

PEDIATRIC ATI PRACTICE EXAM (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 how long should a nurse maintain droplet precautions for an adolescent with bacterial meningitis?**
 - A. Until the adolescent is afebrile
 - B. For 7 days following admission
 - C. Until the adolescent has a negative blood culture
 - D. For 24 hours after starting antimicrobial therapy

- 2. What developmental concept does playing peek-a-boo help develop in an 8-month-old child?**
 - A. Hand-eye coordination
 - B. Sense of trust
 - C. Object permanence
 - D. Egocentrism

- 3. What should the nurse assess for in an adolescent who has pain and tingling after a cast application?**
 - A. Signs of infection
 - B. Circumferential swelling
 - C. Circulatory impairment
 - D. Skin abrasions

- 4. What should a nurse teach a guardian about teething in an infant?**
 - A. "Your baby might pull at their ears when they are teething."
 - B. "Rub your baby's gums with an aspirin to decrease discomfort."
 - C. "Place a beaded teething necklace around your baby's neck."
 - D. "Your baby's upper middle teeth will erupt first."

- 5. What indicates that a child has understood teaching regarding a bone marrow aspiration procedure?**
 - A. I'll have to lie on my belly while it's done
 - B. I can eat before the procedure
 - C. It won't take long
 - D. I will be able to go home immediately

- 6. What manifestation indicates effective treatment with prednisone for a child with primary nephrotic syndrome?**
- A. Decrease in edema.
 - B. Increased abdominal girth.
 - C. Decreased appetite.
 - D. Increased protein in the urine.
- 7. What should parents avoid when dealing with potential exposure to toxic substances?**
- A. Inducing vomiting unless instructed.
 - B. Calling poison control for advice.
 - C. Giving water to dilute the substance.
 - D. Transporting the child to the hospital immediately.
- 8. What type of isolation precautions are necessary for a toddler with bacterial meningitis?**
- A. Protective environment
 - B. Contact precautions
 - C. Airborne precautions
 - D. Droplet precautions
- 9. When obtaining a peak expiration flow rate from an adolescent, which action should the nurse take?**
- A. Document the average of the client's three attempts.
 - B. Instruct the client to exhale slowly over 5 seconds into the meter.
 - C. Determine the zone according to the client's age.
 - D. Have the client stand during the procedure.
- 10. During a well-child visit for a 6-month-old infant, which finding indicates the need for further assessment?**
- A. Grabs feet and pulls them to her mouth
 - B. Posterior fontanel is closed
 - C. Legs remain crossed and extended when supine
 - D. Birth weight has doubled

Answers

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

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Explanations

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1. For how long should a nurse maintain droplet precautions for an adolescent with bacterial meningitis?

- A. Until the adolescent is afebrile
- B. For 7 days following admission
- C. Until the adolescent has a negative blood culture
- D. For 24 hours after starting antimicrobial therapy**

The appropriate duration for maintaining droplet precautions for an adolescent with bacterial meningitis is 24 hours after starting antimicrobial therapy. Bacterial meningitis can be transmitted through respiratory droplets, and the use of antimicrobial therapy significantly reduces the risk of transmitting the infection to others. Typically, once the patient has received effective antibiotics for a sufficient duration—usually around 24 hours—they are no longer considered contagious. This is based on the understanding that the bacteria are eradicated from the respiratory secretions after this period, lowering the likelihood of spread to others. Maintaining droplet precautions until the adolescent is afebrile could be misleading, as fever is not necessarily an indicator of infectiousness. The same applies to the option about waiting for a negative blood culture; although negative cultures might indicate the absence of bacteria, the primary concern is the transmission risk in the first 24 hours after initiating treatment. The 7-day timeframe related to admission does not align with current standards for contagiousness in patients receiving the appropriate treatment.

2. What developmental concept does playing peek-a-boo help develop in an 8-month-old child?

- A. Hand-eye coordination
- B. Sense of trust
- C. Object permanence**
- D. Egocentrism

Playing peek-a-boo is a significant activity for an 8-month-old child as it serves to develop the concept of object permanence. Object permanence is the understanding that objects continue to exist even when they are not in sight. When a caregiver hides their face or an object and then reveals it, it reinforces the child's awareness that the person or object is still there despite being temporarily hidden. This emerging cognitive ability is crucial as it reflects the child's growing understanding of their world and promotes cognitive development. At this age, children are beginning to understand that people and things do not just disappear when they can't see them. Engaging in games like peek-a-boo helps strengthen this concept through repetition and predictable patterns, allowing the child to explore the idea that the world is stable and continuous.

3. What should the nurse assess for in an adolescent who has pain and tingling after a cast application?

- A. Signs of infection
- B. Circumferential swelling
- C. Circulatory impairment**
- D. Skin abrasions

In the case of an adolescent experiencing pain and tingling after a cast application, assessing for circulatory impairment is crucial. The presence of pain and tingling can indicate compromised blood flow to the area, which might occur if the cast is too tight or if there is excessive swelling that restricts circulation. It's important to monitor for any signs of decreased circulation, such as changes in skin color, temperature, or pulses below the cast. By identifying and addressing circulatory impairment promptly, the nurse can help prevent serious complications, such as tissue damage or loss of function. While signs of infection, circumferential swelling, and skin abrasions are also relevant aspects to consider in the context of cast management, the immediate concern in the presence of pain and tingling points primarily to potential issues with blood flow. Thus, focusing on circulatory impairment is the appropriate priority in this scenario.

4. What should a nurse teach a guardian about teething in an infant?

- A. "Your baby might pull at their ears when they are teething."**
- B. "Rub your baby's gums with an aspirin to decrease discomfort."
- C. "Place a beaded teething necklace around your baby's neck."
- D. "Your baby's upper middle teeth will erupt first."

A common sign that an infant is experiencing teething discomfort is the act of pulling at their ears. This behavior is often a reflexive response that occurs when the discomfort of teething is mistaken for ear pain due to the proximity of the gums to the ears. As teeth begin to erupt through the gums, infants can feel significant discomfort and may react in various ways, including ear pulling. It's important for guardians to recognize this behavior as a possible indication of teething so they can provide appropriate care and relief measures. Other suggestions such as applying aspirin on the gums are unsafe and not recommended, as aspirin can lead to serious complications. Beaded teething necklaces also pose a choking hazard and shouldn't be used; infants should be supervised closely with any teething aids. Being informed about the typical eruption pattern of teeth can also help guardians prepare for their infant's development, but usually, the lower central incisors tend to be the first to erupt rather than the upper middle teeth.

5. What indicates that a child has understood teaching regarding a bone marrow aspiration procedure?

- A. I'll have to lie on my belly while it's done**
- B. I can eat before the procedure
- C. It won't take long
- D. I will be able to go home immediately

The statement about needing to lie on the belly during a bone marrow aspiration procedure indicates an understanding of the positioning required for the procedure. Typically, children are instructed to lie in a specific position to ensure comfort and proper access to the site where the aspiration will occur, which is generally the back of the hip bone. This reflects the child's comprehension of the procedure's requirements and reassures that they are aware of the physical actions they need to take during the procedure. Other statements, while they may reflect some degree of understanding or beliefs about the procedure, do not necessarily indicate a complete grasp of the teaching regarding how to prepare for the procedure itself. For instance, the ability to eat before the procedure may depend on specific medical instructions, and suggesting it won't take long or that they can go home immediately may not adequately convey the nuances of what to expect before and after the procedure. Thus, understanding the need to lie in a particular position is indicative of a more detailed awareness of what will be required during the aspiration.

6. What manifestation indicates effective treatment with prednisone for a child with primary nephrotic syndrome?

- A. Decrease in edema.**
- B. Increased abdominal girth.
- C. Decreased appetite.
- D. Increased protein in the urine.

A decrease in edema is a key manifestation that indicates effective treatment with prednisone for a child with primary nephrotic syndrome. Prednisone, a corticosteroid, helps reduce inflammation and suppress the immune response, which is beneficial in managing nephrotic syndrome. One of the primary symptoms of this condition is edema, or swelling, caused by excess fluid retention due to proteinuria (loss of proteins in the urine) and low serum protein levels. When prednisone treatment is effective, there will be a notable reduction in edema as the fluid balance begins to improve. The medication also helps in restoring protein levels in the bloodstream, which aids in alleviating the symptoms associated with nephrotic syndrome. The presence of increased abdominal girth, decreased appetite, or increased protein in the urine would not suggest effective treatment; instead, they are signs that further assessment and modification of the treatment plan may be required. Therefore, noticing a decrease in edema is a clear and positive indicator of the treatment's success.

7. What should parents avoid when dealing with potential exposure to toxic substances?

- A. Inducing vomiting unless instructed.**
- B. Calling poison control for advice.
- C. Giving water to dilute the substance.
- D. Transporting the child to the hospital immediately.

Inducing vomiting unless instructed by a medical professional is crucial to avoid because it can sometimes cause more harm than good in cases of poisoning. Ingesting certain toxic substances may lead to additional complications if the child vomits, such as aspiration into the lungs, which can cause serious respiratory issues. Additionally, when a parent induces vomiting without expert guidance, they may not be aware of the specific substance involved or how it reacts in the body, which could lead to dangerous outcomes. Therefore, it is essential for parents to seek professional advice before taking any action regarding potential poisoning, ensuring that the child's safety is prioritized.

8. What type of isolation precautions are necessary for a toddler with bacterial meningitis?

- A. Protective environment
- B. Contact precautions
- C. Airborne precautions
- D. Droplet precautions**

For a toddler diagnosed with bacterial meningitis, droplet precautions are necessary due to the mode of transmission of the pathogens that cause this illness. Bacterial meningitis can be spread through respiratory droplets when an infected person coughs or sneezes, which means close contact with an infected individual can result in transmission. Droplet precautions involve wearing a mask when within three feet of the infected individual, ensuring hand hygiene, and possibly using face shields or goggles in certain situations. This type of isolation is critical to prevent the spread of the infectious agent, particularly in settings where young children are present, as they can be more vulnerable to severe illness. Understanding the nature of bacterial meningitis and how it spreads highlights the importance of droplet precautions over other types such as contact, airborne, or protective environment precautions, which are not indicated in this scenario.

9. When obtaining a peak expiration flow rate from an adolescent, which action should the nurse take?

- A. Document the average of the client's three attempts.
- B. Instruct the client to exhale slowly over 5 seconds into the meter.
- C. Determine the zone according to the client's age.
- D. Have the client stand during the procedure.**

The recommended action when obtaining a peak expiratory flow rate from an adolescent involves ensuring that the client is in a position that facilitates optimal lung expansion and airflow. Having the client stand during the procedure is ideal because it allows for better diaphragmatic movement and enhances the accuracy of the measurement. Standing eliminates any potential restriction that might occur if the individual were seated, thereby providing a more reliable flow rate reading. While the other considerations—such as documenting the average of the attempts and instructing on the correct technique—are important aspects of the overall process, the physical position of the client plays a crucial role in obtaining an accurate measurement. It's essential to have the client perform the task correctly for reliable results, but the foundational step of being upright should not be overlooked as it directly impacts the respiratory mechanics involved in the procedure.

10. During a well-child visit for a 6-month-old infant, which finding indicates the need for further assessment?

- A. Grabs feet and pulls them to her mouth
- B. Posterior fontanel is closed
- C. Legs remain crossed and extended when supine**
- D. Birth weight has doubled

The finding indicating the need for further assessment in a 6-month-old infant is when the legs remain crossed and extended while in a supine position. This presentation could suggest potential developmental delays or neurological concerns, as by this age, infants typically exhibit increased muscle tone and mobility. Most infants will demonstrate a level of motor development where they can bend their legs and kick them while lying down. In contrast, the other findings reflect typical developmental milestones for this age. Grabbing feet and pulling them to the mouth indicates normal gross motor skill progression and self-exploration. The closure of the posterior fontanel is developmentally appropriate, as it usually closes by 2 to 3 months. Doubling the birth weight is a significant growth milestone expected around 5 to 6 months of age, further affirming proper growth and nutritional status. Thus, the concern should primarily focus on the abnormal extension and crossing of the legs, which warrants further evaluation.

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:

<https://pediatricati.examzify.com>

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

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