1. The nurse explains that Bryant’s traction is reserved for children who weigh less than _____ pounds.

2. The nurse reminds the adolescent boy with Ewing’s sarcoma that he is prohibited from vigorous weight-bearing activities during treatment with radiation to reduce the risk of a(n) ______________ fracture.

3. The child with Duchenne’s muscular dystrophy must push on his legs and “walk up the leg” in order to rise to a standing position. The nurse recognizes this characteristic behavior as ______________ maneuver.

4. A nurse assessing welts on the body of a 2-year-old Vietnamese child should consider the skin lesions might be the result of the cultural practice of __________.

5. The nurse considers what factor(s) that may trigger abuse in a parent? Select all that apply.
   a. Being abused as a child
   b. Low self-esteem
   c. Substance abuse
   d. Overwhelming responsibility
   e. Knowledge deficit relative to child care

6. The nurse demonstrates which similarities among all traction devices? Select all that apply.
   a. Pull the limb into extension
   b. Decrease muscle spasm
   c. Reduce pain
   d. Align two bone fragments
   e. Immobilize the limb

7. The nurse performing a neurovascular check on a limb in traction would report and document which finding(s) as indicative of altered circulation? Select all that apply.
   a. Pulse is equal to uncasted limb.
   b. Patient is aware of touch and warm and cool application.
   c. Limb is cool to the touch.
   d. Capillary refill is 5 seconds.
   e. Distal limb can flex and extend.

8. How does the pediatric skeletal system differ from that of the adult? Select all that apply.
   a. Lower mineral content
   b. More ossification
   c. Open epiphyses
   d. Less porosity
   e. Greater strength