

PLS - Answers to Pediatric Respiratory Emergencies

- 1. D** In general, the first sign of respiratory distress in an infant is tachypnea.
- 2. D** The most common cause of cardiac arrest in infants and children are airway and respiratory problems.
- 3. B** Your 4 year-old patient sits forward drooling and presenting with stridor and fever; epiglottitis should be suspected.
- 4. D** Initial management includes placing the child in a position of comfort. Direct visualization of the larynx may cause laryngospasm.
- 5. D** All of these are signs of imminent respiratory arrest.
- 6. A** Vital signs that place a pediatric patient at risk for arrest include respiratory rate >60, heart rate >18, review normal vital signs in the pediatric patient.
- 7. C** Appearance, work of breathing, circulation
- 8. A** The PAT starts from the doorway.
- 9. T** Proper head tilt chin lift {sniffing position} to keep the large tongue off the back of the throat.
- 10. C** This is a classic position for the patient with epiglottitis to be seated.
- 11. D** "Seal bark" type cough
- 12. F** Stridor is a common upper airway sound.
- 13. C** Drooling is a key finding in the patient with epiglottitis.
- 14. F** Absence of wheezes may represent severe obstruction.
- 15. C** Asthma is one of the most common chronic pediatric illnesses.