

# CE POSTTEST

## Management of Patients with Chronic Kidney Disease

The purpose of this continuing education series is to increase the pediatric nurse's awareness and understanding of the management of children with chronic kidney disease (CKD).

According to the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), in the pediatric population – age 19 and under – the annual rate for kidney failure is 1 or 2 new cases in every 100,000 children. The risk increases steadily with age. The conditions that lead to chronic kidney failure in childhood are birth defects, blocked urine flow and reflux, hereditary diseases, glomerular diseases, and systemic diseases. Although treatment may slow down the progression of some diseases, in many cases the child will eventually need dialysis or transplantation.

This continuing education series features an article of importance to pediatric nurses. The article describes pertinent issues in the management of CKD within the context of a case study.

### ASSIGNMENT

Miller, D., & MacDonald, D. (2006). Management of pediatric patients with chronic kidney disease. *Pediatric Nursing*, 32(2), 128-134.

### Objectives:

1. Discuss the importance of the implementation of appropriate and timely acute and preventive care strategies for children with chronic kidney disease.
2. List three elements of care coordination for children with chronic kidney disease and their families.
3. Identify opportunities for pediatric nurses to keep current on prevention and treatment strategies for children with chronic kidney disease.

This offering for 1.5 contact hours, 90 minutes of which can be applied toward pharmacology CE, is provided by Anthony J. Jannetti, Inc. Anthony J. Jannetti, Inc. is accredited as a provider of continuing education in nursing by the American Nurses Credentialing Center's Commission on Accreditation (ANCC-COA). Anthony J. Jannetti, Inc. is an approved provider of continuing education by the California Board of Registered Nursing, CEP No. 5387.

Articles accepted for publication in the continuing education series are refereed manuscripts that are reviewed in the standard *Pediatric Nursing* review process with other articles appearing in the journal.

This test was reviewed and edited by Judy A. Rollins, PhD, RN, *Pediatric Nursing* associate editor, and Veronica D. Feeg, PhD, RN, FAAN, *Pediatric Nursing* editor.



2.3 Contact Hours



75 Pharmacology Minutes

### Questions and Answer Form

\*PED J603

**1. Anemia associated with CKD is typically treated with a combination of therapies that include**

- a. erythropoietin and calcium carbonate.
- b. erythropoietin and iron supplements.
- c. iron supplements and multiple vitamins.
- d. iron supplements and vitamin D.
- e. a diet rich in iron and vitamin supplements.

**2. The primary goal of treatment for the child with CKD is**

- a. to reverse the disease process.
- b. to prevent the disease from progressing.
- c. to delay the progression of the underlying disease.
- d. to prepare the patient and family for renal transplant.
- e. to prevent urinary tract infections.

**3. Optimal management of renal osteodystrophy includes timing the phosphate binders to coincide with meal times and**

- a. vitamin D-enriched milk.
- b. complete suppression of PTH.
- c. medications to increase bone density.
- d. restriction of weight-bearing activity.
- e. vitamin D analogues.

**4. Adequate nutrition in the child with CKD secondary to PUV is best accomplished by**

- a. restricting sodium, potassium, and protein.
- b. age-appropriate diet without sodium restriction.
- c. dietary supplements rich in calcium and calories.
- d. dietary supplements rich in calories and sodium.
- e. restricting sodium and fluid.

**5. One factor that contributes to growth failure in the child with CKD is**

- a. poor oral hygiene.
- b. lack of physical activity.
- c. developmental delay.
- d. metabolic acidosis.
- e. protein restrictions.

COMPLETE THE FOLLOWING: This test may be copied for use by others.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Check the box next to the correct answer.

- |                               |                               |                               |                               |                               |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| 1. <input type="checkbox"/> A | 2. <input type="checkbox"/> A | 3. <input type="checkbox"/> A | 4. <input type="checkbox"/> A | 5. <input type="checkbox"/> A |
| <input type="checkbox"/> B    | <input type="checkbox"/> B    | <input type="checkbox"/> B    | <input type="checkbox"/> B    | <input type="checkbox"/> B    |
| <input type="checkbox"/> C    | <input type="checkbox"/> C    | <input type="checkbox"/> C    | <input type="checkbox"/> C    | <input type="checkbox"/> C    |
| <input type="checkbox"/> D    | <input type="checkbox"/> D    | <input type="checkbox"/> D    | <input type="checkbox"/> D    | <input type="checkbox"/> D    |
| <input type="checkbox"/> E    | <input type="checkbox"/> E    | <input type="checkbox"/> E    | <input type="checkbox"/> E    | <input type="checkbox"/> E    |

### Evaluation

- |  |                   |   |   |   |   |   |                |
|--|-------------------|---|---|---|---|---|----------------|
| 1. The objectives below relate to the overall purpose/goals of the education activity.   | Strongly disagree | 1 | 2 | 3 | 4 | 5 | Strongly agree |
| 2. The activity met the stated objectives.   |                   |   |   |   |   |   |                |
| a. Discuss the importance of the implementation of appropriate and timely acute and preventive care strategies for children with chronic kidney disease. |                   | 1 | 2 | 3 | 4 | 5 |                |
| b. List three elements of care coordination for children with chronic kidney disease and their families.   |                   | 1 | 2 | 3 | 4 | 5 |                |
| c. Identify opportunities for pediatric nurses to keep current on prevention and treatment strategies for children with chronic kidney disease.          |                   | 1 | 2 | 3 | 4 | 5 |                |
| 3. The activity met the stated objectives.   |                   | 1 | 2 | 3 | 4 | 5 |                |
| 4. Home study format was appropriate.  |                   | 1 | 2 | 3 | 4 | 5 |                |
| 5. The content was relevant to my practice.  |                   | 1 | 2 | 3 | 4 | 5 |                |
| 6. The content met my needs.   |                   | 1 | 2 | 3 | 4 | 5 |                |
| 7. How much time was used to complete reading assignment and posttest:   |                   |   |   |   |   |   |                |
| a. Less than 1 hour _____  |                   |   |   |   |   |   |                |
| b. 1-2 hours _____   |                   |   |   |   |   |   |                |
| c. 2-3 hours _____   |                   |   |   |   |   |   |                |
| d. 3 hours or more _____   |                   |   |   |   |   |   |                |

Comments \_\_\_\_\_

Signature \_\_\_\_\_

### POSTTEST INSTRUCTIONS

1. Select the best answer and check the corresponding box on the answer form. Retain the test questions as your record.
2. Complete the information requested in the space provided.
3. Detach the answer form or a copy of the answer form and mail to: *Pediatric Nursing*, CE Series, Jannetti Publications Inc.; East Holly Avenue Box 56; Pitman, NJ 08071-0056 with a check or money order payable to Jannetti Publications Inc. for \$10.00 (subscriber) or \$15.00 (nonsubscriber).
4. Test returns **must** be postmarked by April 15, 2008. If you pass the test (70% or better), a certificate for 2.3 contact hours and 75 pharmacology minutes will be awarded by Anthony J. Jannetti, Inc.

Please allow 6-8 weeks for processing. For recertification purposes, the date that contact hours are awarded will reflect the date of processing.

Test Scoring, CE Awarding/Recording fees:  
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