



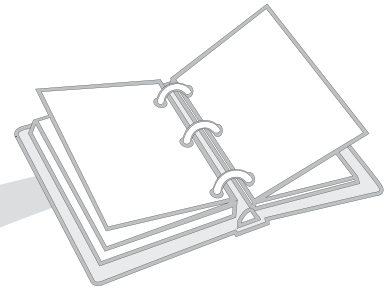
Basic Infant Care

Curriculum With RealCare® Baby Infant Simulator

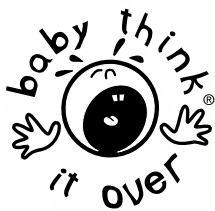
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Live it. Learn it.™

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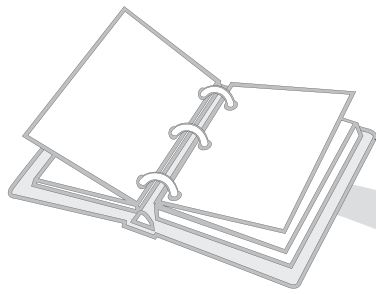
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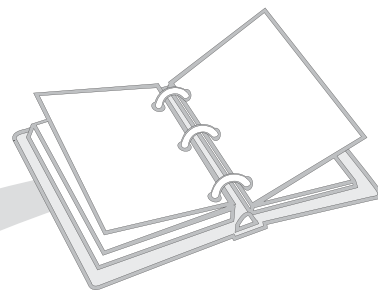
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Susan O. Stenson, M.S. Child Development/Family Studies/Counseling

Ms. Stenson's expertise in infant and early childhood parenting has been a valuable asset to the curriculum. She has been a licensed Early Childhood Parent Educator in Minnesota for 18 years, and has served on the Education District and Hospital Collaborative as the New Parent Connection/Infant Specialist since 2006. Prior to these positions, Ms. Stenson served as Program Director/Counselor in the Self-Sufficiency Counseling Program in Moorhead, Minnesota.

Lynn Zdechlik, R.N., C.N.M. (*Certified Nurse Midwife*)

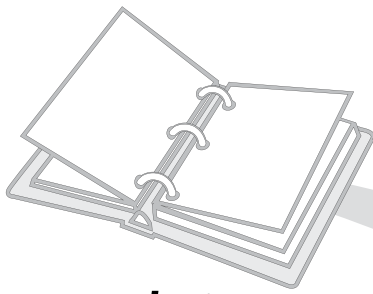
During Ms. Zdechlik's 23 years as a Nurse Midwife she has been actively involved in the prenatal, delivery, and post-natal care of many mothers and babies, and has been instrumental in helping new mothers learn how to care for their infants. She currently serves as an adjunct faculty member at Bethel University, St. Paul, Minnesota, teaching nurse midwifery to senior year nursing students. Ms. Zdechlick served as a subject matter expert in reviewing the overall design, topics, and objectives of the curriculum.

Deborah L. Tackmann, M.E.P.D., Adolescent Health and Risk Behavior Intervention

Ms. Tackmann's exemplary teaching career in health education has spanned more than 30 years. She has earned a number of professional awards, including the Disney American Teacher Award and the American School Health Association's Educator of the Year. Ms. Tackmann is a nationally recognized health education consultant, keynote presenter, and author, and is an adjunct faculty member at the University of Wisconsin-Eau Claire, University of Wisconsin-La Crosse, and University of Alaska-Fairbanks. She authored the *Health, Safety and First Aid* unit of the curriculum.

Mary Kennedy, M.S., Family and Consumer Sciences

Ms. Kennedy's distinguished career is built on a foundation of 30 years of public school teaching with local, regional, and national contributions to her field, including presentations and co-authorship of the *Goals for Living* high school textbook. Ms. Kennedy recently earned the 2006 American Association of Family and Consumer Sciences (AAFCS) Leader Award and was a top ten finalist for the AAFCS Teacher of the Year. She authored the Realityworks® *Understanding Shaken Baby Syndrome* curriculum referenced, and largely used, in the curriculum.



Introduction

The *Basic Infant Care* curriculum is designed for middle or high school students, day care providers, babysitters, or anyone who will be working with infants or toddlers in a care capacity. The curriculum teaches the basic information on care giving, and the skills needed to provide that care. The twelve-and-a-half to thirteen-hour course is comprised of 15 lessons organized within three units. Pre- and post-summative assessments as well as unit assessments help gauge participant understanding of the information covered. The information provided focuses on those who work with very young children, from birth through toddler age. It covers a wide range of topics related to infant care, and incorporates the use of active learning methodologies along with the RealCare® Baby (Baby) infant simulator for demonstration and practice of techniques. This powerful approach provides a learning experience that will equip all participants with the knowledge and skills to confidently care for young infants and toddlers.

The curriculum culminates with an extended care simulation experience with Baby. Through the care simulation experience participants will gain the knowledge and skills necessary to become responsible caregivers. Baby is a technologically-advanced infant simulator that gives participants an opportunity to actively experience the responsibilities of care giving. During the care simulation, participants must actually feed, burp, rock, and change Baby's diaper repeatedly over an extended period of time, typically overnight or over the weekend. This authentic task allows the participant to temporarily experience the amount of care an infant requires. The data downloaded from Baby provides the instructor with measurable feedback on the participant's performance in the role of caregiver.

Basic Infant Care Materials

The curriculum is composed of the following materials:

- Curriculum CD-ROM, containing:
 - All steps needed to conduct each lesson, including materials needed for each activity
 - Acrobat® PDF files of participant worksheets and handouts
 - Formative (unit quizzes) and summative assessments with answer keys

- PowerPoint® presentation slides, located on your curriculum CD-ROM in PowerPoint and Acrobat PDF formats

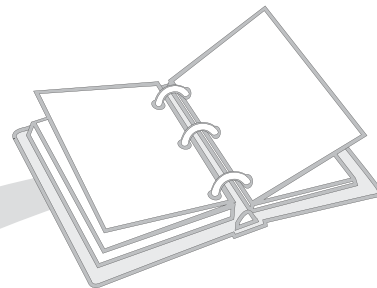
NOTE: If you are using a printed Basic Infant Care binder instead of the CD-ROM, you may photocopy worksheets and handouts, and create overhead transparencies of each slide if you do not have access to a computer or the PowerPoint® presentation graphics program. When a lesson indicates using a PowerPoint® presentation, create transparencies for each slide prior to the lesson. Full size black and white copies of each slide are included behind the lime green colored sheet of paper within each lesson for your ease in photocopying to transparency material.

- RealCare® Baby with accessories (outfit, diapers, bottle, ID, wristband)
- “Start Using Your RealCare® Baby II-plus” instructions
- Instructor Key Ring, for manual Baby shut down as needed
- RealCare® Baby Control Center software CD-ROM

A separate product that may be purchased with this curriculum is the “Handle with Care” brochure. This brochure is a handy quick reference for caregivers, and provides a place to include local emergency phone numbers. The brochure may be purchased in packs of 35 for distribution to each participant. Please contact your Realityworks representative for information on purchasing this product.

Pre-learning Assessment

Prior to beginning the first lesson, you may choose to give participants a pre-learning assessment, entitled *Pre-summative Assessment*. Scores on this assessment can be used to later compare with post-summative assessment scores, which will help you and the participants see their progress in knowledge and skills learned over the course of instruction. If you choose to give the pre-learning assessment, located at the end of this section, make a photocopy for each participant and after welcoming participants to the class, explain the purpose of the assessment, distribute it, and give participants 30 minutes to complete it.



Lesson Structure

Each lesson begins with an overview, lesson objectives, and a *Lesson at a Glance* table which lists the lesson activities, materials required, suggested preparation steps, and approximate class time. U.S. National Health Education Standards and U.S. National Standards for Family and Consumer Sciences supported are located at the end of each lesson.

Terms Used

When referencing the infant simulator for the first time, the term RealCare® Baby will be used. Thereafter within each lesson, the term “Baby” will be used for ease in reading. References to a real baby will use the term “infant.”

Lesson Sections

The overview is followed by the actual lesson, which will contain some of the sections described below. Most lessons are designed to be completed within 45 minutes.

FOCUS

Every lesson begins with a FOCUS activity intended to capture participants’ attention. This may be in the form of a small or large class discussion, game, review of previous lesson information, or demonstration. During this activity, participants are introduced to the topic of the lesson.

LEARN

The LEARN activity in each lesson varies in its presentation mode. It may be a PowerPoint® presentation, group activity, or demonstration.

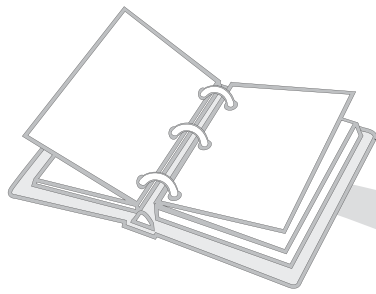
REVIEW

The majority of lessons end with a REVIEW activity intended to briefly review the lesson’s key messages or main points; or, if it is the last lesson in the unit, the REVIEW activity will serve as the unit formative assessment. Participant scores on these short assessments will help you determine what concepts or skills may need reinforcement or review.

Evaluation of Participant Performance

How well participants care for Baby should not be equated to exactly what would be expected with a real infant. A perfect score with no rough handling or missed care may not be a realistic expectation.

The benefit of the infant simulator is that a novice can practice care giving skills without the risks involved with a real infant. With an infant simulator, failure to support the head is merely a learning experience or a lower grade. The number of times the head is not supported may depend on the age of the participant or the manner in which the participant carried Baby.



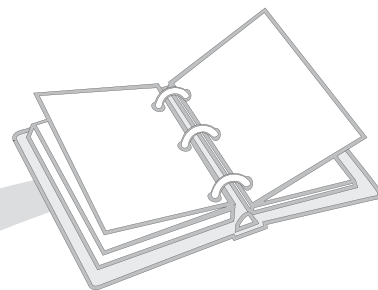
Curriculum Structure

The curriculum is composed of the following lessons. Approximate lesson times are included.

Unit	Lesson	Title	Time
		Pre-summative Assessment	30 minutes
1		Preparing to Care	1:45
1	1	The Important Role of the Caregiver	45 minutes
1	2	Infant and Toddler Development	45 minutes
		Unit 1 (formative) Assessment	15 minutes
2		Basic Care	4:20-4:40
2	1	Introducing Baby	45 minutes
2	2	Soothing a Crying Infant	45 minutes
2	3	Handling Stress and Preventing Shaken Baby Syndrome*	40-60 minutes
2	4	Holding and Feeding	40 minutes
2	5	Bathing and Diapering	45 minutes
2	6	Schedule and Tracking	30 minutes
		Unit 2 (formative) Assessment	15 minutes
3		Health and Safety	4:00
3	1	Emergency Procedures	45 minutes
3	2	Breathing Emergencies	45 minutes
3	3	Infant and Child CPR	45 minutes
3	4	Safety, First Aid, and Infant Health Part 1	45 minutes
3	5	Safety, First Aid, and Infant Health Part 2	45 minutes
		Unit 3 (formative) Assessment	15 minutes
4		Simulation and Assessment	1:30
4	1	Simulation Experience	45 minutes
4	2	Summary and Assessment	45 minutes
		Post-summative Assessment	30 minutes
		Total	12:35-12:55

* Use of the Realityworks® Shaken Baby Syndrome Simulator™ (SBS Simulator) enhances the instruction in this lesson. If you would like to purchase the SBS Simulator, please contact your Realityworks representative.

The lessons are listed in the most appropriate order to present. If you choose to skip a lesson, simply move on to the next one; however, be aware that the unit formative assessments cover all lesson material in that unit, and the pre- and post-summative assessments cover the information presented in all lessons.



Additional Materials

Below is a list of suggested materials, other than those provided with the purchase of the curriculum.

Unit	Lesson	Materials
1	1	Scissors (one per group of three or four participants)
1	2	<i>No additional materials required</i>
2	1	- Burping cloths (one per Baby) - Receiving blankets (one per Baby)
2	2	Receiving blankets (one per Baby)
2	3	SBS video (options listed in FOCUS activity)
2	4	No additional materials required
2	5	- Infant towels (one per Baby) - Washcloths (one per Baby) - Infant bathtubs (one per Baby) - Infant soap and/or shampoo (one per Baby) - Cotton balls or pads (one or two per Baby) - Disposable gloves (one or two pairs per participant) - Water resistant pads (one per Baby) - Disposable diapers (one per Baby or participant) - Baby wipes or washcloths (one per Baby) - Plastic bags (one per Baby or participant) - Cloth diapers (one per Baby) - Rubber pants (one per Baby) - Baby pins (two per Baby)
2	6	<i>No additional materials required</i>
3	1	- Large, poster-sized pieces of white paper (one per group of three or four participants) - Blue markers (one per group of three or four participants) - Red markers (one per group of three or four participants) - Black markers (one per group of three or four participants) - Tape (optional)
3	2	- Large paper bag 20 small objects/toys (suggestions listed in FOCUS activity) - Alcohol swabs (optional; two per participant) - Disposable gloves (optional; one pair per participant) - Breathing barriers (optional; one per Baby)
3	3	- Envelopes (one per group of two or three participants) - Alcohol swabs (optional; two per participant)
3	4	- Scenario props (optional) - Five 9 x 12-inch envelopes - Five large, poster-sized pieces of white paper - Five blue markers - Five red markers - Five black markers
3	5	Scenario props (optional)
4	1	No additional materials required
4	2	- Baby wipes (one or two per Baby) 14 (or fewer) sheets of paper

Pre-summative Assessment

Directions: The following questions will ask you about your knowledge of your role as a caregiver, basic infant care, and health and safety. Please answer the questions by circling the best answer or writing your response in the space provided.

- When a child misbehaves and you must correct him/her, what do you want to convey?
 - He/she is naughty.
 - It is his/her behavior, not him/her, which you do not like.
 - If he/she does not improve his/her behavior, he/she will be punished.
 - You are the boss; be intimidating.

- For each situation choose the characteristic that best responds to the need.

Situation	Characteristic
☐ A toddler is dawdling in putting toys away.	a. Empathy and nurturing
☐ An infant is having a bad morning and cries a lot.	b. Patience
☐ A toddler refuses to come with to the park.	c. Decision-making skills
☐ An infant has a fever.	d. Safety and health conscious
☐ A toddler wants to go home.	e. Communication skills

- Which of the following responses to the given scenario is best?

Scenario: Erin, an eighteen-month-old girl, comes to your home for child care three days a week. Today she is whiny and clingy. She does not have a fever but seems to want lots of your attention.

- Set her in a play pen to play with toys so you can get to your other tasks.
- Explain to Erin that you cannot hold her all day, she is too heavy. Put her down for a nap.
- Call her parent/guardian to tell them to pick her up early as she must not feel well.
- Give her as much attention as possible and try to distract her with something interesting.

- Match the following stages of development with the age at which each *typically begins* to be demonstrated. Next to each statement, write “I” for infant or “T” for toddler.

- ☐ Talks, with about 50 words in his/her vocabulary
- ☐ Interest in own hands and feet
- ☐ Turns head in response to a voice; wants companionship as well as physical care
- ☐ Smiles back at people, involving whole body (i.e., arms lift, hands open, legs move)
- ☐ Pulls zippers, turns doorknobs, builds with blocks
- ☐ Has basic problem-solving skills, learns through trial and error

- Toddler Property Laws refers to a toddler’s inability to _____.

- Share
- Play fair
- Think for himself/herself
- Help others

- Match the following toys with the kind of learning they help provide. (Choose all that apply.)

Toy	Kind of Learning
☐ Checkers game	a. Shapes
☐ Large piece puzzle	b. Colors
☐ Finger paints	c. Rules
☐ Play telephone	d. Cause and effect
☐ Plastic stacking rings	e. Imagination
☐ Push-pull toy	
☐ Small plastic people	

Pre-summative Assessment (cont.)



7. For each statement below, indicate whether it is true or false by writing "T" for true and "F" for false next to the statement.

- _____ Hearing develops before an infant is born.
- _____ A seven-month-old can grasp small objects with the thumb and forefinger.
- _____ Potty training begins when a child begins to walk.
- _____ A content infant doesn't need much attention.
- _____ An infant's temperament is displayed by six months of age.
- _____ A six-month-old recognizes his/her own name.
- _____ A toddler is able to completely dress himself/herself.
- _____ Three-year-old children are typically happy and eager to help.

8. Match each of the following sounds an infant may make with the type of cry it expresses.

Type of Cry	Sound
_____ Hunger cry	a. Short continuous bursts
_____ Tired cry	b. Short, high-pitched piercing wail
_____ Pain cry	c. Forceful bursts off and on
_____ Discomfort cry	d. Whimpers in short bursts
_____ Fussy cry	e. Whimper, gradually turning to loud distressed cries

9. The 5 S's of Soothing a Crying Infant are:

- S _____
- S _____
- S _____
- S _____
- S _____

10. Why is it important to find ways to soothe a crying infant?

- a. So the infant will stop crying
- b. It comforts, reassures, and provides security for the infant
- c. It helps the caregiver keep occupied with tasks and avoid getting stressed
- d. To keep the infant quiet

11. Infants cry an average of ____ hours per day.

- a. 1-2
- b. 2-3
- c. 3-4
- d. 4-5

12. SBS stands for:

- a. Sensitive Baby Syndrome
- b. Stillborn Baby Syndrome
- c. Shaken Baby Syndrome
- d. Sensitive Behavior Syndrome

13. SBS is:

- a. A form of punishment or neglect
- b. A pre-existing medical condition
- c. A form of child abuse
- d. Always seen with visible bruises

14. True or False: An infant's neck muscles are strong.

- a. True
- b. False

15. Which area of the brain controls vision?

- a. Back
- b. Front
- c. Middle
- d. Side

16. Which of the following characteristics of an infant or toddler's body make it vulnerable to injury from shaking? (Choose all that apply.)

- a. Weak neck muscles
- b. Fragile undeveloped brain
- c. Heavy head
- d. Emotionally immature

17. If an infant is crying for a prolonged period of time and you are becoming stressed, which of the following would be a good way to handle the situation? (Choose all that apply.)

- a. Step out of the room for a moment.
- b. Go out for a pizza.
- c. Read an inspirational poem or article.
- d. Call someone for advice or help.

? Pre-summative Assessment (cont.)

18. True or False: The caregiver should cope with an infant's crying until the infant is able to stop.

- a. True
- b. False

19. Sixty to seventy percent of SBS perpetrators are:

- a. Female
- b. Male
- c. Parents
- d. Childcare providers

20. True or False: The best defense against making a wrong choice in the midst of frustration is learning about the problem.

- a. True
- b. False

21. What do you need to support when holding or handling an infant?

- a. Back, neck, head
- b. Back, neck, arms
- c. Neck, shoulders, arms
- d. Head, shoulders, arms

22. In which of the following holding techniques do you place the infant face up in your hand and his/her body along your forearm?

- a. Cradle hold
- b. Shoulder hold
- c. Football hold
- d. Side hold

23. Which of the following is a cause of nursemaid's elbow?

- a. Holding the infant in the same arm too often or too long
- b. Nursing the infant in an incorrect position
- c. Bottle feeding the infant in an incorrect position
- d. Picking the infant up by one arm

24. If an infant is picked up improperly, his/her _____ can slip out of place and cause nursemaid's elbow.

25. Match the steps for preparing a bottle with its correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
_____ Prepare formula	a. First
_____ Gently shake bottle	b. Second
_____ Gather supplies	c. Third
_____ Wash hands	d. Fourth
_____ Test bottle temperature	e. Fifth
_____ Heat prepared bottle	f. Sixth
_____ Keep infant in safe, comfortable place	g. Seventh

26. Match the steps in bottle feeding an infant with its correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
_____ Talk and smile as you feed the infant	a. First
_____ Feed, holding bottle at a 45-degree angle	b. Second
_____ Stop to burp when 1/3 of bottle is gone	c. Third
_____ Hold infant in lap, head higher than body	d. Fourth
_____ Resume feeding, burp again when done	e. Fifth

27. True or False: The fact that it is free is an advantage of breastfeeding.

- a. True
- b. False

28. True or False: Refrigerate leftover bottled milk for later use.

- a. True
- b. False

29. True or False: Sharing the feeding experience with the father or another caregiver is an advantage of bottle feeding.

- a. True
- b. False

Pre-summative Assessment (cont.)



30. True or False: Baby bottle tooth decay is caused by prolonged contact with almost any liquid other than water.

- a. True
- b. False

31. Match the steps in preparing to bathe an infant with their correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
_____ Line the tub to prevent slipping	a. First
_____ Gather supplies	b. Second
_____ Test water temperature with elbow	c. Third
_____ Fill the tub with 5-7 centimeters of warm water	d. Fourth

32. Match the steps in bathing an infant with their correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
_____ Pat infant dry with clean towel	a. First
_____ Wipe infant's eyes	b. Second
_____ Place infant in tub	c. Third
_____ Wash infant's body	d. Fourth
_____ Lay infant down to diaper, then dress	e. Fifth
_____ Wash infant's hair	f. Sixth
_____ Wash infant's face, ears, and neck	g. Seventh

33. Match the steps to diaper an infant using a disposable diaper with its correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
_____ Place pad under infant's bottom	a. First
_____ Open clean diaper, slide under infant	b. Second
_____ Gather supplies	c. Third
_____ Remove dirty diaper	d. Fourth
_____ Remove gloves, discard with dirty diaper	e. Fifth
_____ Clean infant's bottom	f. Sixth
_____ Wash hands, put on gloves	g. Seventh
_____ Wash hands, wash infant's hands	h. Eighth
_____ Position diaper, secure fasteners	i. Ninth

34. What are some ideas to use if an infant tends to squirm while you are diapering him/her?

- a. Distract him/her with a toy
- b. Sing or talk to him/her
- c. Strap his/her arms down
- d. Tell him/her "no"

35. For each advantage or disadvantage statement, write the letter of the diaper type to which it applies.

Statement	Diaper Type
_____ Less expensive	a. Cloth
_____ More comfortable	b. Disposable
_____ More convenient	
_____ Less diaper rash	
_____ Less leakage	



Pre-summative Assessment (cont.)

36. Match the correct cloth diaper folding method with the gender for which it applies by writing the letter of the gender in the space provided next each folding method.

Folding Method	Gender
____ Fold top edge down in the front	a. Boy
____ Fold top edge down in the back	b. Girl

37. Match the steps in proper glove removal with their correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
____ Immediately discard gloves in the trash	a. First
____ With clean hand, strip glove off from underneath, turning inside out	b. Second
____ Grab the one glove at the palm and strip it off	c. Third
____ Ball up dirty glove in palm of other gloved hand	d. Fourth

38. Why should an infant or toddler's schedule be tracked by a caregiver? (Choose all that apply.)
- To inform the parent/guardian of what happened during the day or time of care
 - To share with other parents/guardians for comparing with their child's schedule
 - To identify a pattern of behavior for future reference
 - To compare with other children of the same age and determine differences
39. Which of the following are things that should be tracked by a caregiver? (Choose all that apply.)
- Bowel movements
 - Eating
 - Sleeping
 - Playing

40. Which of the following are safe sleep practices for infants? (Choose all that apply.)

- Place the infant on his/her back for naps and at night.
- Place the infant on a soft sleep surface.
- Never allow smoking around the infant.
- Keep the infant's sleep area close to, but separate from, where you or others sleep.

41. What does SIDS stand for?

- Shaken Infant Disorder Situation
- Sudden Infant Disorder Syndrome
- Shaken Infant Death Situation
- Sudden Infant Death Syndrome

42. Which of the following statements about SIDS is correct?

- It occurs most frequently in girls.
- It often happens quickly during sleep, showing no signs of suffering.
- Most deaths happen between 8 and 12 months of age.
- It occurs most often in spring and summer months.

43. True or False: No one knows the cause of SIDS.

- True
- False

44. SIDS is the leading cause of death in infants between _____ and _____ of age.

- One month, six months
- One month, one year
- Two months, eight months
- Three months, nine months

45. You respond to a child who just collapsed. After you ensure the scene is safe, what do you do next?

- Check the child's mouth for foreign objects.
- Check to see if the child is responsive.
- Perform 30 chest compressions.
- Give two slow mouth-to-mouth breaths.

Pre-summative Assessment (cont.)



46. You pull a three-year-old child from the bottom of the shallow end in a pool. You find that she is limp and unresponsive. You are alone and no one responds to your shout for help. You are ready to begin the steps of CPR. When should you call 911 or your local emergency number?
- After five sets of 30 chest compressions and two breaths
 - As soon as the child is removed from the pool and you find she is unresponsive
 - After 10 minutes of CPR and still no response
 - After two breaths and before beginning chest compressions
47. You have found an unresponsive child. You open his airway and see that he is not breathing. You attempt to deliver rescue breaths, but his chest does not rise. You know this means that you are not delivering effective rescue breaths. What is the most common explanation for the chest not rising?
- The child has an advanced lung infection.
 - You failed to properly open the child's airway.
 - The child has asthma.
 - The chest does not always rise, even when delivering effective rescue breaths.
48. To check for breathing, you "look, listen, and feel." What are you *looking* for?
- Any movement of the child's body
 - Any twitches or spasms
 - Foreign objects in the child's mouth
 - Rise and fall of the child's chest
49. A young child has collapsed and is unconscious. He choked on a piece of meat. What do you do first?
- Perform chest compressions.
 - Open the child's airway and check for foreign objects in his mouth.
 - Give rescue breaths.
 - Ask the child if he is choking.
50. A responsive three-year-old child is struggling to breathe. She cannot cough forcefully or move air. She is turning blue. Her mother says, "I think she swallowed a button." You ask the child, "Are you choking?" She nods yes. You ask, "Can you speak?" She shakes her head no. She is holding her throat. What do you do first?
- Perform five back slaps, then five chest thrusts.
 - Attempt a blind finger sweep of the child's mouth and pat her on the back.
 - Administer 100 percent oxygen and monitor the child closely.
 - Perform abdominal thrusts (the Heimlich maneuver) until the button is removed or the child becomes unresponsive.
51. A two-year-old girl is pulled from below the water of a neighbor's pool. The neighbor's children say the child slipped under the water just a few minutes ago. You kneel beside the child and find that she is unresponsive. You send someone to call 911 or your local emergency number, while you remain with the child. What do you do next?
- Turn the child's head downward and perform abdominal thrusts (the Heimlich maneuver).
 - Perform five back slaps, then finger sweep the child's mouth.
 - Find the proper hand position and begin chest compressions.
 - Open the child's airway, look, listen, and feel for breathing, and if the child is not breathing normally, give two rescue breaths.
52. You are preparing to perform chest compressions on a child who is unresponsive with no breathing or signs of life after you deliver two rescue breaths. Which of the following best describes where you should place your hands to perform the chest compressions?
- Just below the child's neck, over the top half of his/her breastbone
 - Over the very bottom of the child's breastbone, over his/her liver
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 - Place the whole palm of your hand anywhere on the sternum

? Pre-summative Assessment (cont.)

53. You are performing CPR. What ratio of chest compressions to breaths should you use?
- 30 to 2
 - 12 to 4
 - 5 to 1
 - 3 to 1
54. A two-year-old child is choking. The child has a partial obstruction, is coughing, and is obviously frightened. What should you do?
- Perform abdominal thrusts (the Heimlich maneuver).
 - Perform back slaps.
 - Encourage the child to cough it out.
 - Perform the steps of CPR.
55. You are the caregiver of a toddler who has just fallen head first into a wooden table. An area the size of a grape appears on the toddler's forehead and immediately begins to swell. In order to control internal bleeding, resulting in a bruise, what should you do first?
- Lay the toddler down and elevate his/her feet.
 - Apply pressure on the toddler's neck.
 - Apply a cold compress to the injured area.
 - Do nothing; it is only a bruise.
56. If you were the first caregiver to the scene of an accident, what would you do first?
- Check the victim for injuries.
 - Check the victim's pulse.
 - Check the scene for danger.
 - Care for the victim's injuries.
57. A toddler in your care accidentally touched a hot iron with her hand. Her palm and fingers are red and have blisters. What first aid step would you perform to treat the 2nd degree burn?
- Place the burned area under or in cool water.
 - Place ice on the burned area.
 - Place the burned area under or in warm water.
 - Cover the burned area with a used dish towel.
58. As a caregiver of an infant/toddler, when would you call a doctor?
- If the child is lethargic, irritable, and cries inconsolably
 - If the child pulls on one or both ears and fails to respond to loud sounds
 - If the child's diaper rash is red, raw, and accompanied by a fever
 - All of the above



Pre-summative Assessment Answer Key

1. When a child misbehaves and you must correct him/her, what do you want to convey?
 - a. He/she is naughty.
 - b. It is his/her behavior, not him/her, which you do not like.**
 - c. If he/she does not improve his/her behavior, he/she will be punished.
 - d. You are the boss; be intimidating.

2. For each situation choose the characteristic that best responds to the need.

Situation	Characteristic
<u>b</u> A toddler is dawdling in putting toys away.	a. Empathy and nurturing
<u>a</u> An infant is having a bad morning and cries a lot.	b. Patience
<u>c</u> A toddler refuses to come with to the park.	c. Decision-making skills
<u>d</u> An infant has a fever.	d. Safety and health conscious
<u>e</u> A toddler wants to go home.	e. Communication skills

3. Which of the following responses to the given scenario is best?

Scenario: Erin, an eighteen-month-old girl, comes to your home for child care three days a week. Today she is whiny and clingy. She does not have a fever but seems to want lots of your attention.

- a. Set her in a play pen to play with toys so you can get to your other tasks.
- b. Explain to Erin that you cannot hold her all day, she is too heavy. Put her down for a nap.
- c. Call her parent/guardian to tell them to pick her up early as she must not feel well.
- d. Give her as much attention as possible and try to distract her with something interesting.**

4. Match the following stages of development with the age at which each ***typically begins*** to be demonstrated. Next to each statement, write “I” for infant or “T” for toddler.

<u>T</u>	Talks, with about 50 words in his/her vocabulary
<u>I</u>	Interested in own hands and feet
<u>I</u>	Turns head in response to a voice; wants companionship as well as physical care
<u>I</u>	Smiles back at people, involving whole body (i.e., arms lift, hands open, legs move)
<u>T</u>	Pulls zippers, turns doorknobs, builds with blocks
<u>T</u>	Has basic problem-solving skills, learns through trial and error

5. Toddler Property Laws refers to a toddler’s inability to _____.

- a. Share**
- b. Play fair
- c. Think for himself/herself
- d. Help others

6. Match the following toys with the kind of learning they help provide. (Choose all that apply.).

Toy	Kind of Learning
<u>c</u> Checkers game	a. Shapes
<u>a,b</u> Large piece puzzle	b. Colors
<u>b,e</u> Finger paints	c. Rules
<u>e</u> Play telephone	d. Cause and effect
<u>a,b,d</u> Plastic stacking rings	e. Imagination
<u>d</u> Push-pull toy	
<u>e</u> Small plastic people	

Pre-summative Assessment Answer Key (cont.)



7. For each statement below, indicate whether it is true or false by writing “T” for true and “F” for false next to the statement.

 T Hearing develops before an infant is born.
 F A seven-month-old can grasp small objects with the thumb and forefinger.
 F Potty training begins when a child begins to walk.
 F A content infant does not need much attention.
 T An infant’s temperament is displayed by six months of age.
 T A six-month-old recognizes his/her own name.
 F A toddler is able to completely dress himself/herself.
 T Three-year-old children are typically happy and eager to help.

8. Match each of the following sounds an infant may make with the type of cry it expresses.

Type of Cry	Sound
<u> a </u> Hunger cry	a. Short continuous bursts
<u> e </u> Tired cry	b. Short, high-pitched piercing wail
<u> b </u> Pain cry	c. Forceful bursts off and on
<u> c </u> Discomfort cry	d. Whimpers in short bursts
<u> d </u> Fussy cry	e. Whimper, gradually turning to loud distressed cries

9. The 5 S’s of Soothing a Crying Infant are:

S waddling
S ide/Stomach
S bushing
S winging
S ucking

10. Why is it important to find ways to soothe a crying infant?

a. So the infant will stop crying
b. It comforts, reassures, and provides security for the infant
c. It helps the caregiver keep occupied with tasks and avoid getting stressed
d. To keep the infant quiet

11. Infants cry an average of ____ hours per day.

a. 1-2
b. 2-3
c. 3-4
d. 4-5

12. SBS stands for:

a. Sensitive Baby Syndrome
b. Stillborn Baby Syndrome
c. Shaken Baby Syndrome
d. Sensitive Behavior Syndrome

13. SBS is:

a. A form of punishment or neglect
b. A pre-existing medical condition
c. A form of child abuse
d. Always seen with visible bruises

14. True or False: An infant’s neck muscles are strong.

a. True
b. False

15. Which area of the brain controls vision?

a. Back
b. Front
c. Middle
d. Side

16. Which of the following characteristics of an infant or toddler’s body make it vulnerable to injury from shaking? (Choose all that apply.)

a. Weak neck muscles
b. Fragile undeveloped brain
c. Heavy head
d. Emotionally immature

17. If an infant is crying for a prolonged period of time and you are becoming stressed, which of the following would be a good way to handle the situation? (Choose all that apply.)

a. Step out of the room for a moment
b. Go out for a pizza
c. Read an inspirational poem or article
d. Call someone for advice or help



Pre-summative Assessment Answer Key (cont.)

18. True or False: The caregiver should cope with an infant's crying until the infant is able to stop.

a. True

b. False

19. Sixty to seventy percent of SBS perpetrators are:

a. Female

b. Male

c. Parents

d. Childcare providers

20. True or False: The best defense against making a wrong choice in the midst of frustration is learning about the problem.

a. True

b. False

21. What do you need to support when holding or handling an infant?

a. Back, neck, head

b. Back, neck, arms

c. Neck, shoulders, arms

d. Head, shoulders, arms

22. In which of the following holding techniques do you place the infant face up in your hand and his/her body along your forearm?

a. Cradle hold

b. Shoulder hold

c. Football hold

d. Side hold

23. Which of the following is a cause of nursemaid's elbow?

a. Holding the infant in the same arm too often or too long

b. Nursing the infant in an incorrect position

c. Bottle feeding the infant in an incorrect position

d. Picking the infant up by one arm

24. If an infant is picked up improperly, his/her

radius can slip out of place and cause nursemaid's elbow.

25. Match the steps for preparing a bottle with its correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
<u>d</u> Prepare formula	a. First
<u>f</u> Gently shake bottle	b. Second
<u>c</u> Gather supplies	c. Third
<u>a</u> Wash hands	d. Fourth
<u>g</u> Test bottle temperature	e. Fifth
<u>e</u> Heat prepared bottle	f. Sixth
<u>b</u> Keep infant in safe, comfortable place	g. Seventh

26. Match the steps in bottle feeding an infant with its correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
<u>c</u> Talk and smile as you feed the infant	a. First
<u>d</u> Feed, holding bottle at a 45-degree angle	b. Second
<u>b</u> Stop to burp when 1/3 of bottle is gone	c. Third
<u>a</u> Hold infant in lap, head higher than body	d. Fourth
<u>e</u> Resume feeding, burp again when done	e. Fifth

27. True or False: The fact that it is free is an advantage of breastfeeding.

a. True

b. False

28. True or False: Refrigerate leftover bottled milk for later use.

a. True

b. False

29. True or False: Sharing the feeding experience with the father or another caregiver is an advantage of bottle feeding.

a. True

b. False

Pre-summative Assessment Answer Key (cont.)



30. True or False: Baby bottle tooth decay is caused by prolonged contact with almost any liquid other than water.

a. True

b. False

31. Match the steps in preparing to bathe an infant with their correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
<u>b</u> Line the tub to prevent slipping	a. First
<u>a</u> Gather supplies	b. Second
<u>d</u> Test water temperature with elbow	c. Third
<u>c</u> Fill tub with 5-7 centimeters of warm water	d. Fourth

32. Match the steps in bathing an infant with their correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
<u>f</u> Pat infant dry with clean towel	a. First
<u>a</u> Wipe infant's eyes	b. Second
<u>b</u> Place infant in tub	c. Third
<u>e</u> Wash infant's body	d. Fourth
<u>g</u> Lay infant down to diaper, then dress	e. Fifth
<u>d</u> Wash infant's hair	f. Sixth
<u>c</u> Wash infant's face, ears, and neck	g. Seventh

33. Match the steps to diaper an infant using a disposable diaper with its correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
<u>c</u> Place pad under infant's bottom	a. First
<u>f</u> Open clean diaper, slide under infant	b. Second
<u>a</u> Gather supplies	c. Third
<u>d</u> Remove dirty diaper	d. Fourth
<u>b</u> Remove gloves, discard with dirty diaper	e. Fifth
<u>e</u> Clean infant's bottom	f. Sixth
<u>b</u> Wash hands, put on gloves	g. Seventh
<u>i</u> Wash hands, wash infant's hands	h. Eighth
<u>g</u> Position diaper, secure fasteners	i. Ninth

34. What are some ideas to use if an infant tends to squirm while you are diapering him/her?

a. Distract him/her with a toy

b. Sing or talk to him/her

c. Strap his/her arms down

d. Tell him/her "no"

35. For each advantage or disadvantage statement, write the letter of the diaper type to which it applies.

Statement	Diaper Type
<u>a</u> Less expensive	a. Cloth
<u>a</u> More comfortable	b. Disposable
<u>b</u> More convenient	
<u>a</u> Less diaper rash	
<u>b</u> Less leakage	



Pre-summative Assessment Answer Key (cont.)

36. Match the correct cloth diaper folding method with the gender for which it applies by writing the letter of the gender in the space provided next each folding method.

Folding Method	Gender
<u> b </u> Fold top edge down in the front	a. Boy
<u> a </u> Fold top edge down in the back	b. Girl

37. Match the steps in proper glove removal with their correct step number by writing the letter of the correct step number in the space provided next to each step.

Step	Step Number
<u> d </u> Immediately discard gloves in the trash	a. First
<u> c </u> With clean hand, strip glove off from underneath, turning inside out	b. Second
<u> a </u> Grab the one glove at the palm and strip it off	c. Third
<u> b </u> Ball up dirty glove in palm of other gloved hand	d. Fourth

38. Why should an infant or toddler's schedule be tracked by a caregiver? (Choose all that apply.)
- a. To inform the parent/guardian of what happened during the day or time of care**
 - b. To share with other parents/guardians for comparing with their child's schedule
 - c. To identify a pattern of behavior for future reference**
 - d. To compare with other children of the same age and determine differences
39. Which of the following are things that should be tracked by a caregiver? (Choose all that apply.)
- a. Bowel movements**
 - b. Eating**
 - c. Sleeping**
 - d. Playing

40. Which of the following are safe sleep practices for infants? (Choose all that apply.)

- a. Place the infant on his/her back for naps and at night.**
- b. Place the infant on a soft sleep surface.
- c. Never allow smoking around the infant.**
- d. Keep the infant's sleep area close to, but separate from, where you or others sleep.**

41. What does SIDS stand for?

- a. Shaken Infant Disorder Situation
- b. Sudden Infant Disorder Syndrome
- c. Shaken Infant Death Situation
- d. Sudden Infant Death Syndrome**

42. Which of the following statements about SIDS is correct?

- a. It occurs most frequently in girls.
- b. It often happens quickly during sleep, showing no signs of suffering.**
- c. Most deaths happen between 8 and 12 months of age.
- d. It occurs most often in spring and summer months.

43. True or False: No one knows the cause of SIDS.

- a. True**
- b. False

44. SIDS is the leading cause of death in infants between _____ and _____ of age.

- a. One month, six months
- b. One month, one year**
- c. Two months, eight months
- d. Three months, nine months

45. You respond to a child who just collapsed. After you ensure the scene is safe, what do you do next?

- a. Check the child's mouth for foreign objects.
- b. Check to see if the child is responsive.**
- c. Perform 30 chest compressions.
- d. Give two slow mouth-to-mouth breaths.

Pre-summative Assessment Answer Key (cont.)



46. You pull a three-year-old child from the bottom of the shallow end in a pool. You find that she is limp and unresponsive. You are alone and no one responds to your shout for help. You are ready to begin the steps of CPR. When should you call 911 or your local emergency number?
- After five sets of 30 chest compressions and two breaths**
 - As soon as the child is removed from the pool and you find she is unresponsive
 - After 10 minutes of CPR and still no response
 - After two breaths and before beginning chest compressions
47. You have found an unresponsive child. You open his airway and see that he is not breathing. You attempt to deliver rescue breaths, but his chest does not rise. You know this means that you are not delivering effective rescue breaths. What is the most common explanation for the chest not rising?
- The child has an advanced lung infection.
 - You failed to properly open the child's airway.**
 - The child has asthma.
 - The chest does not always rise, even when delivering effective rescue breaths.
48. To check for breathing, you "look, listen, and feel." What are you *looking* for?
- Any movement of the child's body
 - Any twitches or spasms
 - Foreign objects in the child's mouth
 - Rise and fall of the child's chest**
49. A young child has collapsed and is unconscious. He choked on a piece of meat. What do you do first?
- Perform chest compressions.
 - Open the child's airway and check for foreign objects in his mouth.**
 - Give rescue breaths.
 - Ask the child if he is choking.
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