# RNC - Low Risk Neonatal Nursing Exam: Contains, (328 Correctly Answered Questions with A+ Guide Solution

Normal skin assessment - Exact Answer: Acrocyanosis with decreased peripheral pulses, facial bruising and/or petechiae

Normal head assessment - Exact Answer: Large in relation to body size, cranial molding, caput succedaneum

Normal newborn lung assessment - Exact Answer: RR 40-60/min, coarse rales, prolonged expiration phase

Normal newborn heart assessment - Exact Answer: HR 120-160, may peak up to 180 bpm when stimulated, loud S2, split S2, soft systolic murmur (L —> R shunt from PDA)

Normal newborn GI tract assessment - Exact Answer: Bowel sounds will likely appear within 15 minutes of birth, meconium passage within 24 hrs of birth

Normal newborn kidneys - Exact Answer: Urine passage within 24 hrs of birth

Normal newborn limb assessment - Exact Answer: Positional oddities from intrauterine positioning (e.g., legs up in frank breech position)

# **Rnc Low Risk Neonatal Study Guide**

**JE Gale** 

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