Samour and King's Pediatric Nutrition in Clinical Care 5th edition Konek Test Bank

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Multiple Choice

1. A Nutrition screening:
A. Is a simple quick tool that identifies children who are *At Risk of malnutrition, that does not require formal nutrition training to complete.*
B. Identifies nutrition related problems / diagnosis through the gathering, verifying and interpretation of information, their cause and significance.

Answer: A

2. A Nutrition assessment:
A. Is a simple quick tool that Identifies children who are *At Risk of malnutrition, that does not require formal nutrition training to complete.*
B. Identifies nutrition related problems / diagnosis through the gathering, verifying and interpretation of information, their cause and significance.

Answer: B

3. Anthropometric data collection:
A. Should be done upon admission or first visit.
B. Should include height/length, weight and head circumference for children under 2 years of age.
C. Should be repeated at specified intervals and/or all visits.
D. Should be plotted on age appropriate growth charts.
E. All of these

Answer: E

4. Key elements of a child's diet history include:
A. kind and amount of food-beverages-formula-human milk eaten
B. methods of food-formula preparation
C. feeding history/introduction of solids
D. meal/snack frequency/duration
E. use/skill with eating utensils/cup
F. All of these

Answer: F

5. The gold stand for Energy calculation in children is:
A. The World Health Organization BEE equation
B. The Institute of Medicine TEE equation
C. Measured resting energy via indirect calorimetry
D. Schofield BEE equation

Answer: C

6. Nutrition focused physical examination: clinical signs of a malnourished child include
A. Weight loss, weight gain, sedentary behavior
B. Below normal weight gain velocity, pluckable hair, petechiae
C. Stunting, heart defect, elevated HgA1C
D. Test results such as gastric emptying study, muscle wasting, pale conjunctiva

Answer: B

7. Subjective Global Assessment (SGA) has been modified and validated for use in some pediatric populations. It is call the Pediatric Subjective Global Nutrition Assessment. It includes which of the following:
A. information provided by patient/family about nutritional status.
B. observations made by the clinicians.
C. results in evaluation using clinical judgment.
D. All of these

Answer: D

Multiple Selection

8. Feeding difficulties can present in a variety of ways. Which of the following could be a sign/symptom of feeding difficulties?
A. prolonged meal times
B. disruptive and stressful mealtimes
C. cheerful participation in mealtimes
D. need for distraction to allow for intake

Answer: A, B, and D

Multiple Choice

9. Mid-Upper Arm Circumference (MUAC) is used for the assessment of nutritional status for the following reasons:
A. It is a good predictor of mortality.
B. The MUAC measurement requires little equipment.
C. It is easy to perform even on the most debilitated individuals.
D. Trained individuals in the community setting can perform this measure.
E. All of these

Answer: E

10. Serum Albumen levels are not used as a routine test of nutritional status in pediatrics because it is affected by many factors including:
A. liver disease
B. nephrosis
C. thermal injury
D. dehydration
E. sepsis
F. trauma
G. All of these

Answer: G

11. Measurement of _____ may help determine whether a low serum protein level is caused by stress or nutritional deficiency.
A. transferrin
B. albumin
C. C-reactive protein
D. Interleukin 10

Answer: C