

Care CEUs

Pediatric Acute Respiratory Infection

1. Which of the following best represents a risk factor for acute respiratory infections for pediatric patients?

- A. Weight loss
 - B. A body mass index of 24.9 kg/m²
 - C. Mobility limitations
 - D. Passive smoking
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2. Which of the following best represents a sign/symptom of an acute respiratory infection?

- A. Nasal congestion
 - B. Oral dysphagia
 - C. Polyphagia
 - D. Polydipsia
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3. A health care professional has questions regarding respiratory infections. Which of the following informational points of interest should be communicated to the health care professional?

- A. Respiratory infections are typically only caused by viruses.
 - B. Respiratory infections are typically only caused by bacteria.
 - C. The leading causes of acute respiratory infections include viruses and bacteria.
 - D. The leading causes of acute respiratory infections include viruses and extreme weight loss.
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4. The parents of a 2-year-old child have questions regarding the common cold. Which of the following educational points should be expressed to the parents?

- A. Most individuals recover from the common cold within, approximately, 7 - 10 days.
 - B. Most individuals recover from the common cold within, approximately, 14 - 21 days.
 - C. Treatment for the common cold typically involves antibiotics.
 - D. Treatment for the common cold typically involves antibiotics and acetaminophen.
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5. Which of the following medications is recommended as first-line therapy for acute bacterial sinusitis?

- A. Amoxicillin
 - B. Cephalexin
 - C. Cefadroxil
 - D. Clindamycin
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6. A health care professional is developing an educational lecture centered around bronchiolitis. Which of the following informational points of interest should be included in the health care professional's lecture?

- A. Bronchiolitis is typically caused by the RSV.
 - B. Transmission of RSV typically only occurs through contaminated food.
 - C. Individuals infected with RSV are usually contagious for three to eight weeks.
 - D. Early symptoms of RSV may include weight gain.
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7. Which of the following statements is most accurate?

- A. In very young infants (e.g., older than six months old), the only symptoms of a RSV infection that may be present include the following: irritability, weight loss, and odynophagia.
 - B. In very young infants (e.g., older than six months old), the only symptoms of a RSV infection that may be present include the following: irritability, increased appetite, and apnea.
 - C. In very young infants (e.g., less than six months old), the only symptoms of a RSV infection that may be present include the following: irritability, otalgia, and odynophagia.
 - D. In very young infants (e.g., less than six months old), the only symptoms of a RSV infection that may be present include the following: irritability, decreased appetite, and apnea.
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8. Infants/children suffering from bronchitis should seek health care if they meet which of the following conditions?

- A. Symptoms lasting more than one week
 - B. Symptoms lasting more than two weeks
 - C. The child is younger than two months old and has a fever of 102.4 °F
 - D. The child is younger than three months old and has a fever of 100.4 °F
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9. A 10-year-old patient presents to a health care facility. The patient is diagnosed with community-acquired pneumonia. The patient's parents report the patient has a hypersensitivity to penicillin. Which of the following medications should be used to treat the aforementioned patient?

- A. Amoxicillin
 - B. Azithromycin
 - C. Peramivir
 - D. Remdesivir
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10. A health care professional has questions regarding the differences between influenza and a "cold." Which of the following informational points of interest should be communicated to the health care professional?

- A. Symptom onset is abrupt with a cold.
 - B. Symptom onset is abrupt with influenza.
 - C. Chills are common with a cold and not as common with influenza.
 - D. Headaches are common with a cold and less common with influenza.
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11. Which of the following medications is approved for treatment of influenza in children two weeks old or older?

- A. Oseltamivir
 - B. Zanamivir
 - C. Peramivir
 - D. Baloxavir
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12. Which of the following best represents a COVID-19 treatment recommendation for children?

- A. Most children with SARS-CoV-2 infection will require amoxicillin.
 - B. Most children with SARS-CoV-2 infection will require cephalexin.
 - C. Remdesivir is recommended for hospitalized children aged ≥ 12 years with COVID-19 who have risk factors for severe disease and have an emergent or increasing need for supplemental oxygen.
 - D. Remdesivir is recommended for hospitalized children aged ≥ 14 years with COVID-19 who have risk factors for severe disease and do not have an emergent or increasing need for supplemental oxygen.
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13. A health care professional has questions regarding mastoiditis. Which of the following informational points of interest should be communicated to the health care professional?

- A. Mastoiditis is often associated with the common cold.
 - B. Mastoiditis is often associated with influenza.
 - C. Symptoms of mastoiditis include nasal congestion and oral dysphagia.
 - D. Symptoms of mastoiditis include: fever, pain, ear redness, and discharge from the ear.
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14. Which of the following best represents a sign/symptom of MIS-C?

- A. Extremely high blood pressure
 - B. Low blood pressure
 - C. Weight gain
 - D. Weight gain with increased appetite
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15. The parents of a newborn child have questions regarding adequate nutrition. Which of the following educational points should be expressed to the parents?

- A. Individuals should only exclusively feed infants human milk for the first two months of life.
 - B. Individuals should exclusively feed infants human milk for the first six months of life.
 - C. Individuals should provide infants with supplemental vitamin D beginning four months after birth.
 - D. Individuals should provide infants with supplemental vitamin D beginning six months after birth.
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16. Which of the following statements is most accurate?

- A. Inactivated vaccines include the dead version of the infectious agent that causes a specific infection or disease.
 - B. Inactivated vaccines include the live version of the infectious agent that causes a specific infection or disease.
 - C. Live-attenuated vaccines are not similar to the natural infection they help prevent - therefore, they create a long-lasting immune response of about six months.
 - D. Live-attenuated vaccines are similar to the natural infection they help prevent - therefore, they create a short-term immune response.
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17. A health care professional has questions regarding Afluria Quadrivalent. Which of the following informational points of interest should be communicated to the health care professional?

- A. Afluria Quadrivalent is approved for use in individuals six months of age and older.
 - B. Afluria Quadrivalent is only approved for use in individuals six years of age and older.
 - C. The recommended dose for Afluria Quadrivalent is 0.25 mL.
 - D. The recommended dose for Afluria Quadrivalent is 1.5 mL.
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18. What is the recommended dose for FluMist?

- A. 0.2 mL
 - B. 0.25 mL
 - C. 0.5 mL
 - D. 1.5 mL
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19. Which of the following statements regarding Prevnar 13 is most accurate?

- A. Children six weeks through five years should receive a three-dose immunization series consisting of a 0.5 mL intramuscular injection administered at 4, 6, and 12 - 15 months of age.
 - B. Children six weeks through five years should receive a four-dose immunization series consisting of a 0.5 mL intramuscular injection administered at 2, 4, 6, and 12 - 15 months of age.
 - C. Children six through 17 years of age and adults should receive a 2-dose immunization series over the course of four months.
 - D. Children six through 17 years of age and adults should receive a 2-dose immunization series over the course of eight months.
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20. A health care professional has questions regarding Pneumovax 23. Which of the following informational points of interest should be communicated to the health care professional?

- A. Pneumovax 23 should be administered in a single oral dose.
- B. Pneumovax 23 should be administered in a single dose, either by intramuscular injection or subcutaneous injection.
- C. Pneumovax 23 should be administered in a 2-dose immunization series.

D. Pneumovax 23 should be administered in a 4-dose immunization series.

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