

EMERGENCY NURSING PEDIATRIC COURSE (ENPC) PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

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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

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- 1. For children, what is the standard blood volume replacement recommendation?**
 - A. 5-10 ml/kg
 - B. 10-20 ml/kg
 - C. 20-30 ml/kg
 - D. 30-40 ml/kg
- 2. A caregiver states that their 2-month-old has had trouble breathing. What is the best next step in management?**
 - A. Obtain a history including immunization status
 - B. Suction nasal passages using a bulb syringe
 - C. Administer oxygen by nasal cannula with the patient in caregiver's arms
 - D. Respiratory assessment is completed so move to circulatory
- 3. Which symptom is critical when evaluating a child's risk for dehydration?**
 - A. Increased thirst
 - B. Normal urination
 - C. Consistent energy levels
 - D. Decreased skin turgor
- 4. In a triage situation, which personal protective equipment (PPE) should be put on first?**
 - A. Face shield
 - B. Gloves
 - C. Gown
 - D. Mask
- 5. During the 1-3 years stage of development, which nursing technique is most effective?**
 - A. Encouraging independence
 - B. Keeping a quiet approach
 - C. Letting them sit on a caregiver's lap
 - D. Using rewards to motivate

- 6. What should a nurse do when they encounter an agitated patient in the clinic?**
- A. Offer them their favorite snack
 - B. Speak loudly to grab their attention
 - C. Identify what they need
 - D. Leave them alone until they calm down
- 7. Which condition may lead to multi-organ dysfunction if shock is not addressed?**
- A. Transient ischemic attack
 - B. Irreversible shock
 - C. Hypotension
 - D. Cardiac arrest
- 8. Which action is typically taken to diagnose the type of priapism?**
- A. Blood transfusion
 - B. Needle aspiration
 - C. Ultrasound imaging
 - D. Endoscopic examination
- 9. What should be avoided to prevent fractures in a patient with osteogenesis imperfecta?**
- A. Routine blood pressure monitoring
 - B. Skin assessments
 - C. Sitting positions
 - D. Physical contact
- 10. What is the best method to distract a 2-year-old during a blood draw?**
- A. Allow them to hold the blood tubes before drawing
 - B. Have them watch a cartoon on an I-pad or cell phone
 - C. Give them an explanation of what will happen
 - D. Prepare the equipment in the room so they can see

Answers

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

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Explanations

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1. For children, what is the standard blood volume replacement recommendation?

- A. 5-10 ml/kg
- B. 10-20 ml/kg**
- C. 20-30 ml/kg
- D. 30-40 ml/kg

The standard blood volume replacement recommendation for children is typically 10-20 ml/kg. This range is based on the need to effectively restore intravascular volume in cases such as hypovolemic shock due to dehydration, bleeding, or other causes. The recommendation of 10-20 ml/kg is aligned with pediatric resuscitation guidelines, emphasizing the importance of prompt and adequate volume replacement to improve perfusion and maintain organ function in critically ill children. This volume replacement can be administered rapidly in an emergency setting, and it is crucial to monitor the response and condition of the child closely during and after the intervention. Using a volume outside of this range could either lead to insufficient resuscitation, risking further deterioration, or excessive fluid replacement, which may lead to complications such as pulmonary edema. Therefore, adhering to the 10-20 ml/kg guideline supports best practices in pediatric emergency nursing.

2. A caregiver states that their 2-month-old has had trouble breathing. What is the best next step in management?

- A. Obtain a history including immunization status
- B. Suction nasal passages using a bulb syringe**
- C. Administer oxygen by nasal cannula with the patient in caregiver's arms
- D. Respiratory assessment is completed so move to circulatory

In the scenario involving a 2-month-old with breathing difficulties, the most appropriate next step is to suction the nasal passages using a bulb syringe. Infants can develop nasal congestion that significantly impairs their ability to breathe effectively, resulting in increased work of breathing and potential respiratory distress. Suctioning helps clear the nasal passages and improves airflow, allowing for more effective breathing. Suctioning is a non-invasive and quick intervention that can be performed safely, and it often provides immediate relief for infants who may struggle with nasal congestion. This action is particularly relevant given an infant's dependency on nasal breathing, especially at such a young age. While gathering a history, particularly regarding the child's immunization status, is valuable in assessing their overall health and exposure to infections, it does not provide an immediate solution to the current respiratory distress the infant is experiencing. Similarly, administering oxygen might be necessary if the situation does not improve, but it is typically indicated after initial assessment and interventions. Conducting a respiratory assessment would also be crucial; however, the immediate need to address potential airway obstruction takes precedence. Therefore, suctioning the nasal passages is the best immediate management step.

3. Which symptom is critical when evaluating a child's risk for dehydration?

- A. Increased thirst
- B. Normal urination
- C. Consistent energy levels
- D. Decreased skin turgor**

Decreased skin turgor is a critical symptom when evaluating a child's risk for dehydration. Skin turgor refers to the skin's elasticity and its ability to return to its normal position after being pinched. In a well-hydrated child, the skin quickly returns to its original position; however, in a dehydrated child, the skin tends to remain tented when pinched, indicating reduced fluid levels in the body. This physical examination finding is a key indicator of the body's hydration status. While increased thirst is a common response to dehydration, it is a subjective symptom and not necessarily measurable, making it less reliable than objective signs like skin turgor. Normal urination suggests that the child is adequately hydrated, which contradicts the assessment of dehydration risk. Consistent energy levels can vary for many reasons and may not specifically indicate hydration status; children can still maintain energy levels despite being dehydrated until it reaches a more severe stage. Thus, decreased skin turgor stands out as a definitive and measurable sign in assessing dehydration risk in a child.

4. In a triage situation, which personal protective equipment (PPE) should be put on first?

- A. Face shield
- B. Gloves
- C. Gown**
- D. Mask

In a triage situation, it is essential to prioritize the order of donning personal protective equipment (PPE) to ensure maximum safety and effectiveness in preventing infection transmission. The gown is typically donned first as it provides a protective barrier for the torso, arms, and clothing against contamination from blood, bodily fluids, and other potentially infectious materials. This is essential in a triage environment where exposure risk may be high. Wearing the gown first helps to establish a protective layer that will shield the wearer from direct contact with patients, ensuring that other layers of PPE, such as gloves, masks, and face shields, can effectively function without being compromised. Once the gown is securely in place, the other PPE items, such as masks, face shields, and gloves, can be added to further protect the healthcare worker. In this context, other choices like gloves, masks, and face shields are crucial components of PPE, but they are best utilized after the gown is secured, as the gown serves as the foundational protective layer against contamination.

5. During the 1-3 years stage of development, which nursing technique is most effective?

- A. Encouraging independence
- B. Keeping a quiet approach
- C. Letting them sit on a caregiver's lap**
- D. Using rewards to motivate

During the 1-3 years stage of development, allowing toddlers to sit on a caregiver's lap is particularly effective as it provides a sense of security and comfort during potentially stressful situations, such as a medical exam or evaluation. This age group is characterized by their developing sense of autonomy and attachment to caregivers, making familiar physical proximity reassuring. Being close to a caregiver can help children feel safe and more cooperative, reducing anxiety and fear associated with medical environments. While encouraging independence is important for toddlers, it needs to be balanced with the comfort and reassurance provided by their caregivers, especially in an emergency nursing context. A quiet approach may not engage them effectively, as toddlers are often inquisitive and may need more interaction. Using rewards can be motivational, but it might not address the immediate emotional needs of young children in distressing situations, where the comforting presence of a caregiver becomes paramount.

6. What should a nurse do when they encounter an agitated patient in the clinic?

- A. Offer them their favorite snack
- B. Speak loudly to grab their attention
- C. Identify what they need**
- D. Leave them alone until they calm down

When encountering an agitated patient, it is essential for the nurse to identify what the patient needs. Understanding the underlying cause of their agitation is crucial for de-escalating the situation and providing appropriate care. This approach helps to address any immediate concerns that may be causing the agitation, whether they are related to pain, fear, or miscommunication. By engaging with the patient and assessing their needs, the nurse can establish rapport and effectively calm the patient, potentially preventing further escalation. Offering a favorite snack may seem supportive but does not directly address the patient's agitation or needs. Speaking loudly might further distress the patient, as it can be perceived as confrontational. Leaving the patient alone can lead to increased anxiety or exacerbate the situation if not handled properly, as patients in distress often require support and guidance. Therefore, identifying the patient's needs is the most effective and therapeutic action a nurse can take in this scenario.

7. Which condition may lead to multi-organ dysfunction if shock is not addressed?

- A. Transient ischemic attack
- B. Irreversible shock**
- C. Hypotension
- D. Cardiac arrest

Irreversible shock is a condition characterized by a severe and prolonged state of shock that can lead to multi-organ dysfunction if not promptly addressed. When the body experiences shock, there is inadequate perfusion of tissues and organs, resulting in cellular hypoxia and eventual cellular death. If this state continues beyond a certain point, it becomes irreversible, leading to a cascade of metabolic derangements and systemic effects that impact multiple organ systems. In the context of shock, the longer the organs are deprived of adequate blood flow and oxygen, the higher the risk of significant and potentially fatal consequences such as organ failure. The effects can be widespread, impacting the kidneys, liver, lungs, and cardiovascular system, ultimately resulting in multi-organ dysfunction syndrome (MODS). Other conditions listed, while serious, do not inherently lead to multi-organ dysfunction in the same direct manner as irreversible shock. For example, transient ischemic attack primarily affects cerebral circulation temporarily and does not lead to multi-organ dysfunction. Hypotension, while concerning, can often be corrected and may not progress to irreversible states if promptly treated. Cardiac arrest is an acute event that demands immediate resuscitation efforts; while it can lead to organ dysfunction if not treated, it does not necessarily progress through the stages of shock

8. Which action is typically taken to diagnose the type of priapism?

- A. Blood transfusion
- B. Needle aspiration**
- C. Ultrasound imaging
- D. Endoscopic examination

The typical action taken to diagnose the type of priapism is needle aspiration. This procedure involves inserting a needle into the corpus cavernosum of the penis to withdraw blood. The characteristics of the aspirated blood can help differentiate between the two primary types of priapism: ischemic (low-flow) and non-ischemic (high-flow). In ischemic priapism, the blood is dark, indicating stagnant venous blood that has become deoxygenated, while in non-ischemic priapism, the blood is brighter and oxygenated, suggesting a different etiology such as a vascular issue. This distinction is crucial because treatment approaches differ significantly based on the type of priapism; ischemic priapism typically requires urgent intervention to prevent tissue damage and potential sexual dysfunction, whereas non-ischemic priapism may resolve spontaneously or require more conservative measures. Other options may involve procedures or assessments typically not aimed directly at diagnosing priapism. Blood transfusions and endoscopic examinations are not standard diagnostic tools for this condition. Ultrasound imaging may provide some ancillary information, especially regarding blood flow characteristics, but it is not the definitive first line diagnostic procedure for identifying the type of priapism as needle aspiration is. Thus, needle

9. What should be avoided to prevent fractures in a patient with osteogenesis imperfecta?

- A. Routine blood pressure monitoring
- B. Skin assessments
- C. Sitting positions
- D. Physical contact**

In patients with osteogenesis imperfecta, which is a genetic disorder characterized by brittle bones and a tendency to fracture, it's crucial to minimize activities and situations that could lead to trauma or stress on the bones. While routine blood pressure monitoring might seem benign, the actual risk associated with it is minimal compared to other activities, making it a less relevant concern for fracture prevention. The key to preventing fractures effectively lies in understanding the implications of physical contact and activities that could lead to falls or injuries. Those patients need to avoid situations that involve significant physical contact. Jumping, rough play, or even certain medical procedures that involve movement can pose risks. Ensuring safe handling and environments is essential to protect patients from fractures. Sitting positions are also an important consideration; however, sitting itself is generally not a risk factor for fractures unless involving unsafe or unstable surfaces. Skin assessments are essential in monitoring for any signs of pressure injuries or other complications but do not directly relate to fracture risks. Choosing to avoid physical contact presents the most significant protective strategy in this context, as the aim is to create a safe environment that minimizes the chances of experiencing fractures due to accidental impacts or stress. Thus, the emphasis on avoiding high-risk interactions is vital for patient safety in those with osteogenesis

10. What is the best method to distract a 2-year-old during a blood draw?

- A. Allow them to hold the blood tubes before drawing
- B. Have them watch a cartoon on an I-pad or cell phone**
- C. Give them an explanation of what will happen
- D. Prepare the equipment in the room so they can see

Using a distraction technique is particularly effective with young children, such as a 2-year-old, during potentially distressing procedures like a blood draw. Having them watch a cartoon on an I-pad or cell phone serves multiple purposes. It captures their attention, engages them in a familiar and enjoyable activity, and allows them to momentarily forget about the procedure they are about to experience. This method not only helps to alleviate anxiety but can also create a more calming environment, making the procedure less intimidating. Visual media, especially cartoons that they enjoy, can significantly reduce their focus on the discomfort of the blood draw itself. In contrast, other methods such as allowing the child to hold blood tubes or preparing the equipment for them to see may not effectively engage the child's attention or may even raise their anxiety about what is happening. Giving an explanation can be helpful for older children or those who are able to understand, but for a 2-year-old, this might not be effective as they may not comprehend the details. Utilizing distraction through visual entertainment is generally considered the most effective way to manage their focus during such experiences.

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.

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

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

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