

# Pediatrics Exam 2 - Early Childhood Preventative Care Practice Exam (Sample)

## Study Guide



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

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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. What is the recommended lead time for informing a child about an upcoming hospitalization?**
  - A. 5-8 days prior**
  - B. 1-2 days prior**
  - C. On the day of admission**
  - D. 4 weeks prior**
  
- 2. Which of the following is NOT a 4-year gross motor milestone?**
  - A. Skips on 1 foot**
  - B. Climbs stairs, alternating feet without support**
  - C. Balances on 1 foot, hops, and skips**
  - D. Draws a person with at least 3 body parts**
  
- 3. What is the recommended total sleep per day for a 3- to 4-year-old?**
  - A. 10-11 hours**
  - B. 12-13 hours**
  - C. 14-15 hours**
  - D. 8-9 hours**
  
- 4. What are the three steps in the management plan for students with disabilities or developmental delays?**
  - A. Responsiveness to intervention 2. Section 504 plan 3. IDEA/IEP**
  - B. Individual therapy; 3. Regular evaluation; 4. Parent conference**
  - C. Diagnosis; 2. Medication; 3. Follow-up**
  - D. Counseling; 2. Tutoring; 3. School transition**
  
- 5. Which principle describes how educational media should be used with young children?**
  - A. Educational media consumption should be used in the correct capacity to support learning**
  - B. Media should be avoided in early education**
  - C. Media should replace hands-on activities whenever possible**
  - D. Any media use is acceptable if it is entertaining**

- 6. If a parent is concerned about their child's school readiness in cognition, following directions, language, maturity, or motor ability, what should you explore?**
- A. Explore eligibility for state-funded preschool**
  - B. Arrange immediate IQ testing**
  - C. Enroll in private tutoring**
  - D. Schedule a pediatric neurology consult**
- 7. Which vaccine is listed first in the 4-year vaccination set?**
- A. DTaP**
  - B. IPV**
  - C. MMR**
  - D. VAR**
- 8. Which of the following is NOT a 5-year screening?**
- A. Growth and development screening**
  - B. Vision**
  - C. Hearing**
  - D. Oral health**
- 9. Which practice should children be taught to prevent pet bites or aggression?**
- A. Ask permission before approaching/petting**
  - B. Run toward unfamiliar animals**
  - C. Grab the animal's tail**
  - D. Feed animals without asking owner**
- 10. Which is a 4-year verbal language milestone?**
- A. Uses 4 word sentences**
  - B. Draws recognizable pictures**
  - C. Reads simple words**
  - D. Understands spatial terms like near and far**

## Answers

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

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## **Explanations**

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**1. What is the recommended lead time for informing a child about an upcoming hospitalization?**

- A. 5-8 days prior**
- B. 1-2 days prior**
- C. On the day of admission**
- D. 4 weeks prior**

Providing developmentally appropriate information about an upcoming hospitalization with a little time for processing helps reduce fear and improve cooperation. Five to eight days before the stay gives enough lead time for parents and child-life staff to tailor explanations, address questions, and rehearse coping strategies or routines, and it allows the child to tour the unit or see equipment in a non-threatening way. Sharing details too close to the event (or on the day of admission) can spike anxiety and leave little opportunity to ask questions or practice coping, while telling far in advance (such as weeks ahead) can lead to unnecessary worry or forgetting details by the time the hospitalization occurs.

**2. Which of the following is NOT a 4-year gross motor milestone?**

- A. Skips on 1 foot**
- B. Climbs stairs, alternating feet without support**
- C. Balances on 1 foot, hops, and skips**
- D. Draws a person with at least 3 body parts**

At around age four, kids gain coordination for activities like briefly balancing on one foot, hopping on one foot, and climbing stairs with alternating feet without help. Skipping tends to come a bit later, so a statement that lists balancing on a foot, hopping, and skipping together describes a skill level beyond what's typical for four years. That's why it isn't a four-year gross motor milestone. The other options describe abilities that fit four-year gross motor development (and one option describes a drawing task, which is a fine motor/cognitive skill rather than a gross motor one).

**3. What is the recommended total sleep per day for a 3- to 4-year-old?**

- A. 10-11 hours
- B. 12-13 hours**
- C. 14-15 hours
- D. 8-9 hours

The main idea here is how much sleep preschoolers need in a 24-hour period. For a 3- to 4-year-old, about 12 to 13 hours of total sleep each day is typical and appropriate, often including a daytime nap. This amount supports growth, brain development, mood, and behavior, and fits with the pattern many children at this age still needing some daytime rest alongside nighttime sleep. Too little sleep can lead to irritability, trouble paying attention, and behavior problems, while markedly more sleep than this is usually not necessary or typical for this age. Context: during early childhood, sleep supports growth hormone release, learning, and consolidation of memories. A daytime nap is common at this stage and helps reach the total daily sleep target. As children approach kindergarten age, some transition away from naps, but 12-13 hours total remains a reasonable guideline for this age range. Briefly, the other options don't fit as well because 10-11 hours is generally short for a 3- to 4-year-old, 14-15 hours is longer than typical for this age, and 8-9 hours is consistently insufficient for optimal development and daytime functioning.

**4. What are the three steps in the management plan for students with disabilities or developmental delays?**

- A. Responsiveness to intervention 2. Section 504 plan 3. IDEA/IEP**
- B. Individual therapy; 3. Regular evaluation; 4. Parent conference
- C. Diagnosis; 2. Medication; 3. Follow-up
- D. Counseling; 2. Tutoring; 3. School transition

The idea behind planning for students with disabilities or developmental delays is to move from early identification and support to formal accommodations or specialized instruction as needed. The three steps are: first, Responsiveness to Intervention, a proactive, data-driven framework in general education that uses multiple tiers of targeted instruction and frequent progress monitoring to identify students who need additional help. This step emphasizes early intervention and data to decide who needs further assessment. Second, a Section 504 plan, which comes into play when a student has a disability that affects a major life activity and requires accommodations to access the general education environment. It provides specific supports and modifications to ensure equal opportunity, even if the student does not qualify for special education services. Third, IDEA/IEP, used for students whose disability requires specially designed instruction. The IEP outlines present levels of performance, annual goals, specific instructional services, related services, and placement, with active parental involvement and ongoing progress checks. This sequence reflects a continuum from general education supports to formal accommodations and then to individualized, specialized education as appropriate, ensuring every student receives the right level of support.

**5. Which principle describes how educational media should be used with young children?**

- A. Educational media consumption should be used in the correct capacity to support learning**
- B. Media should be avoided in early education**
- C. Media should replace hands-on activities whenever possible**
- D. Any media use is acceptable if it is entertaining**

Using educational media in the correct capacity means choosing content that supports learning goals, is appropriate for the child's age, and is used with purposeful guidance. When media is aligned with developmentally suitable objectives and paired with adult involvement, it can reinforce concepts, model problem-solving, and extend hands-on activities rather than replace them. The emphasis is on purpose: media becomes a learning tool that complements real-world exploration and interaction, not a default substitute for it. For young children, co-viewing or guided use helps them process what they see, connect it to what they're doing, and apply new ideas to concrete experiences. Keep the time limited and choose interactive, high-quality materials rather than passive entertainment, so the child gains learning benefits rather than simply being entertained.

**6. If a parent is concerned about their child's school readiness in cognition, following directions, language, maturity, or motor ability, what should you explore?**

- A. Explore eligibility for state-funded preschool**
- B. Arrange immediate IQ testing**
- C. Enroll in private tutoring**
- D. Schedule a pediatric neurology consult**

The main idea is to connect families with early education resources that include developmental screening and access to services. When a parent is concerned about readiness across cognition, following directions, language, maturity, or motor ability, exploring eligibility for state-funded preschool is the best next step because these programs routinely screen development and can provide or connect the child with needed supports (like speech, OT, or classroom accommodations) if they qualify. This helps identify delays early in a supportive setting and offers services that directly address multiple areas of development, setting the child up for better school readiness. Other options aren't as helpful as a first step: IQ testing isn't the usual initial tool for readiness and can be influenced by language and experience; private tutoring focuses on academic tasks rather than identifying and addressing underlying developmental needs; a pediatric neurology consult isn't indicated unless there are specific neurological concerns or red flags beyond typical developmental variation.

**7. Which vaccine is listed first in the 4-year vaccination set?**

- A. DTaP**
- B. IPV**
- C. MMR**
- D. VAR**

DTaP is listed first because, in the standard 4-year-old immunization set, the diphtheria-tetanus-acellular pertussis vaccine is the first component shown in the typical order. This reflects the continuation of the early childhood DTaP series and is a common convention in scheduling presentations, where DTaP often appears first in a multiprotocol visit. The other vaccines—IPV, MMR, and Varicella—follow in that same visit because they are all due around age 4 and are routinely given together when appropriate. The important point is that all four vaccines are recommended around this age; the ordering is mainly about presentation, not different levels of urgency or sequencing for protection.

**8. Which of the following is NOT a 5-year screening?**

- A. Growth and development screening**
- B. Vision**
- C. Hearing**
- D. Oral health**

At about five years old, the typical preventive visit emphasizes sensory and dental health, since problems in vision, hearing, or oral health can most directly impact learning and school readiness. Vision screening catches visual problems that can interfere with reading and academics, while hearing screening detects ear or hearing issues that can affect language and learning. Oral health screening is important because dental caries are common and can affect comfort, nutrition, and concentration in school. Growth is monitored at every visit by measuring height and weight and tracking BMI over time, rather than being a separate, one-time “5-year screening.” So the item that is not a standard 5-year screening is growth and development screening, because the formal development screen is typically incorporated at earlier ages and growth is tracked continually across visits rather than as a single 5-year screening.

**9. Which practice should children be taught to prevent pet bites or aggression?**

- A. Ask permission before approaching/petting**
- B. Run toward unfamiliar animals**
- C. Grab the animal's tail**
- D. Feed animals without asking owner**

Teaching children to obtain permission before approaching or petting any animal helps them learn to respect the animal's space and reduces the risk of bites and aggressive reactions. When a child asks the owner for permission, the owner can assess whether the animal is comfortable with contact, whether the environment is safe, and whether the pet is in a good mood for interaction. This fosters a calm, controlled exchange: the child can approach slowly, let the animal sniff their hand, and avoid sudden moves or reaching for sensitive areas. Such careful, supervised interactions are less likely to startle or provoke defensive behavior, especially with unfamiliar or anxious pets. Running toward unfamiliar animals increases fear or arousal and can provoke a bite. Grabbing the animal's tail is invasive and likely to provoke a defensive response. Feeding animals without asking the owner can trigger guarding behavior or other safety issues.

**10. Which is a 4-year verbal language milestone?**

- A. Uses 4 word sentences**
- B. Draws recognizable pictures**
- C. Reads simple words**
- D. Understands spatial terms like near and far**

At four years, expressive language shows a clear jump in sentence length and complexity. Using four-word sentences indicates that a child has moved beyond single words or short phrases and can combine words to express a complete thought, which is a hallmark of language development at this age. This syntactic growth reflects growing mastery of grammar and the ability to convey more detailed ideas, a skill parents and clinicians look for to gauge normal progression. Drawing recognizable pictures is more about fine motor skills and general play development, not the verbal milestone that aligns with four-year language abilities. Reading simple words is typically not expected until early elementary school and reflects emergent literacy rather than core conversational language at this age. Understanding spatial terms like near and far involves receptive language and concept development that can occur earlier and alongside other skills, but it doesn't specifically capture the representative expressive milestone of forming four-word sentences.

## 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://pedia2ecpreventivecare.examzify.com>**

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

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