

# Neonatal and Pediatric Respiratory Care Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

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# Table of Contents

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

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

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- 1. An L:S ratio less than what indicates surfactant immaturity in fetal lung assessment?**
  - A. L:S > 3:1 indicates immaturity**
  - B. L:S < 2:1 indicates surfactant immaturity**
  - C. L:S ratio is not used in this assessment**
  - D. L:S = 2:1 indicates immaturity**
  
- 2. The home health care practitioner role includes which of the following?**
  - A. Good teacher, teaching patients and family on equipment procedures and treatment plans**
  - B. Only equipment repair**
  - C. Prescribing all medications**
  - D. Performing surgeries**
  
- 3. Chest radiographs in respiratory distress syndrome most characteristically show:**
  - A. Clear lungs**
  - B. Ground-glass appearance with diffuse atelectasis and air bronchograms**
  - C. Cardiomegaly without edema**
  - D. Lobar consolidation with effusion**
  
- 4. Which finding is NOT typically associated with croup?**
  - A. Inspiratory stridor**
  - B. Barking cough**
  - C. Cyanosis**
  - D. Hyperglycemia**
  
- 5. In the contemplative stage, which intervention technique is appropriate?**
  - A. Avoid arguments**
  - B. Use empathy**
  - C. Prescribe medication only**
  - D. Ignore barriers**

- 6. Which action is essential to maintain asepsis during ventilator setup?**
- A. Wash hands**
  - B. Use dirty gloves**
  - C. Reuse disposable circuits without cleaning**
  - D. Delay sterilization**
- 7. APGAR scoring evaluates which five areas?**
- A. Heart rate, Respiratory effort, Color, Reflex irritability, Muscle tone**
  - B. Heart rate, Temperature, Color, Reflex irritability, Muscle tone**
  - C. Blood pressure, Respiratory effort, Color, Reflex irritability, Muscle tone**
  - D. Heart rate, Respiratory effort, Color, Respiratory rate, Muscle tone**
- 8. During home health infection control, which item should be worn for procedures involving contact with blood, body fluids, or secretions?**
- A. HAND HYGIENE**
  - B. GLOVES**
  - C. GOWNS**
  - D. MASK**
- 9. In home health care, which group typically requires more parental involvement?**
- A. Adults**
  - B. Children**
  - C. Elderly**
  - D. Neonates**
- 10. The Plan of Care must be signed by whom?**
- A. The patient's physician**
  - B. The patient**
  - C. The home health aide**
  - D. The equipment supplier**

## Answers

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

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## **Explanations**

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**1. An L:S ratio less than what indicates surfactant immaturity in fetal lung assessment?**

- A. L:S > 3:1 indicates immaturity**
- B. L:S < 2:1 indicates surfactant immaturity**
- C. L:S ratio is not used in this assessment**
- D. L:S = 2:1 indicates immaturity**

Lecithin-to-sphingomyelin (L:S) ratio gauges surfactant production in the fetal lungs. Lecithin, mainly dipalmitoyl phosphatidylcholine, rises as the lungs mature, while sphingomyelin stays relatively constant. Because of this, the L:S ratio increases with advancing gestation. An L:S ratio below 2:1 indicates insufficient surfactant production, signaling pulmonary immaturity and a higher risk of respiratory distress syndrome after birth. When the ratio reaches 2:1 or higher, the lungs are generally considered mature enough to handle air breathing at birth, with many labs using 2.5:1 as a stricter cutoff or adding phosphatidylglycerol testing for confirmation. The other statements misstate the threshold or the use of the test: a higher ratio does not indicate immaturity, and the ratio is indeed used to assess maturity.

**2. The home health care practitioner role includes which of the following?**

- A. Good teacher, teaching patients and family on equipment procedures and treatment plans**
- B. Only equipment repair**
- C. Prescribing all medications**
- D. Performing surgeries**

The main idea is that home health care hinges on educating patients and their families. A clinician in this setting must be a good teacher, showing how to use equipment correctly, perform procedures, and follow the treatment plan. This education supports safe home management, proper device use (like oxygen, nebulizers, pumps), recognition of warning signs, and adherence to medications and follow-up steps. When caregivers understand what to do and why, outcomes improve and complications are less likely. Equipment repair, prescribing medications, and performing surgeries aren't typically within the home health role. Repairs are usually handled by technicians, prescribing requires a clinician with authorization, and surgeries are done by surgeons in appropriate settings.

**3. Chest radiographs in respiratory distress syndrome most characteristically show:**

**A. Clear lungs**

**B. Ground-glass appearance with diffuse atelectasis and air bronchograms**

**C. Cardiomegaly without edema**

**D. Lobar consolidation with effusion**

RDS in newborns stems from surfactant deficiency, which makes the lungs stiff and prone to alveolar collapse. On chest radiographs this leads to widespread, subtle haziness with low lung volumes—a diffuse reticulogranular or “ground-glass” appearance due to diffuse atelectasis. The collapsed alveoli contrast with the still-air-filled bronchi, so you see air bronchograms running through the lungs. This combination—diffuse involvement with air bronchograms—is the classic radiographic pattern for respiratory distress syndrome. Other patterns don’t fit this scenario: clear lungs would not be expected in RDS; focal lobar consolidation with effusion suggests pneumonia with pleural fluid; cardiomegaly without edema points toward cardiac causes rather than surfactant deficiency.

**4. Which finding is NOT typically associated with croup?**

**A. Inspiratory stridor**

**B. Barking cough**

**C. Cyanosis**

**D. Hyperglycemia**

Croup presents as an upper airway inflammatory process that narrows the subglottic area of the larynx and trachea, causing symptoms driven by airway obstruction. The hallmark signs reflect this narrowed airway: a distinctive inspiratory stridor from turbulent airflow and a barking, seal-like cough from inflammation of the larynx and lower in the upper airway. Cyanosis can appear if the obstruction becomes severe enough to significantly impair oxygenation. Hyperglycemia, however, is not a typical feature of croup. This condition mainly affects the airway rather than metabolic processes, so glucose levels are not a defining part of its presentation. While stress can transiently raise glucose in any ill child, that isn’t a characteristic finding used to describe croup.

**5. In the contemplative stage, which intervention technique is appropriate?**

- A. Avoid arguments**
- B. Use empathy**
- C. Prescribe medication only**
- D. Ignore barriers**

In the contemplative stage, individuals are weighing the benefits and downsides of change and often feel ambivalent. Empathy is the most effective approach here because it validates those mixed feelings and reduces defensiveness, creating a safe space for the person to explore their ambivalence. Through reflective listening and acknowledging concerns, you help them articulate their own reasons for and against changing, which builds internal motivation to move toward preparation. Directly arguing or persuading tends to trigger resistance, and focusing only on medication or ignoring barriers does not address motivation or the real obstacles the person faces. By using empathy, you support autonomy and readiness, making it easier for the person to consider concrete steps toward change.

**6. Which action is essential to maintain asepsis during ventilator setup?**

- A. Wash hands**
- B. Use dirty gloves**
- C. Reuse disposable circuits without cleaning**
- D. Delay sterilization**

Maintaining asepsis begins with hand hygiene. Before touching the ventilator, patient, or any circuit components, washing hands removes transient microorganisms that could be transferred to sterile surfaces or the airway. Clean hands reduce the risk of introducing infection during assembly and connection of the ventilator circuit, which is especially crucial in neonates where infections can have serious consequences. Using dirty gloves can still transfer organisms and gives a false sense of cleanliness. Reusing disposable circuits without cleaning defeats sterility and can introduce contamination. Delaying sterilization allows microbes to grow on equipment. So, washing hands is the essential step to keep the setup aseptic and protect the patient from infection.

## 7. APGAR scoring evaluates which five areas?

- A. Heart rate, Respiratory effort, Color, Reflex irritability, Muscle tone**
- B. Heart rate, Temperature, Color, Reflex irritability, Muscle tone**
- C. Blood pressure, Respiratory effort, Color, Reflex irritability, Muscle tone**
- D. Heart rate, Respiratory effort, Color, Respiratory rate, Muscle tone**

APGAR scoring focuses on how well a newborn has adapted to life outside the womb by quickly assessing five observable areas at the moment after birth: heart rate, respiratory effort, color, reflex irritability, and muscle tone. Each area gets a score of 0, 1, or 2, and the total (0-10) helps gauge the newborn's immediate need for intervention and ongoing monitoring. Specifically, heart rate is 0 if absent, 1 if below 100 bpm, and 2 if above 100 bpm. Respiratory effort is 0 for no breathing, 1 for slow or irregular breathing, and 2 for good, crying respiration. Color is 0 for blue/pale all over, 1 for pink body with blue extremities, and 2 for completely pink. Reflex irritability is 0 for no response, 1 for a grimace or feeble cry, and 2 for sneeze, cough, or pulls away. Muscle tone is 0 for limp, 1 for some flexion, and 2 for active motion. The total score helps determine immediate needs but does not predict long-term outcomes. It's important to note that temperature or blood pressure are not part of the APGAR evaluation, nor is respiratory rate treated as its own category.

## 8. During home health infection control, which item should be worn for procedures involving contact with blood, body fluids, or secretions?

- A. HAND HYGIENE**
- B. GLOVES**
- C. GOWNS**
- D. MASK**

The key idea is using the right barrier to protect against exposure when handling blood or body fluids. Gloves provide the direct barrier for the hands, which are most likely to come into contact with these fluids during procedures. Wearing gloves prevents skin contact with blood, body fluids, or secretions and helps reduce the risk of pathogen transmission to you and the patient. Remember to perform hand hygiene before donning and after removing gloves to maintain safety. Gowns protect clothing and skin from splashes, and masks protect mucous membranes from droplets; these may be added if there's a higher splash or aerosol risk, but for direct contact with fluids, gloves are the essential item.

**9. In home health care, which group typically requires more parental involvement?**

- A. Adults**
- B. Children**
- C. Elderly**
- D. Neonates**

In home health care, the level of parental involvement is highest when the patient cannot manage care themselves. Children fall into this category because they lack the knowledge, judgment, and physical ability to safely administer medications, use devices, adhere to treatment schedules, and recognize early warning signs. Parents or guardians become the primary organizers of care, preparing medicines, monitoring growth and development, coordinating appointments, and communicating with clinicians. Adults typically self-manage most of their care with some support, and elderly patients often require assistance but can still participate in decisions and self-care to a degree. Neonates require a great deal of parental involvement as well, but in the broader context, pediatric care places ongoing, daily parental management at the forefront due to the child's dependence and need for consistent guidance over time.

**10. The Plan of Care must be signed by whom?**

- A. The patient's physician**
- B. The patient**
- C. The home health aide**
- D. The equipment supplier**

A Plan of Care is a formal medical document that lays out goals, treatment strategies, and how often care will be delivered. It must be signed by the physician who diagnoses the patient and orders the treatments, because only a licensed clinician has the authority to authorize medical interventions and confirm medical necessity. The patient or family may acknowledge and participate, but their signature does not authorize the plan. The home health aide and equipment supplier implement and provide services, not approve the medical plan. In pediatric respiratory care, this ensures that therapies like oxygen, suctioning, and airway clearance are properly authorized and aligned with the patient's diagnosis and 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://neonatalpediariespiratorycare.examzify.com>**

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

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