



**4597**

**STAT! Responding To A  
Pediatric Code**

*Review Quiz*

# ***“STAT! Responding to a Pediatric Code”***

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## **Post Test Questions**

1. The following are signs that a child is at risk for a cardiopulmonary event:
  - A. The child has a history of neurological or cardiovascular problems
  - B. The child has tachypnea or tachycardia
  - C. The child has decreased intensity of peripheral pulses
  - D. All of the above
  
2. T or F. Most pediatric cardiac arrests are secondary to respiratory failure.  
T  
F
  
3. The 5 stages of an initial critical assessment are:
  - A. Aspiration, Breathing, Circulation, Drug, and Extraction
  - B. Airway, Breathing, Circulation, Debilitation, Exposure
  - C. Ambulation, Bag, Contraction, Defibrillator, EKG
  - D. Age, Blood pressure, Cranium, Diagnose, Esophagus
  
4. The most common medication used for resuscitation is:
  - A. Atropine
  - B. Sodium bicarbonate
  - C. Epinephrine
  - D. Dopamine
  
5. T or F. Most medications are packaged according to pediatric weight and size.  
T  
F
  
6. The following can be said about pediatric code teams:
  - A. Personnel should become familiar with all roles and responsibilities on a code team
  - B. The most efficient teams are those with pre-assigned roles
  - C. There should be protocols for quick equipment and medication assembly
  - D. All of the above
  
7. The following can be said about the importance of Communication:
  - A. Communication ensures the code is called to the right people
  - B. Communication ensures the response team is sent to the right patient and location
  - C. Communication ensures the team recognizes the Team Leader
  - D. All of the above
  
8. The person on the pediatric code team who is in charge of the code is:
  - A. The Team Leader
  - B. The Recorder
  - C. The Nurse in charge of the crash cart

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- D. The Nurse in charge of compressions
9. The person on the pediatric code team who coordinates nursing activities and follows algorithms, facility policies and procedures to ensure a proper sequence of events is:
- A. The Team Leader
  - B. The Recorder
  - C. The Nurse in charge of the crash cart
  - D. The Nurse in charge of compressions
10. T or F. The information regarding a child’s weight and size should be gathered and posted by the bedside, regardless of diagnosis, in anticipation of a code.
- T
- F

(Answers on next page)

## Post Test Answers

1. **D. All of the above.** In addition to neurological or cardiovascular problems, another sign a child is generally at risk for cardiopulmonary arrest includes a history of respiratory problems; and a child at imminent risk may also have deterioration in the level of consciousness, increased work of breathing, deterioration in color or oxygenation, and/or decreased perfusion of extremities.
2. **True.** Pediatric patients will maintain their ability to function and keep their vital signs until the very end. If you can ventilate and oxygenate a child appropriately, you can prevent the child from going into secondary arrest.
3. **B. Airway, Breathing, Circulation, Debilitation, Exposure.**
4. **C. Epinephrine.** The other drugs listed are also commonly used in resuscitations, but epinephrine is the most commonly used for both cardiac arrest and bradycardia. It produces vasoconstriction, stimulates the heart rate, and improves cardiac output, heart rate and blood pressure.
5. **False.** Most medications are packaged according to an adult weight and size. This is why it is so important to practice drug calculations regularly, and refer to essential resources for the appropriate medications and dosages for the child’s age, condition and weight.
6. **D. All of the above.**
7. **D. All of the above.** Communication also ensures that from the Team Leader everyone understands their individual roles and responsibilities.
8. **A. The Team Leader.** The Team Leader, usually a Physician, also coordinates team activity and diagnostic interventions; conducts the initial assessment; performs or assists with procedures; orders and supervises the administration of medication; and directs post-arrest stabilization.
9. **B. The Recorder.** The Recorder also documents all aspects of the resuscitation from the moment the code is called in until the child is stabilized or transferred; and may act as the primary nurse for the patient once the resuscitation is complete.
10. **True.** Be sure to post the information regarding a child’s size and weight in an easily visible place in case of an emergency. In addition, in an Emergency Department, equipment and medications should be gathered for the child’s arrival in anticipation of a code, regardless of the diagnosis. In a hospital room, a crash cart should be made readily available.