Pediatric RN Exam Content Outline

Exam Objective

To measure the overall clinical knowledge of the Pediatric RN in the pediatric setting.

Knowledge Domains

Each question in this assessment is categorized by a cognitive level that the test taker would use to respond. These categories are:

**Recall:** The ability to recall or recognize specific information.

**Application:** The ability to comprehend, relate, or apply knowledge to new or changing situations.

**Analysis:** The ability to analyze and synthesize information, determine solutions, and/or evaluate the usefulness of a solution.

Content Outline

I. Assessment
   a. Knowledge of assessment and effective treatment of genitourinary conditions commonly seen in the pediatric setting, including but not limited to polycystic kidney disease, urinary tract infections, hydrocele, and hypospasias
   b. Knowledge of assessment and the effective treatment of gastrointestinal conditions commonly seen in the pediatric setting, including but not limited to appendicitis, gastroenteritis, celiac disease, inflammatory bowel disease, and reflux
c. Knowledge of assessment and effective treatment of cardiopulmonary conditions commonly seen in the pediatric setting, including but not limited to septal defects, patent ductus arteriosus, hypoplastic left heart syndrome, cardiomyopathies, myocarditis

d. Knowledge of assessment and effective treatment of endocrine conditions seen in the pediatric setting, including but not limited to thyroid disease, diabetes, precocious puberty, growth disorders, obesity, etc.

e. Knowledge of assessment and effective treatment of respiratory conditions commonly seen in the pediatric setting, including but not limited to acute bronchiolitis, asthma, cystic fibrosis, pneumonia, bronchopulmonary dysplasia

f. Knowledge of assessment and effective treatment of neurological and neurodevelopmental conditions commonly seen in the pediatric setting, including but not limited to cerebral palsy, epilepsy, stroke, encephalopathy, Asperger syndrome, autism, etc.

g. Knowledge of assessment and effective treatment of musculoskeletal conditions seen in the pediatric setting, including but not limited to traumatic injuries (e.g., automobile accidents, falls, recreational activities), arthritis, scoliosis, hip dysplasia, bow legs, muscular dystrophy, club foot

h. Knowledge of the stages of physical and cognitive growth and development from infancy to young adulthood according to theories, such as Erikson’s child development theory and Piaget’s theory of cognitive development, and the CDC’s developmental milestones

i. Knowledge of techniques and tools for assessing growth across the pediatric age and developmental spectrum including but not limited to, length and length-for-age, weight and weight-for-age, head circumference and head circumference-for-age, weight-for-length, height, BMI and BMI-for-age, chest circumferences, teeth, and fontanels

j. Knowledge of techniques for performing a comprehensive and developmentally appropriate physical and psychosocial health assessment of pediatric patients, including, but not limited to systems such as respiratory, gastrointestinal, neurological, cardiovascular, and musculoskeletal

II. Behavioral Interventions/Management

a. Knowledge of risks factors associated with physical, sexual, mental, and emotional abuse and neglect in the pediatric population, such as family stress, anger issues, substance abuse and/or mental health issues of family members

b. Knowledge of physical and behavioral signs and symptoms of abuse and neglect such as unexplained injuries, bruises, unusual fears, changes in self-confidence, and poor hygiene

c. Knowledge of proper procedures for reporting suspected cases of child abuse and neglect (e.g. when, how, and to whom to report [Child Protective Services]).

d. Knowledge of healthy and unhealthy reactions and coping mechanisms to stress (e.g. distraction, regression, withdrawal, fantasy, physical exercise, playing or listening to music)

e. Knowledge of risk behaviors common in the pediatric population, such as substance use, tobacco use, sexual activity, self-harm, criminal activity

III. Ethical and Legal Concerns and Responsibilities

a. Knowledge of the potential impact of gender identity and sexual orientation on the
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child's physiological and psychological states, family dynamics, and sociocultural aspects of pediatric patient health

b. Knowledge of appropriate language related to gender identity, sexual orientation, cultural identity that is inclusive, age appropriate, and culturally sensitive
c. Knowledge of events or issues that must be reported to the board of nursing, such as negligence, malpractice, drug diversion, impairment, etc.
d. Knowledge of HIPAA regulations and how they apply to the role of pediatric nursing, such as permitted and prohibited disclosures of PHI, and permitted disclosures of PHI without authorization
e. Knowledge of the ethical principles used at the end-of-life, including, but not limited to those associated with hospice care, DNR status, and organ donation

IV. Health Promotion and Education

a. Knowledge of risk factors for disease or injury related to the child's environment, including, but not limited to, exposure to infectious agents and toxins such as lead and air pollution
b. Knowledge of teach-back techniques and effectiveness when assessing patient and family understanding of information provided about health-related issues
c. Knowledge of techniques for educating pediatric patients and their families in a manner consistent with developmental level, preferred learning styles, language, and literacy
d. Knowledge of strategies for optimizing health and preventing illness and injury of pediatric patients (e.g., vehicle safety, breast or formula feeding, healthy diet, bullying, social media use, gang activity)
e. Knowledge of hygiene factors that influence health and illness, including, but not limited to, pets and animal exposures (e.g., cat and dog dander, reptiles), and hygiene practices
f. Knowledge of factors that impact adherence to a therapeutic regimen, including, but not limited to culture, family stress, taste, complex scheduling, cognitive factors, socioeconomic factors

V. Management of Acute and chronic Conditions

a. Knowledge of best practices for assisting with medical procedures in a developmentally appropriate manner such as lumbar puncture; paracentesis; bone marrow biopsy; thoracentesis; endoscopy, suturing; radiologic procedures
b. Knowledge of pediatric palliative care related to disease progression or end-of-life
c. Knowledge of hematological disorders and blood products (e.g., packed cells, platelets, etc.); nursing interventions before, during, and after administration (e.g., order verification, establishing baseline vital signs, verifying patient and blood product match) and signs and symptoms of potential adverse reactions (e.g., skin rash) and how to address them (e.g., stopping the transfusion)
d. Knowledge of how to operate and troubleshoot common equipment used in the pediatric setting, such as IV pumps, suction, oxygen, pulse oximeter, feeding pumps, drainage systems, etc.
e. Knowledge of significant clinical findings that are indicative of the need to notify the patient's providers and other health professionals.
f. Knowledge of medications and non-pharmacologic modalities for safely managing pain in pediatric patients including, but not limited to oral, IV, IM analgesics; adjuvant therapies; massage; heat and cold stimulation; relaxation techniques; play therapy; distraction
g. Knowledge of complementary and alternative therapies, including, but not limited to massage, mindfulness techniques, breathing exercises, relaxation techniques, and therapeutic touch
h. Knowledge of signs and symptoms of adverse or allergic reactions to medications
administered in the pediatric setting and interventions to treat such responses
i. Knowledge of best practices for performing patient hygiene and activities of daily living

VI. Professional Responsibilities
a. Knowledge of how pediatric care impacts the patient-family relationship (e.g., bonding, communication, parental techniques related to discipline, and stressors)
b. Knowledge of barriers to care of pediatric patients, such as physical access (e.g., transportation), a lack of adequate financial resources (e.g., health insurance), and health literacy
c. Knowledge of social factors that influence health and illness, including, but not limited to, exposure to domestic violence, peer relationships, use of social media, low socioeconomic status
d. Knowledge of CDC immunization schedules and recommendations, and vaccine contraindications across the pediatric age spectrum
e. Knowledge patient advocacy and circumstances when advocating for patients is needed to facilitate optimal health and outcomes, such as supporting autonomy

VII. Professional Practice
a. Knowledge of medications administered in a pediatric setting, including the rights of medication administration
b. Knowledge of basic life support guidelines (e.g., American Heart Association) and techniques
c. Knowledge of patient safety risks in the pediatric setting and interventions for preventing patient harm including, but not limited to, the use of aseptic technique, 2 identifiers, and PPE
d. Knowledge of medications administered in a pediatric setting, including the rights of medication administration
e. Knowledge of legal and recommended practices for written and electronic medical record documentation in the pediatric setting, such as patient history, nursing interventions, and assessment findings.