the presence of a kidney infection in children, making it the correct expected physical finding in this scenario.*

**9. What value for urine specific gravity should a nurse expect in a child who has experienced diarrhea for 24 hours?**

- A. 1.000
- B. 1.020
- C. 1.035**
- D. 1.050

*In children who have experienced diarrhea for an extended period, such as 24 hours, the body is likely to become dehydrated. Diarrhea can lead to significant fluid loss, which results in more concentrated urine. Urine specific gravity is a measure of the concentration of solutes in urine—higher values indicate more concentrated urine due to dehydration. A specific gravity of 1.035 is indicative of concentrated urine, which is expected in this scenario. Normal urine specific gravity typically ranges from 1.005 to 1.030. Values above this range, such as 1.035, suggest that the child may be experiencing oliguria or dehydration due to fluid loss from diarrhea. This concentration shows the kidneys are conserving water in response to the decreased fluid intake and increased output. The other values presented would typically not reflect the concentration expected in a child who is dehydrated from diarrhea. A specific gravity of 1.000 would indicate very dilute urine, suggesting excessive fluid intake or renal issues, while values of 1.050 indicate extreme concentration, which may not be commonly seen unless in severe dehydration situations.*

**10. What should a parent of a 1-month-old with gastroesophageal reflux do to help manage the condition?**

- A. Add rice cereal to feedings**
- B. Reduce feeding frequency
- C. Switch to formula
- D. Thicken all liquids

*Adding rice cereal to feedings is a common recommendation for managing gastroesophageal reflux (GER) in infants. This approach works by thickening the feeding, which can help reduce the frequency and severity of reflux episodes. When the consistency of the formula or breast milk is thickened, it may stay in the stomach more effectively, decreasing the likelihood of spitting up. It's important to ensure that the thickening is done appropriately and based on guidance from a healthcare provider. This practice can improve the infant's comfort and reduce irritability that often accompanies GER, thereby enhancing overall feeding experiences. While thickening all liquids can also be beneficial, it is typically more relevant to solid foods as infants progress in their diets rather than for all feeding scenarios. Reducing feeding frequency or switching formulas may not adequately address the symptom of reflux and could inadvertently lead to inadequate caloric intake. Therefore, adding rice cereal to feedings specifically targets the management of gastroesophageal reflux in a way that aligns with the infant's nutritional needs.*

## Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at [hello@examzify.com](mailto:hello@examzify.com).

Or visit your dedicated course page for more study tools and resources:

<https://capstonenursingcareofchildren.examzify.com>

We wish you the very best on your exam journey. You've got this!

SAMPLE