

DR AUDI
—INTERNATIONAL—

PEDIATRICS

REVISION QUESTIONS

**OVER 500 MULTIPLE
CHOICE QUESTIONS,
CASE STUDIES WITH
SHORT AND LONG
ESSAYS**



DR AUDI

Pediatrics

Second Edition

Suleiman Ndoro Jnr (Dr Audi)

Copyright © 2020
Published by Dr Audi

All rights reserved.

No parts of this book may be reproduced in any form, stored in a retrieval system, or transcribed, in any form by any means, electronic, mechanical, photocopying, recording or otherwise, without the prior written permission of the publisher through doctoraudikenya@gmail.com.

ISBN: 978-9914-702-91-0

PUBLISHING:

Published by Dr Audi International

Designed by Dr Audi International

+254710138968

doctoraudiglobal@gmail.com

PREFACE

PEDIATRICS REVISION BOOK is primarily meant for undergraduate students in medical school.

The main objective of this book is to help students review their knowledge of pediatrics acquired through standard textbooks. Pediatrics is one of the essential subjects in the clinical areas and a sound knowledge of it is important for anyone in medical school. This book comprises of questions compiled from various universities and colleges and is designed to help students in their revisions and provide them with a feedback on their progress and an opportunity to improve.

This book has 10 test papers and each test paper consists of three sections: Section A has 30 True/False Questions and Section B consists of essay questions worth 50 Marks.

Students of pediatrics will find this book useful. A quick perusal of the questions will provide evidence that the book intends to stimulate reasoning. Suggestions and criticism about the book are welcomed.

SULEIMAN NDORO JNR (DR AUDI)
DR AUDI INTERNATIONAL

TEST PAPER 1

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1: The following are live vaccines:

- A. Measles
- B. BCG
- C. Tetanus Toxoid
- D. Yellow fever
- E. Hepatitis B

2: Down's syndrome features include:

- A. Third fontanelle
- B. Low set eyes
- C. Flat set ears
- D. Bigger than normal tongue
- E. Single simian crease

3: In rheumatic fever

- A. Major criteria include chorea
- B. Fleeting polyarthritis is a minor criteria
- C. Commonly affect 3 years old
- D. Treatment includes rest
- E. Presents with changing murmurs

4: Cardinal signs of congestive heart failure include:

- A. Cardiomegally
- B. Congested neck veins
- C. Hepatomegaly
- D. Edema
- E. Tachycardia

5: A 13 month boy present with a cough associated with lower chest wall drawing. He is able to feed.

- A. Chloramphenical is the first line of treatment
- B. Gentamycin is indicated
- C. Treat him as an outpatient
- D. Oxygen may be indicated

E. This is severe pneumonia

6: Concerning urinary tract infection:

- A. Vesicourethral reflux is a risk factor
- B. Sexual abuse should be ruled out
- C. Children with pyelonephritis should be admitted
- D. May present with hematuria
- E. May have chills and rigors

7: Concerning pulmonary tuberculosis:

- A. Cough for more than 2 weeks is suggestive
- B. Failure to thrive supports the diagnosis
- C. History of contact is important
- D. Can use all drugs used in adults
- E. Treatment is the same as for extra-pulmonary tuberculosis

8: Aisha is a month old baby, has watery stool:

- A. Rotavirus infection is likely diagnosis
- B. She has roundworm infection
- C. In most babies it presents at this age groups
- D. Food preparation technique may determine its occurrence
- E. ORS is contraindicated

9: In a 10 year old boy with severe asthma, the following drugs are of benefit:

- A. Oral prednisone
- B. Intravenous diazepam
- C. Nebulized salbutamol
- D. Adrenaline
- E. Parental antibiotics

10: Causes of dyspnea in a 2 year old infant may include:

- A. Foreign body aspiration
- B. Hunger
- C. Pleural effusion
- D. Bronchiolitis

E.Pneumonia

11: The following are of importance in immediate assessment of a newborn infant:

- A.Posture
- B.Color
- C.Ability to cry after 20 minutes
- D.Activity
- E.Heart rate of the infant

12: The following are true of infective endocarditis:

- A.Never occurs in previously unhealthy heart
- B.Commonly caused by a bacteria
- C.Commonly caused by a virus
- D.Prophylactic benzathine penicillin is necessary for prevention
- E.Is associated with vegetation of the valves

13: The following are presentations of Wilms' Tumour (Nephroblastoma)

- A.Low grade intermittent fever
- B.Haematuria
- C.Hypertension
- D.Obesity
- E.Abdominal mass

14: Metabolic disorders causing coma in children include:

- A.Hypoglycaemia
- B.Dehydration
- C.Meningitis
- D.Alcohol
- E.Malaria

15: The following are true of cerebral palsy:

- A.Predisposing factors include prematurity and anoxia.
- B.Never presents with delayed milestone.
- C.The delay is in motor development.

- D. You never get spasticity
- E. Seizures are common in these patients.

16: Causes of neonatal jaundice include:

- A. Malaria
- B. Biliary stenosis
- C. Hepatitis B
- D. Sickle cell disease
- E. Hypothyroidism

17: In DKA the following are necessary medical emergency interventions:

- A. IV fluids.
- B. Insulin.
- C. Oral hypoglycemic agents.
- D. Urine input output chart
- E. Antibiotics.

18: In neonatal resuscitation:

- A. Drying the baby is step number one
- B. Head is positioned at neutral position
- C. If heart rate is below 60 give compressions
- D. Ventilation alone cannot improve heart rate that is between 60 and 100
- E. Ambu- bagging required if respiratory rate is less than 30

19: Baby Ali presented to hospital 1 day after birth with inability to feed

- A. She may be irritable
- B. May be lethargic
- C. May have septic cord
- D. Gentamycin is indicated
- E. Chloramphenicol is indicated

20: The following is likely to occur in kwashiorkor

- A. Edema

- B. Flaky paint dermatitis
- C. Old man's face
- D. Irritability
- E. Extremely low weight

21: Halima presented with easy fatigability, she has pale hands:

- A. Need to check her hemoglobin levels
- B. Her ethnicity is important in management
- C. She could be having haemoglobinopathies
- D. May have been born prematurely
- E. May have *Ankylostoma duodenale* infection

22: Renal failure:

- A. Acute renal failure is associated with oliguria
- B. May follow hypovolaemic shock
- C. Input output chart is necessary
- D. Responds well to gentamicin
- E. Hypokalaemia is common

23: Rickets of prematurity:

- A. Mostly occur in term babies
- B. Can present as early as 2 months
- C. Serum phosphate is usually high
- D. Can be prevented by Vitamin D supplementation
- E. The cause is non exposure to sunlight

24: Causes of prolonged jaundice in newborns include:

- A. Hypothyroidism
- B. Congenital biliary atresia
- C. Malaria
- D. Physiological jaundice
- E. Hypoglycemia

25: The term immunization refers to

- A. Injection with toxin
- B. The process of protecting a person from a specific disease

- C. The process of immunity developing into infection
- D. The process in which immunity occurs when a vaccine is given against a disease
- E. The process in which the vaccine acts in place of a natural antibody

26: In epilepsy:

- A. Violent muscular activity should not be restrained
- B. Metabolic disorders and intoxication must be excluded
- C. Intravenous access is optional in status epilepticus
- D. Long term treatment may be similar to that of complex convulsions
- E. Phenobarbitone 10-20mg/kg in divided doses may be used

27: Major criteria in the Jones system for the acute rheumatic fever include

- A. Migratory polyarthritits
- B. Carditis
- C. Sydenham's chorea
- D. Erythema nodosum
- E. Subcutaneous nodules

28: Heavy proteinuria is indicative of

- A. Protein energy malnutrition
- B. Chronic renal failure
- C. Nephrotic syndrome
- D. Pyelonephritis
- E. Juvenile diabetes mellitus

29: About Tetralogy of Fallot (TOF)

- A. Paroxysmal hypercyanotic attacks are common on exertion
- B. Cyanosis is present at birth
- C. Bacterial endocarditis may be a complication
- D. Systolic thrills may be felt along the left sternal border
- E. Knee chest position relieves cyanotic spells

30: The following treatment is indicated in a child who is convulsing now:

- A. IM Diazepam.
- B. IV Diazepam.
- C. PR Diazepam.
- D. Per oral phenobarbitone.
- E. Tegretol per oral.

SECTION B

1. What is the MOST common long-term sequela of bacterial meningitis in a child?

- A. Seizure disorder
- B. Intellectual disability
- C. Hearing loss
- D. Hemiparesis

2. Normal reflex patterns at birth may include :

- A. Grasp reflex
- B. Rooting reflex
- C. Moro's reflex
- D. All of the above

3. Measles rash begins :

- A. On chest and back
- B. Behind ear
- C. Behind neck
- D. On the face

4. A one year old boy presented to the emergency room with severe colicky abdominal pains associated with vomiting and bleeding per rectum. PR examination by the surgeon revealed a mass and blood on the finger on withdrawal. What is the most likely diagnosis?

- A. Pyloric stenosis
- B. Volvulus
- C. Intussusception

D. Gastroenteritis

5. A five years old boy was brought to emergency room with intractable convulsions. His mother said that he was playing in the swimming pool just before his friends noticed him convulsing and that he never had such condition before. On examination he was in coma with dilated non reactive pupils. All of the following are urgently indicated except:

- A. Blood sugar
- B. CT scan for the head
- C. CSF examination
- D. Skull X ray

6. A child starts to support his head at:

- A. 1 month.
- B. 2 months
- C. 3 months
- D. 4 months

7. The early recovery in kwashiorkor is

- A. Disappearance of edema
- B. Increased weight
- C. Increased appetite
- D. Interest in surroundings

8. Serious complications of staphylococcal pneumonia include all the following except :

- A. Lung abscess
- B. Bronchitis
- C. Empyema
- D. Lung collapse

9. Complications of diabetes mellitus in children include all the following except :

- A. Hypoglycemic coma
- B. Ketoacidotic coma

- C. Uremic coma
- D. Skin infections

10. Weaning is characterized by all the following except :

- A. It should be gradual
- B. Should begin with hypoallergenic diet
- C. You can add two types of food simultaneously
- D. Not to be tried immediately after vaccination

11. Common presentations of chronic renal failure in children include :

- A. Anemia
- B. Bone deformity
- C. Hypertension
- D. All of the above

12. Juvenile rheumatoid arthritis is characterized by one of the following:

- A. Commonly affects large joints
- B. Rheumatoid factor is always positive
- C. Excellent response to steroids in all cases
- D. Commonly affects small joints

13. All of the following are true about febrile convulsions except :

- A. Commonly seen between 6 months to 5 years age
- B. Usually does not last more than 10 minutes.
- C. Long term anticonvulsants are usually not needed
- D. Seizures are classically focal

14. Asthma triggers include all the following except :

- A. Viral respiratory infections
- B. Tobacco smoke
- C. House dust mite
- D. Steroids

15. Incubation period for hepatitis A is :

- A. 10 days
- B. 2 to 6 weeks
- C. 2 months
- D. 6 months

16. Hemophilia A is characterized by ONLY one of the following:

- A. Decreased activity of factor VIII
- B. An autosomal dominant disease
- C. Less common than hemophilia B
- D. Normal partial thromboplastin time.

17. Type 1 diabetes mellitus is characterized by all of the following except :

- A. Genetic susceptibility
- B. Mumps and chicken pox are common triggering factors for its onset
- C. Is treated only by insulin
- D. Oral hypoglycemic drugs have a therapeutic role

18. Prevention of rheumatic fever includes all the following except :

- A. Accurate treatment of acute tonsillitis in children
- B. Antistreptococcal vaccine
- C. Intramuscular penicillin for children with rheumatic heart disease every 3 weeks
- D. Community eradication of streptococcal infections

19. Which of the following is true about Eisenmenger syndrome?

- A. Usually a primary congenital cyanotic heart disease
- B. Considered a high indication for surgery in a baby with congenital heart disease
- C. Represents a serious complication of non cyanotic heart disease
- D. Pulmonary hypertension is not always present

20. All the following statements about tuberculosis in children are true except:

- A. Chest TB is more common than other types

- B. Tuberculin test is always positive in any tuberculous child
- C. Should be included in differential diagnosis of all chronic chest problems
- D. BCG does not give full protection against TB

SECTION C

1. About urinary tract infections during infancy

- a) What are the predisposing factors? (3 Marks)
- b) List down the common causative organisms? (2 Marks)
- c) List 5 investigations to be carried out. (5 Marks)

2. Regarding neonatal tetanus:

- a) What is the causative organism? (2 Marks)
- b) What are the predisposing factors? (5 Marks)
- c) List 3 preventive measures against neonatal tetanus (3 Marks)

3. About rheumatic fever:

- a) List 2 major presentations and 2 minor presentations of acute rheumatic fever (4 Marks)
- b) Outline the treatment of acute Rheumatic fever (4 Marks)
- c) What is the prophylactic treatment? (2 Marks)

4. You are called to receive a child who is born prematurely. The baby weighs 1500 gms.

- a) List 5 striking features that you will get on examination (5 Marks)
- b) List 5 probable complications in this baby (5 Marks)

5. Baby Mutheu that is one year old comes to hospital with 2 days history of diarrhea. On examination the child has sunken eyeballs, skin pinch takes more than 3 seconds and capillary refill is more than 2 seconds and has cold extremities.

- a) Classify the dehydration (2 Marks)
- b) What are the common causative organisms of diarrhea? (4 Marks)
- c) Outline the fluid management of this child. (4 Marks)

TEST PAPER 2

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. The following are normal features in a newborn:

- A. Chest circumference greater than head circumference
- B. Head circumference of 42 – 43 cm
- C. Caput succedaneum
- D. Haemorrhagic conjunctiva
- E. Bilateral cephalohaematoma

2. Cause of anemia in malaria infection include:

- A. Haemolysis
- B. Dyserythropoiesis
- C. Folate depletion
- D. Splenomegaly
- E. Vomiting

3. Audi is a 2 years old boy. He recently went to Kisumu to visit his aunt. He now presents to you with irritability and vomiting associated with fever:

- A. First line of treatment is fansider
- B. Trophozoites could be found in his blood slide
- C. Paracetamol is always indicated because of the fever
- D. Parental drug indicated for its non-severe form
- E. Antibiotics have a role in management of this condition

4. Concerning pulmonary tuberculosis:

- A. Cough for more than 2 weeks is suggestive
- B. Failure to thrive supports the diagnosis
- C. History of contact is important
- D. Can use all drugs used in adults
- E. Treatment is the same as for extra-pulmonary tuberculosis

5. Nephroblastoma:

- A. Associated with hypertension
- B. Always crosses midline
- C. Surgery has a role in management

- D. Usually discovered incidentally
- E. Can occur even in neonates

6. Concerning bronchitis:

- A. Associated with fever
- B. Associated with wheeze of sudden onset
- C. Responds to bronchodilators
- D. Associated with lung consolidation
- E. Common after 2 years of age

7. The following are freeze dried vaccines:

- A. BCG
- B. TT
- C. Yellow fever
- D. Polio
- E. DPT

8. Post-term babies are likely to be have:

- A. Absence of lanugo hair
- B. Long nails
- C. Heavy vernix caseosa
- D. Long lanugo hair
- E. Peeling skin of the palms

9. The following are normal features in a newborn:

- A. Chest circumference greater than head circumference
- B. Head circumference of 42 – 43 cm
- C. Caput succedaneum
- D. Haemorrhagic conjunctiva
- E. Bilateral cephalohaematoma

10. The following are true about management of neonatal hyperbilirubinaemia:

- A. Phenobarbitone may be used
- B. Anti-D serum should not be to Rhesus –ve mothers if they get an abortion

- C. Adequate caloric intake is important
- D. Phototherapy is mandatory for all cases
- E. Exchange transfusion may be necessary

11. Congenital acyanotic heart diseases include:

- A. Transposition of great vessels
- B. Ventricular Septal defects
- C. Tricuspid Atresia
- D. Patent ductus Arteriosus
- E. Infective Endocarditis

12. Acute otitis media in children:

- A. Is best treated by syringing the ear
- B. Bulging red eardrum is a feature
- C. Is characterized by foul smelling discharge
- D. Is more commonly seen in children aged 10-15 years
- E. Broad spectrum antibiotics recommended

13. In nephrotic syndrome; the following is characteristic:

- A. Proteinuria
- B. Haematuria
- C. Hypertension
- D. Hyperlipidemia
- E. Hypoproteinaemia

14. Complications of nephrotic syndrome:

- A. Renal artery thrombosis
- B. Spontaneous bacterial peritonitis
- C. Meningitis
- D. Renal failure
- E. Hepatic failure

15. Rickets may be caused by:

- A. Phenobarbitone
- B. Phenytoin
- C. Lack of vitamin D

- D. Corticosteroids
- E. Malabsorption syndrome

16. Zinc deficiency presents with:

- A. Impaired growth
- B. Poor appetite
- C. Diarrhea
- D. Skin rash
- E. Increased susceptibility to infection

17. In the Immunization of the HIV positive child:

- A. Routinely given all appropriate vaccines according to the national EPI programme schedule
- B. Only suspected cases should not be immunized
- C. BCG should not be given in symptomatic cases
- D. All live attenuated cases are contraindicated in symptomatic cases
- E. Yellow fever vaccine is absolutely contraindicated regardless of status

23. About vitamins:

- A. Retinol is a source of vitamin A mostly from animals
- B. Vitamin A deficiency decreases the severity of measles
- C. Children may present with rosary rickets
- D. Megaloblastic anaemia is a complication that results due to folic acid deficiency
- E. Iron deficiency anaemia is a complication that may result from deficiency of ascorbic acid

24. Indication that a vaccine has lost potency include:

- A. When a baby develops tuberculosis after BCG
- B. When there is formation of sediments after reconstitution
- C. When the monitor cards change colour
- D. When vaccine vials are exposed for 5 minutes to room temperature
- E. When a child develops paralysis after administration of oral polio vaccine

25. In a 10 year old boy with severe status asthmaticus the following drugs are of much help:

- A. Intravenous steroid
- B. Parenteral antibiotics
- C. Intravenous diazepam
- D. Subcutaneous epinehrine
- E. Salbutamol through nebulization

26. Diabetes mellitus classic symptoms include:

- A. Polyuria
- B. Polyphagia
- C. Polydipisia
- D. Weight loss
- E. Nocturia

27. In acute renal failure, the following are indications for dialysis:

- A. Severe hyperkalaemia
- B. Pulmonary edema
- C. Intractable metabolic acidosis
- D. Elevated urea
- E. Hypetnatraemia

28. Peptic ulcer disease in children:

- A. Usually those above 6 years
- B. Upper GIT bleeding is an indicator of surgery
- C. H. Pylori is treated using cotrimoxazole
- D. Ranitidine commonly used for those below 6 years
- E. Endoscopy is diagnostic

29. A strong dull tone on percussion over the chest in a 10 year old girl could suggest:

- A. Pleural effusion
- B. Pneumonia
- C. Asthma
- D. Normal finding
- E. Pneumothorax

30. Leukemia:

- A. Patient usually presents with recurrent infections
- B. Anaemia is rare
- C. Fever is a major feature
- D. Can present with hepatosplenomegally
- E. Has an excellent prognosis

SECTION B

1. Which of the following is correct about breast milk:

- A. Iron is low in breast milk.
- B. It should be stopped during diarrhea
- C. Its caloric content is much higher than cow milk
- D. It is poor in vitamin A

2. All of the following are examples of sex linked diseases except :

- A. G6PD deficiency
- B. Galactosemia
- C. Hemophilia
- D. None of the above

3. The CNS area commonly affected in poliomyelitis is:

- A. Anterior horn cells of spinal cord
- B. Cranial nerve nuclei
- C. Sensory roots of spinal nerves
- D. Motor part of cerebral cortex

4. All of the following are characteristics of cerebral palsy except:

- A. Non progressive motor deformity
- B. Peripheral insult
- C. Peripheral sensory loss
- D. Non curable

5. All the following are complications of post streptococcal glomerulonephritis except:

- A. Acute renal failure

- B. Septicemia
- C. Pulmonary edema
- D. Hypertensive encephalopathy

6. All of the following are characteristic of immune thrombocytopenic purpura except:

- A. Intracranial hemorrhage is a serious complication
- B. Always associated with splenomegaly
- C. Anti platelets antibodies are the main cause
- D. Is preceded by upper respiratory infection in more than 60% of cases

7. Suppurative lung diseases include all of the following except:

- A. Bronchiectasis
- B. Lung abscess
- C. Tuberculosis
- D. Empyema

8. In a one year old child, features of dehydration include:

- A. Lethragy
- B. Irritabilty
- C. Altered skin turgor
- D. Bulging fontanelle

9. In a 2 year old boy who is otherwise healthy presenting with sudden onset of high temeperature, the following differential diagnosis should be considered:

- A. Acute attack of malaria
- B. Acute otitis media
- C. Urinary tract infection
- D. Worm infection

10. A 3 day old baby is noted to be having swollen breasts discharging whitish fluid:

- A. The mother should be encouraged to squeeze the breats constantly to avoid engorgement
- B. The baby should be started on strong antibiotics immediately as this

is evidence of bacterial infection

- C. The mother should be re-assured and advised not to touch the breasts unnecessarily
- D. None of the above apply

11. In a 5 year old child presenting with acute onset of puffiness of the face, the following laboratory test is the most useful initial test:

- A. Urinalysis for proteinuria and haematuria
- B. Serum uric acid
- C. Blood urea and electrolytes
- D. VDRL

12. The following present with cyanosis, except:

- A. Tetralogy of Fallot
- B. Atrial septal defect
- C. Tricuspid atresia
- D. Transposition of great vessels

13. You are evaluating an infant born at 39 weeks gestation weighing 2000g. Which of the following would be the appropriate classification of this infant?

- A. Low birth weight
- B. Premature
- C. Small for gestation age
- D. Low birth weight and small for gestation age

14. Human milk has adequate amount of all the following EXCEPT:

- A. Calcium
- B. Magnesium
- C. Fluoride
- D. Lactoferrin

15. A hospitalised neonate is given the diagnosis of bronchopulmonary dysplasia (BPD). Which of the following describes the pathophysiology of BPD?

- A. An inflammatory insult to the lungs late in fetal development

- B. Failure of development of pulmonary arterioles during early fetal life
- C. Intrauterine viral infection
- D. The use of oxygen and positive-pressure breathing in the treatment of respiratory distress syndrome

16. A 29 week gestation infant is being resuscitated in the delivery room, surfactant is given through the endotracheal tube. Which of the following is the most physiologically active component of surfactant?

- A. Surfactant protein A
- B. Surfactant protein B
- C. Water
- D. Phospholipid

17. An infant has the following findings at 5 minutes of life: pulse 130 /minutes, cyanotic hands and feet, some flexion of extremities, grimace and crying effectively. This infant has an APGAR score of:

- A. 7
- B. 8
- C. 10
- D. 9

18. The commonest type of dehydration is:

- A. Isotonic
- B. Hypertonic
- C. Hyperosmolar
- D. Hypotonic

19. The commonest cause of convulsions in neonates is:

- A. Infections
- B. Hypoglycemia
- C. Asphyxia
- D. Electrolyte imbalance

20. The diagnostic feature of measles is:

- A. Cough
- B. Maculo-papular rash
- C. Conjunctivitis
- D. Koplik spots

SECTION C

- 1. a) What is the causative organism of scabies? (2 Marks)
- b) List 4 clinical features of scabies (4 Marks)
- c) What are the complications of scabies? (4 Marks)

2. Define the following terminology.

- a) Growth (2 Marks)
- b) Development (2 Marks)
- c) Growth monitoring (2 Marks)
- d) Weaning (2 Marks)
- e) Malnutrition (2 Marks)

3. Breastfeeding is an important part of paediatric nutrition

- a) List 4 advantages of breast feeding (2 Marks)
- b) Briefly explain proper breastfeeding technique in term of the following.
 - 1. Positioning (4 Marks)
 - 2. Attachment (4 Marks)

4. A child aged 2 years weighing 6kg presents with a two weeks history of swelling of the lower limbs, refusal to feed, skin lesions around the genitalia and the lower limb. The child is apathetic, afebrile and has pitting oedema. Urine output is normal.

- a) What is the most likely diagnosis? (2 Marks)
- b) Mention any 4 predisposing factors to the above conditions (4 Marks)
- c) What are the likely complications of the above condition? (4 Marks)

5. Outline the 10 steps of managing the child above. (10 marks)

TEST PAPER 3

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. The term Immunization refers to:

- A. Injection with toxin
- B. The process of protecting a person from a specific disease
- C. The process of immunity developing into infection
- D. The process in which immunity occurs when a vaccine is given against a disease
- E. The process in which the vaccine acts in place of a natural antibody

2. Concerning febrile convulsions:

- A. It always follows some focus of infection
- B. Fever is not necessary to make the diagnosis
- C. It occurs before 6 months and after 6 years
- D. There is always a history of head injury
- E. Are caused by low blood sugar

3. The following symptoms may suggest meningitis:

- A. Sudden change in behavior
- B. Positive Kernig's sign
- C. Neck pain
- D. Headache
- E. Fever

4. The following are causes of cerebral palsy:

- A. Intracranial haemorrhage
- B. Prematurity
- C. Meningitis
- D. Birth asphyxia
- E. Intrauterine growth retardation

5. The following are part of routine care for a neonate after delivery:

- A. Keep warm
- B. Give Vitamin K
- C. Application of tetracycline eye ointment
- D. Giving pentavalent vaccine
- E. Just of breast feeding

6. Mapenzi is a 2 day old neonate who did not cry after prolonged labour:

- A. She may develop cerebral palsy
- B. This is normal
- C. Her mother may have been having cephalopelvic disproportion
- D. Phenobarbitone may be indicated in the management
- E. May be having birth asphyxia

7. Constance born 3 weeks ago has projectile vomiting:

- A. She has a palpable mass at the right upper abdomen likely
- B. This is intussusception
- C. This is pyloric stenosis
- D. It could be duodenal atresia
- E. Dehydration is likely to occur

8. Concerning urinary tract infection:

- A. Vesicourethral reflux is a risk factor
- B. Sexual abuse should be ruled out
- C. Children with pyelonephritis should be admitted
- D. May present with hematuria
- E. May have chills and rigors

9. Sasha, a 6 years old girl presented with passing coco cola/strong tea urine:

- A. May have heart diseases
- B. May complicate with renal failure
- C. May have acute glomerulonephritis
- D. Her blood pressure is likely to be high
- E. This is normal

10. Rickets is associated with:

- A. Temperate climates
- B. Prolonged phenobarbitone administration
- C. Renal disorders
- D. Term babies
- E. Genu valgus

11. A three-year old child with failure to thrive, persistent fevers and chronic cough:

- A. The chest x-ray is indicated to make a diagnosis
- B. The condition is preventable
- C. Mantoux test will be helpful
- D. HIV ELISA is not a primary test
- E. A single drug is enough to treat this condition

12. Concerning jaundice within 24 hours of birth:

- A. Is mostly pathological
- B. May follow rhesus incompatibility
- C. Is mostly physiological
- D. Needs urgent treatment by sun exposure
- E. Breastfeeding is contra indicated

13.Regarding neonatal sepsis:

- A. Common causative organism is E. coli
- B. Time of rupture of membranes is important
- C. Lethargy and feed intolerance are salient features
- D. Hypothermia is a likely finding
- E. Home delivery could be a predisposing factor

14.Indicate True or False regarding neonatal sepsis:

- A. First line treatment includes gentamicin
- B. Convulsions are indications for lumbar puncture
- C. Jaundice may be a feature
- D. The commonest foci is the umbilical stump
- E. Oral antibiotics for 3 days are curable

15. Cerebral palsy:

- A. Lower limbs are more commonly affected than upper limbs
- B. It is commoner in term than preterm babies
- C. Occupational therapy has no role
- D. There is always an identifiable cause
- E. Some patients may lead a normal life later

16. Rickets of prematurity:

- A. Mostly occur in term babies.
- B. Can present as early as 2 months.
- C. Serum phosphate is usually high.
- D. Can be prevented by Vitamin D supplementation.
- E. The cause is non exposure to sunlight.

17. Children with difficult circumstances:

- A. Have psychological trauma
- B. Have been abused physically
- C. May be HIV infection
- D. Need social worker in management
- E. Religion fanaticism is a contributing factor

18. The following is correct matching:

- A. URTI – LTB, Sinusitis
- B. LTB – Barking cough
- C. Asthma- Wheeze
- D. Foreign body – unilateral rhonchi
- E. Diphtheria – stridor

19. Maria, a standard one girl, present to you with tachypnea, cyanosis, labored breathing and stridor:

- A. Croup is a differential diagnosis
- B. Oxygen indicated in management
- C. Antibiotics are indicated
- D. Crying exacerbates this condition
- E. A very rare condition

20. A 13 month boy present with a cough associated with lower chest wall drawing. He is able to feed:

- A. Ceftriaxone is the first line of treatment
- B. Gentamycin is indicated
- C. Treat him as an inpatient
- D. Oxygen is not indicated
- E. This is severe bronchiolitis

21. Risk of mother to child transmission of HIV increase by:-

- A. Low maternal CD4 count
- B. High maternal viral load
- C. Episiotomy
- D. Being first twin
- E. Cesarean section

22. Clinical manifestation of AIDS in children include:

- A. Chronic diarrhea
- B. Malnutrition
- C. Recurrent pneumonia
- D. Persistent fever
- E. Presence of oral thrush after 4 months of age

23. The following is true:

- A. PTB is WHO stage 4
- B. Non Hodgkin's lymphoma is WHO stage 4
- C. Stavudine is a protease inhibitor
- D. Septrin protects against among other thing malaria in HIV positive patients
- E. Esophageal candidiasis can be treated by Nystatin oral drops

24. Meningitis:

- A. In neonate may present with twitching only
- B. All neonates with convulsions should have lumber puncture
- C. Kerning's sign positive in neonates
- D. May be treated with crystalline penicillin and gentamycin outside the neonatal period
- E. May complicate with blindness

25. Concerning acute childhood diarrhoea:

- A. Antibiotics are always indicated in its treatment
- B. Is mostly viral in original
- C. Kaolin solution is recommended in its management
- D. Is most common below the age of one year
- E. Convulsions are common

26. The management of acute diarrhoea with no dehydration include:

- A. 75mls/kg of ORS over 4hrs
- B. 10mls/kg of ORS after each bout of diarrhea
- C. Zinc sulphate in children younger than 6 months
- D. Sustained breast feeding and intake of other fluids
- E. Intravenous fluids for all those with very frequent loose motions even if not severely dehydrated

27. Infants of diabetic mothers have the following associated problems:

- A. Low birth weight
- B. Respiratory distress syndrome
- C. Large for gestational age
- D. Neonatal jaundice
- E. Anaemia

28. The following are relevant investigations performed on a child with meningitis:

- A. Random blood sugar
- B. Full haemogram
- C. Cerebrospinal fluid microscopy
- D. Cryptococcal antigen test
- E. Blood cultures

29. The following are clinical prognostic indicators in perinatal asphyxia:

- A. Low APGAR score
- B. Severity of neurological syndrome
- C. Additional organ complications
- D. Poor socioeconomic status
- E. Birthweight of baby

30. The following are established risk factors for neonatal sepsis:

- A. Low birth weight
- B. Prolonged rupture of membranes

- C. Presence of neural tube defects
- D. Omphalitis
- E. Low socioeconomic status

SECTION B

1. With the airway taken care of, the important thing in the management of a convulsing child is:

- A. Give IV diazepam
- B. Give IV fluids
- C. Determine the cause of the fit
- D. Give phenobarbitone

2. The polio vaccine is given orally in 3 doses. The name of the vaccine is:

- A. Salk vaccine
- B. Sabine vaccine
- C. BCG vaccine
- D. Pentavalent vaccine

3. The polio vaccine preferentially affects the:

- A. Sensory neurons of the spinal cord
- B. Anterior horn cells of spinal cord
- C. Posterior horn cells of spinal cord
- D. The basal ganglia of the brain

4. In kerosene (paraffin) poisoning, the complication to watch for is:

- A. Gastric erosion
- B. Hypoglycemia
- C. Chemical pneumonitis
- D. Coma

5. The earliest sign of malnutrition is:

- A. Skin changes
- B. Hair changes
- C. Underweight

D. Oedema

6. A newborn baby is said to be anaemic if the haemoglobin is:

- A. Is below 16 gms%
- B. Is 17-20 gms%
- C. Is 27gms%
- D. None of the above

7. Jaundice observed soon after birth (less than 24 hours after birth) in a newborn is most likely:

- A. Physiological jaundice
- B. Blood group incompatibility
- C. Neonatal sepsis
- D. Biliary atresia

8. The commonest complication of bronchopneumonia in children is:

- A. Meningitis
- B. Congestive cardiac failure
- C. Pleural effusion
- D. Lung abscess

9. The diagnostic feature of glomerulonephritis is:

- A. RBCs and pus in urine
- B. RBC and RBC casts in urine
- C. Protein in urine
- D. Hyaline casts in urine

10. The drug of choice in the management of round worms is:

- A. Piperazine
- B. Alcopar
- C. Yomesin
- D. None of the above

11. The following are true of rheumatic heart disease:

- A. The mitral valve is mostly affected

- B. Can lead to bacterial endocarditis
- C. The aortic valve is mostly affected
- D. May cause arrhythmias

12. In Typhoid fever:

- A. Vaccine offer long life protection
- B. All strains are fully sensitive to quinolones
- C. Cotrimoxazole has been used for treatment
- D. Chloramphenicol in susceptible strains is given 5-7 days

13. The best combination of drugs to treat neonatal sepsis while waiting for culture and sensitivity results is:

- A. Ceftriaxone and Gentamicin
- B. Flucloxacilin and penicillin
- C. Penicillin and Gentamicin
- D. Ampicillin and cotrimoxazole

14. In the management of acute glomerulonephritis, the following is important:

- A. Low carbohydrate and low protein diet
- B. High carbohydrate diet and low protein diet
- C. Lots of fluid and low salt intake
- D. High protein diet

15. Regarding herpes simplex infection:

- A. Is a common cause of erythema multiforme
- B. In the newborn is often non-fatal
- C. Infection of genitalia always due to type II
- D. Primary infection is rarely followed by latent infection of sensory ganglion cells

16. In mumps:

- A. The incubation period is usually 21 days
- B. Orchitis is typically bilateral
- C. Amylase may be increased despite no evidence of pancreatitis clinically

D. Sublingual swelling is rare

17. Which of the following is true of Koplik's spots?

A. Are diagnostic of measles

B. Located opposite the incisor teeth

C. Only appear when fever is over 39 degrees

D. They appear as red papules on the palmar surface of the hands

18. The commonest fracture that occurs during difficult deliveries is fracture of:

A. Femur

B. Clavicle

C. Radius

D. Humerus

19. The following are components of oral rehydration salts except:

A. Sodium chloride 14g

B. Iron sulphate 1g

C. Glucose 2.5g

D. Potassium chloride 3.5g

20. Complications of chicken pox include the following except:

A. Rheumatic fever

B. Viral pneumonia

C. Acute orchitis

D. Acute glomerulonephritis

SECTION C

1. A 8 year old girl presents with a cough for 3 weeks, weight loss and history of contact with a person with Pulmonary Tuberculosis (PTB).

(a) List 4 risk factors to developing Pulmonary TB (2 Marks)

(b) List 6 differential diagnosis of PTB (3 Marks)

(c) Briefly comment on 5 important investigations in TB (5 Marks)

2.

- a) Define Protein Energy Malnutrition (2 marks)
- b) Classify PEM using the welcome trust classification (4 marks)
- c) List 4 acute complications of Malnutrition (4 marks)

3. Outline clinical features and treatment of a 10 year old child weighing 30 kgs suffering from severe anaemia. (10 marks)

4. (a) Enumerate 5 features that constitute severe pneumonia? (5 marks)

(b) How do you diagnose pneumonia in accordance to the IMCI approach? (5 marks)

5. Kassim, a ten year old boy weighing 30kgs presents in Casualty department with effortless diarrhoea and profuse vomiting twenty four hours after eating githeri at Kongowea market. There is an outbreak of diarrhoea in the area.

On examination he looks severely dehydrated.

- (a) Give your diagnosis. (2 marks)
- (b) How do you manage this case? (4 marks)
- (c) Discuss the preventive measures. (4 marks)

TEST PAPER 4

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Jokate is a three year old child brought by the mother in out patient department with a history of diarrhea and vomiting. She has passed more than ten motions of loose, mucoid and blood stained stools. Her mother has given her a lot of plain water while at home. The following is true about her.

- A. May develop hypernatraemia
- B. May develop hyponatraemia
- C. May develop hypokalaemia
- D. *Guardia lamblia* is a likely causative organism
- E. Trophozoites of *Entamoeba histolytica* are likely to be found on stool examination

2. Wema Sepetu is two years old, has had five episodes of admission since birth and usually presents with difficulty in breathing. Respiratory examination reveals a very dyspnoeic child. The following may be true of her condition:

- A. Tuberculosis is a differential diagnosis
- B. She is an infant of diabetic mother
- C. The condition may complicate to pulmonary hypertension
- D. Ventricular septal defect is a likely diagnosis
- E. Definitely she has a misdiagnosed pneumonia

3. About circulatory changes in a newborn:

- A. Umbilical circulation ceases 48 hours after birth
- B. Ductus venosus close shortly before birth
- C. Right atrial pressure increases
- D. Partial pressure of oxygen in the lungs decreases considerably
- E. Foramen ovale remain open for a few days after birth

4. Concerning congenital heart disease(CHD):

- A. Tetralogy of fallot is acyanotic
- B. Patent Ductus Arteriosus associated with machinery murmur
- C. Associated with Down's syndrome
- D. May have no murmurs

E. Echocardiography is diagnostic of specific type

5. Drugs used in congestive heart failure include:

- A. Spironolactone
- B. Quinine
- C. Frusemide
- D. Captopril
- E. Nifedipine

6. Atopic dermatitis:

- A. Usually bilateral
- B. May be unilateral
- C. Associated with itchiness
- D. Cetirizine may be indicated
- E. Mometasone cream/ointment has a role in its management

7. Ishaan is a 3 year old by who has history of recurrent cough associated with wheezing:

- A. Adrenaline is better than salbutamol nebulization
- B. History of infantile eczema is supportive
- C. Introduction of cow's milk early is a predisposing factor
- D. Prednisolone is indicated
- E. Antibiotics have a role in its management

8. Risk factors for asthma include:

- A. Smoke
- B. Cockroach
- C. Pollen grains
- D. B2 agonist
- E. Animal danders

9. Risk factors for developing infective endocarditis include:

- A. Rheumatic heart disease
- B. Intravenous drug administration
- C. Dental procedure
- D. Congenital heart disease

E. Good oral hygiene

10. Risk factors for developing TB disease include :

- A. Malnutrition
- B. Measles
- C. Anemia
- D. HIV
- E. Overcrowding

11. Coma:

- A. Blantyre coma scale used to those above 6 years
- B. Random blood sugar levels are necessary
- C. HIV testing is necessary
- D. Immediate cause of death usually heart failure
- E. Dehydration could be the cause

12. Vitamin deficiency:

- A. Vitamin A – Keratomalacia
- B. Niacin – Dermatitis
- C. Vitamin E – Neurological deficits
- D. Vitamin K – Haemorrhagic disease of the new born#
- E. Vitamin B12 - Anaemia

13. In growth monitoring:

- A. Faller growth shows there is malnutrition already
- B. MUAC usually taken on the right arm
- C. Expected weight of 3 years old is 14kgs
- D. Head circumference at birth is 35cm
- E. Child doubles weight by nine months

14. Rehema is a 5 years old girl with generalized body swelling. She cannot lie flat due to dyspnoea:

- A. Digoxin is indicated
- B. Non tender hepatomegaly likely
- C. Captopril has no role
- D. Likely to be an acquired problem

E. Her bed should be propped up

16. A mother has a child with hydrocephalus:

- A. There could be overproduction of CSF
- B. Treatment could include Acetazolamide
- C. Surgery has a role in its management
- D. Could have sunset eyes
- E. It could be an acquired problem

17. Organophosphate poisoning:

- A. Is accidental in children below 5 years old
- B. Oversalivation is a feature
- C. Child may be restless and irritable
- D. Pralidoxime usually useful in the first 24 hours
- E. Anti-cholinergics are indicated

18. In foreign body inhalation:

- A. Most often in children below 4 years
- B. Sudden onset wheezing
- C. Usually produces intermittent symptoms
- D. May cause hyperinflation of involved lung
- E. May cause atelectasis of involved lung

19. Oxygen therapy indications include:

- A. Pneumonia
- B. Heart failure
- C. Bronchiolitis
- D. Some dehydration in gastroenteritis
- E. Asthma

20. Massive splenomegaly may follow:

- A. Sickle cell anaemia
- B. Chronic myeloid leukemia
- C. Gaucher's disease
- D. Chronic malaria
- E. Hodgkin's lymphoma

21. The following matching is correct:

- A. Hodgkin's lymphoma – ABUD regimen
- B. Non Hodgkins Lymphomas – Chop regimen
- C. Burkitt's lymphoma – starry sky appearances
- D. Burkitts lymphoma – Malaria endemic areas
- E. Hodgkin's lymphoma - widely disseminated at diagnosis

22. Kagame has reduced skin turgor, finger clubbing, capillary refill is less than 2 second can drink and has presented with diarrhea and vomiting:

- A. This is severe dehydration
- B. Should use plan B to treat her
- C. Likely to have sunken eyes
- D. Peripheral pulse likely to be palpable
- E. She has no dehydration

23. A four-year child presenting with recurrent wheezing:

- A. Steroids are contra indicated
- B. He could have a positive family history of the condition
- C. Bronchiolitis is the most likely cause
- D. He should be screened for HIV
- E. Bronchodilators are indicated in his management

24. The following are causes of neonatal seizures:

- A. Birth trauma
- B. Hypoglycemia
- C. Prematurity
- D. Infections
- E. Congenital heart diseases

25. In urinary tract infections:

- A. Urinalysis is the test of choice
- B. Posterior urethra valves are predisposing
- C. Entamoeba histolytica is the commonest cause in infants
- D. Occurs frequently in kwashiorkor
- E. Does not occur in neonates.

26. The following are true of poisoning:

- A. Boys are poisoned more frequently than girls
- B. Illiteracy increases the incidence of poisoning
- C. Organophosphate causes pinpoint pupils
- D. Gastric lavage is beneficial in paraffin poisoning
- E. Some mushrooms may cause poisoning

27. Diabetes mellitus:

- A. Type I insulin administration is mandatory
- B. DKA is more common in Type II
- C. Type I can be controlled by diet
- D. Type II is the commonest in children
- E. Hyperglycemia is more life threatening than hypoglycemia

28. Bronchiolitis:

- A. Commonest cause is *Streptococci pneumonia*
- B. It is a very common occurrence in neonates
- C. Steam inhalation is mandatory
- D. Steroids can be used for treatment
- E. 0.9% saline (normal saline) works in its treatment

29. The following vaccines can be given to symptomatic HIV +ve babies:

- A. Pentavalent
- B. Measles
- C. Yellow fever
- D. Hepatitis B
- E. Tetanus Toxoid

30. Post-term babies are likely to be have:

- A. Absence of lanugo hair
- B. Long nails
- C. Heavy vernix caseosa
- D. Long lanugo hair
- E. Peeling skin of the palms

SECTION B

1. The following affects the let down reflex during breastfeeding except:

- A. Anxiety
- B. Maternal illness
- C. Retracted nipples
- D. Long breastfeeding intervals

2. Clinical features of hypokalemia include the following, except:

- A. Low pulse rate
- B. Seizures
- C. Paralysis
- D. Blindness

3. The following statements are true of respiratory distress syndrome, EXCEPT?

- A. Occurs in 30% of premature babies of 34 weeks gestation
- B. Occurs more frequently in infants of diabetic mothers
- C. The lungs have low compliance
- D. Is more common in infants of mothers addicted to narcotics

4. All the following are advantages of breast milk, EXCEPT:

- A. Reduces incidences of allergy
- B. Reduces incidences of otitis media
- C. Reduces incidences of colic
- D. Has adequate amount of vitamin K

5. Complications of acute otitis media include the following EXCEPT:

- A. Chronic diarrhoea
- B. Deafness
- C. Blindness
- D. Meningitis

6. Hemophilia A:

- A. Is inherited as a sex-linked disorder
- B. Manifests in male only
- C. Females are carriers only
- D. Usually manifests in females

7. The following associations are correct except:

- A. Bronchopneumonia and bronchial breathing
- B. Chronic bronchial asthma and barrel shaped chest
- C. Sickle cell disease and chronic malaria
- D. Ventricular septal defect and eisenmenger syndrome

8. In rhesus incompatibility, the following are true except:

- A. The first baby is usually not affected
- B. Severity reduces with each immunised pregnancy
- C. Is less common than ABO incompatibility
- D. Coombs test may be positive

9. The following are true of acute bronchiolitis except:

- A. Is most commonly caused by pneumococcus
- B. Fever is usually absent in uncomplicated cases
- C. There is usually a family history of recent coryzoa
- D. May result in palpable liver

10. Which of the following is the drug of choice for the initial treatment of juvenile rheumatoid arthritis?

- A. Prednisolone
- B. Chloroquine
- C. Acetyl salicylic acid
- D. Paracetamol

11. The commonest cause of recurrent cough in childhood is:

- A. Ciliary dyskinesia
- B. Tuberculosis
- C. Asthma
- D. Allergic rhinitis

12. Clinical presentation of mitral stenosis:

- A. Mild diastolic murmur
- B. Mild systolic murmur
- C. Blood stained sputum not a feature
- D. Tachypnea

13. The following are causes of neonatal mortality, except:

- A. Term babies
- B. Very low birth weight
- C. Severe neonatal asphyxia
- D. Severe congenital anomalies not compatible with life

14. Hemorrhagic disease of the newborn:

- A. Premature babies rarely suffers from this condition
- B. Newborns are deficient in vitamin K
- C. Bleeding is due to reduced platelets
- D. First symptom is seen after one week of life

15. Which statement is true?

- A. APGAR score of 8-10 in the first minute of life calls for resuscitation
- B. APGAR score should be done at at 5 and 10th minute of life
- C. Birth asphyxia can be predicted when the baby scores poorly
- D. Infant with an APGAR score of 3 in one minute should not be resuscitated since he/she is already dead

16. True concerning head circumference:

- A. Increases in meningitis
- B. At 1 year the head circumference is 39cm
- C. At birth the head circumference is between 33-37cm
- D. The head circumference increases by 4cm per month in the first 3 months

17. Danger signs as described in IMCI include:

- A. Wheezing
- B. Cough for more than 2 weeks
- C. Patient with history of convulsion

D. Inability to eat or drink

18. The following vaccine is usually given at birth:

- A. Pentavalent
- B. BCG
- C. Pneumococcal
- D. Rota virus

19. The following are the main symptoms as described in IMCI except:

- A. Ear problem
- B. Abdominal pains
- C. Cough or difficult breathing
- D. Diarrhoea

20. In malnutrition, hypoglycemia is defined as:

- A. Glucose levels $<3\text{mmol/l}$
- B. Glucose levels $<2.5\text{mmol/l}$
- C. Glucose levels $<2.1\text{ mmol/l}$
- D. Glucose levels $<4.8\text{mmol/l}$

SECTION C

1 . A 12 month-old child born to an HIV-positive mother needs to be started on ARVs. Outline what you would do until the child is on ARVs.

(10 marks)

2. A five year old boy presents to you with cervical lymphadenopathy

- a) What are your differential diagnoses? (3 marks)
- b) Which investigations would you do? (7 marks)

3. Discuss IMCI classification of dehydration and the treatment options. (10 Marks)

4. Abdul is a 4 year old boy who has two other siblings. He has a body swelling and is wasted. His hair is sparse and feels silky.

a) What is the likely diagnosis? (2 marks)

b) List 4 other likely clinical features (2 marks)

c) Outline the management of 4 things likely to kill him on the day of admission (6marks)

5. Name 10 priority signs in emergency, triage, assessment and treatment in paediatrics (10 marks)

TEST PAPER 5

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Concerning normal jaundice the following is true:

- A. Physiological if occurring on day 1
- B. Pathological if occurring on day 1
- C. May require exchange transfusion
- D. May be due to injection
- E. May be due to ABO incompatibility

2. Constitutional features of malignancy include:

- A. Weight gain
- B. Pruritus
- C. Fever
- D. Night sweats
- E. Lymphadenopathy

3. Concerning measles:

- A. Neurological complication of measles include excessive sleeping, drowsiness and coma
- B. It is a rare contagious bacterial disease
- C. Child with measles should be given vitamin A
- D. Cause severe malnutrition
- E. Corneal clouding is one of the complications

4. In management of protein energy malnutrition:

- A. Likely to die of hypothermia
- B. Hypoglycemia is sugar levels of less than 3mmol/l
- C. Parental metronidazole indicated
- D. Start feeding with F 100
- E. Stimulation of the child has no role

5. Sickle cell anemia manifestation include:

- A. Dactylitis
- B. Jaundice
- C. Delayed growth and development
- D. Bacterial sepsis

E. Osteomyelitis

6. Concerning malaria:

- A. This condition affects 2-3 million children per year in the world
- B. Six blood slides must be negative to rule it out
- C. PCR cannot diagnose it
- D. Hyperglycemia is a complication
- E. There is no approach vaccine currently

7. In acute renal failure, the following are indications for dialysis:

- A. Severe hyperkalaemia
- B. Pulmonary edema
- C. Intractable metabolic acidosis
- D. Elevated urea
- E. Hypernatraemia

8. Peptic ulcer disease in children:

- A. Usually those above 6 years
- B. Upper GIT bleeding is an indicator of surgery
- C. *H. Pylori* treated using omeprazole
- D. Ranitidine is commonly used for those below 2 years
- E. Endoscopy is not diagnostic

9. Respiratory distress syndrome (RDS)

- A. Does not occur in term babies
- B. Is more likely in asphyxiated infants
- C. Is less likely in babies born through caesarian section
- D. Babies with RDS are inactive
- E. Is due to anaemia

10. The following are features of Down's syndrome:

- A. Mental retardation
- B. Low set ears
- C. Hypertonic muscles and tendons
- D. Single palmar crease
- E. Slanting eyes

11. The following are features of abnormal developmental growth pattern:

- A. No bowel control at 36 months
- B. Good neck support at 3 months
- C. Putting all the objects in the mouth at 18 months
- D. Standing with support at 36 months
- E. Sitting with support at 24 months

13. The advantages of breastfeeding include:

- A. Convenient and readily available
- B. An alternative method of family planning
- C. Provides children older than 6 months with all the nutrients necessary for growth
- D. Provides a mixture of proteins and sugars adapted to the infant's digestive system
- E. Provides antibodies which help protect the child against infection

14. IMCI:

- A. Means infant mortality caused by infections
- B. Emphasizes pneumonia, diarrhoea, malaria, measles, malnutrition and AIDS
- C. This strategy is in the expansion phase in Kenya
- D. Aims at reducing mortality and morbidity of under fives
- E. The family and community component is irrelevant in Kenya

15. In severe dehydration:

- A. Lethargy and unconsciousness are usually present
- B. The patient drinks eagerly and is thirsty
- C. Intravenous Ringer's lactate should be started immediately
- D. It may follow diarrhea and vomiting
- E. Does not usually necessitate hospitalisation

16. In sickle cell disease:

- A. Is inherited in a sex dominant mode
- B. Patients are more predisposed to pneumococcal infections
- C. Valine substitutes glycine in the sixth position

- D. Splenomegally is elicited at 10 years of age
- E. Salmonella osteomyelitis is a known complication

17. A one year old patient presented with a generalised seizure. This was third episode in the year:

- A. This is severe neonatal seizures
- B. IM diazepam should be given immediately to stop the seizure
- C. Maintenance phenobarbitone is essential
- D. EEG is not necessary as the diagnosis is obvious
- E. Heavy doses of phenobarbitone can cause respiratory depression

18. The following investigations are the most relevant for establishing the probable cause of jaundice in neonates:

- A. Blood for full haemogram
- B. Serum bilirubin levels
- C. Urea, electrolytes and creatinine levels
- D. Urinalysis
- E. Coomb's test

19. A 2 weeks old baby suspected to be suffering from neonatal sepsis and prolonged mild jaundice may not benefit from the following measures?

- A. Immediate hospital admission
- B. Blood specimen for a full blood count
- C. Injections for crystalline penicillin
- D. Phototherapy
- E. Exchange blood transfusion

20. Which of the following vaccine should be given to a one and half year old child who according to birth history was born at home, with the assistance of a traditional birth attendant and has never been taken to the child welfare clinic?

- A. Measles
- B. Oral polio birth dose
- C. Hepatitis B
- D. BCG

E. PCV 21.

21. A 9 month old baby whose family stays on the 8th floor of a flat in Nairobi is noticed to develop general weakness, failure to gain weight, delayed milestones, bowing of legs and suffers from frequent bronchopneumonia. This child could be suffering from other underlying disease such as:

- A. Malnutrition
- B. Congenital heart disease
- C. Pulmonary tuberculosis
- D. Rickets
- E. Measles

22. The main reason why infants are liable to suffer from some to severe dehydration when they are having diarrhoea and vomiting are:

- A. They frequently refuse to eat
- B. Children may not ask for water when thirsty
- C. A bigger proportion of a child's body consists of water
- D. Drugs given such as broad spectrum antibiotics are often ineffective
- E. Oral rehydration salts (ORS) is not readily available

23. A 3 year old child is reported by the caretaker to have developed complaints of general weakness, loss of appetite and one bout of bloody loose stools for 1 days. He does not vomit since the illness started.

- A. The child may be suffering dysentery
- B. The child could be having acute gastroenteritis
- C. The most likely cause of the condition is *Salmonella typhimurium*
- D. Urine specimen for culture and sensitivity testing may confirm the diagnosis
- E. Stool for microscopy is a relevant investigation

24. Select the drugs with anti-malarial activity which can be used in children:

- A. Metronidazole

- B. Tetracycline
- C. Artemether
- D. Amodiaquine
- E. Penicillin G

25. A school girl staying with her family in Nairobi wakes up at 5.00 am in the morning daily to prepare for school. The girl complains of general weakness, short bouts of cough and wheezing for the past 5 days since the beginning of July. Which statements may be true of this girl?

- A. The girl is suffering from congestive heart failure
- B. Giving salbutamol tablets may relieve the wheezing
- C. The child requires oxygen therapy
- D. Nebulization using a bronchodilator as an emergency measure is not beneficial to the child
- E. The condition only requires Crystalline Penicillin injection 6 hourly

26. A male child aged 2 years is brought to the under 5 clinic when you are the clinician on duty with complaints of difficulty in breathing, fever, convulsions on and off for the last 6 hours. Which of the measures given below will you take to save the life of this child?

- A. Send the child to a paediatrician immediately
- B. Send the child to the laboratory for immediate tests before initiating any treatment
- C. Take a short history and reassure the mother
- D. Put on oxygen by mask and give an injection of diazepam
- E. Immediately cover the child with a blanket

27. Regarding evaluation of a neonate:

- A. APGAR scores between 8 and 10 indicate the neonate is transitioning smooth to extra uterine life
- B. Vitamin K is given in the first few hours
- C. Cyanosis 1 minute after birth is normal
- D. Normal respiratory rate is 30-40 beats per minute
- E. Scaphoid abdomen may indicate diaphragmatic hernia

28. In neonatal jaundice:

- A. Breastfeeding jaundice develops in all breastfed infants
- B. Breastfeeding increases enterohepatic circulation of bilirubin
- C. Physiologic jaundice resolves within 1 week
- D. Frequent formula feeding increases severity of hyperbilirubinemia
- E. Kernicterus is a complication

29. Conditions increasing bilirubin production are:

- A. Gilbert syndrome
- B. Crigler-Najjar syndrome
- C. Hematomas
- D. Polycythemia
- E. Haemolytic anaemia

30. Perinatal tuberculosis:

- A. Transplacental spread is a mode of transmission
- B. May present with failure to thrive
- C. Skin testing is the investigation of choice
- D. In non-infective mothers receiving therapy, breastfeeding is contraindicated
- E. BCG vaccine is contraindicated in immunosuppressed patients

SECTION B

1. Cause of infectious diarrhea includes:

- A. Cow's milk
- B. Lactose intolerance
- C. Rota virus
- D. Ulcerative colitis

2. Hypoglycemia in a child with malnutrition can be managed by:

- A. 10% dextrose administered intravenously as a drip
- B. 50% dextrose administered at a dose of 5ml/kg
- C. Administering 8 feeds in 24 hours
- D. Immediate NGT feeding for conscious children with RBS of <3mmol/l

3. Deficit in weight for height in a 3 year old child indicates?

- A. Acute malnutrition
- B. Chronic malnutrition
- C. Concomittant acute and chronic malnutrition
- D. Under weight

4. All of the following is involved in the pathogenesis of asthma, EXCEPT:

- A. Hyperinflation
- B. Bronchospasm
- C. Excess mucous secretion
- D. Edema of the submucosa

5. Which is the most common valvular abnormality associated with rheumatic fever?

- A. Mitral stenosis
- B. Mitral insufficiency
- C. Tricuspid insufficiency
- D. Aortic insufficiency

6. Which of the following is the most common cause of meningitis in infants and children?

- A. Meningococcus
- B. Enteroviruses
- C. Tuberculosis
- D. Haemophilus influenza

7. How much is the head circumference of a mature well developed 6 month infant?

- A. 46 cm
- B. 43cm
- C. 50cm
- D. 30cm

8. Persistent moro reflex after 16 weeeeks indicates:

- A. Normal infant

- B. Hungry infant
- C. Brain damage
- D. None of the above

9. At birth, normal heart rate is:

- A. 60-80bpm
- B. 80-110bpm
- C. 70-120bpm
- D. 110-150bpm

10. All of the following are expected in infants of diabetic mothers EXCEPT:

- A. Respiratory distress syndrome
- B. Hypocalcemia
- C. Hyperglycemia
- D. Large baby

11. Physiological jaundice usually appears on day..... and regresses on day

- A. First day and third day
- B. Fifth day and ninth day
- C. Third day and seventh day
- D. Seventh day and eleventh day

12. All of the following are seen during hypothermia EXCEPT:

- A. Excessive shivering
- B. Pallor
- C. Bradycardia
- D. Metabolic acidosis

13. Bleeding due to thrombocytopenia occurs if the platelet count is less than:

- A. 50,000 /ul
- B. 80,000 /ul
- C. 150,000 /ul
- D. 100,000 /ul

14. During which childhood age is the onset of acute lymphoblastic leukemia most frequent:

- A. Adolescence
- B. 3-5 years
- C. 10-12 years
- D. 6 months

15. Which of the following statements is false about anemias?

- A. Severe anemia causes dyspnea and tachycardia
- B. Cyanosis develops in severe anemia
- C. A cardiac murmur may become audible in anemia
- D. Reticulocytosis ensues a haemolytic origin of anemia

16. Which of the following disorders may be associated with thrombocytopenic purpura?

- A. Hypersplenism
- B. Meningitis
- C. Thrombosthenia
- D. Henoch-scholein purpura

17. All the following diseases are associated with a decreased production of RBCs, EXCEPT:

- A. Leukemia
- B. Hepatitis
- C. Hypothyroidism
- D. Ankylostoma duodenale

18. Which of the following is true about neonatal infections?

- A. Umbilical infection is usually a minor problem
- B. It needs a high index of suspicion for diagnosis
- C. Positive cultures are essential for diagnosis
- D. Respiratory distress is not an expected feature

19. Possible causes of fever of unknown origin include all the following except:

- A. Hypothyroidism

- B. Pyelonephritis
- C. Subacute bacterial endocarditis
- D. Salmonella enteritis

20. What is the protein requirement of a 2 month old infant?

- A. 1g/kg/day
- B. 10g/kg/day
- C. 2.5g/kg/day
- D. 4.5g/kg/day

SECTION C

1. a) Name the types of leukemia (4 marks)
b) Outline the clinical presentation of leukemia (6 marks)

2. Outline the clinical features, investigations and treatment of a 5 year old child who presents with hotness of body and convulsions. (10 Marks)

3. a) Briefly outline the causes of neonatal jaundice (5 Marks)
b) How does kernicterus present? (5 Marks)

4. You are clinical officer in an Outpatient clinic. Suddenly a mother brings her 1 year old daughter weighing 10kgs with complaints of not feeding, hotness of the body and convulsions for a day. On examination the child is pale with a temperature of 39 degrees centigrade.
(a) What is your most likely diagnosis? (2 marks)
(b) Outline your management (8 marks)

5. A 10 year old boy presents to hospital with features of Diabetic Ketoacidosis (DKA).
(a) Briefly outline the steps you undertake in management of this boy (5 Marks)
(b) What are the complications that might arise with DKA? (5 Marks)

TEST PAPER 6

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Cerebral palsy:

- A. Syndrome manifests after age 5 years
- B. Spastic quadriplegia is associated with perinatal asphyxia
- C. Children with spastic hemiplegia have normal intelligence
- D. It is a progressive syndrome
- E. Spastic syndrome is the commonest feature

2. Features of severe pneumonia include: -

- A. Cyanosis
- B. Convulsions
- C. Lower chest wall indrawing
- D. Inability to retain feeds
- E. Wheezing

3. Drugs known to induce an asthmatic attack include: -

- A. Ibuprofen
- B. Budesonide
- C. Propranolol
- D. Salbutamol
- E. Losartan

4. Concerning viral hepatitis: -

- A. Hepatitis A Virus is transmitted by body fluids
- B. Associated with right upper quadrant tenderness
- C. Liver function tests reveal reduced transaminase levels
- D. Mainly presents with fever and yellow eyes
- E. Hepatitis B Virus infection is associated with liver cirrhosis

5. Features of hepatic failure include: -

- A. Steatorrhea
- B. Loss of hair in the armpits and pubic region in males
- C. Bleeding disorders
- D. Gynecomastia
- E. Encephalopathy

6. Features of severe dehydration include: -

- A. Reduced consciousness levels
- B. Eager to take fluids orally
- C. Fluid of choice is ORS
- D. Increased skin turgor
- E. Commonest cause is a bacterial infection in children

7. Causes of post-renal acute renal failure include: -

- A. Severe burns
- B. Gastroenteritis
- C. Posterior urethral valves
- D. Acute glomerulonephritis
- E. Heavy metal poisoning

8. Concerning meningitis:-

- A. Crystalline penicillin and gentamicin are the drugs of choice
- B. CSF in viral meningitis is turbid
- C. Fluconazole is the drug of choice in cryptococcal meningitis
- D. May cause hydrocephalus as a complication
- E. Bulging of the anterior fontanelle is a common finding in a 6 year old.

9. Stage IV HIV features include: -

- A. Pulmonary tuberculosis
- B. Oral candidiasis
- C. Pneumocystis carinii pneumonia
- D. Varicella zoster retinitis
- E. Cytomegalovirus retinitis

10. Important tests before initiating ARV's (Anti-retrovirus) include : -

- A. CT scan of the thorax
- B. Full haemogram
- C. Urea electrolytes and creatinine
- D. Mantoux test
- E. Liver function tests

11. Features of Tetralogy of Fallot include: -

- A. Overriding pulmonary artery
- B. Aortic stenosis
- C. Hypertrophy of the left ventricle
- D. Eisenmenger's syndrome
- E. Ventricular septal defects

12. Features of nephrotic syndrome include: -

- A. Hyperlipidaemia
- B. Hypercoagulability
- C. Massive haematuria
- D. Hypertension
- E. Proteinuria of 4g in 24 hours

13. Neonatal sepsis:-

- A. Is associated with hospital deliveries
- B. May present with hypothermia
- C. Incubators play no role in management
- D. May present with a bulging fontanelle
- E. A full haemogram has no role in its management.

14. Risk factors for perinatal asphyxia include: -

- A. Prematurity
- B. Prolonged labour
- C. Antepartum haemorrhage
- D. Cephalo pelvic disproportion
- E. Hospital deliveries

15. Complications of phototherapy include: -

- A. Heat rash
- B. Loose stools
- C. Dehydration
- D. Conjunctivitis
- E. Jaundice

16. Baby Jaydeen born 3 weeks ago presents with 2 day history of projectile vomiting after feeds. On examination, he is wasted with some dehydration. Which of the following are true?

- A. Visible peristalsis is likely to occur
- B. A palpable non-tender mass may be present over the right hypochondrium
- C. Fluid of choice is 50% dextrose
- D. May have a history of recurrent upper respiratory tract infections
- E. A nasogastric tube should be passed immediately.

17. Causes of obstructive jaundice include: -

- A. Billiary atresia
- B. Gall stones
- C. Cholangitis
- D. Ascaris lumbricoides
- E. Gastro-esophageal, reflux disease (GERD)

18. Concerning pulmonary TB:

- A. May be predisposed by malnutrition
- B. Ethambutol is not indicated in children over 3 years
- C. Rifampicin may cause reddish discoloration of tears and urine
- D. Is a sign of stage 4 HIV/AIDS according to WHO clinical staging
- E. Cough for more than 2 weeks is suggestive

19. Clinical manifestations of AIDS in children include:

- A. Persistent diarrhea
- B. Recurrent pneumonia
- C. Persistent fever
- D. Failure to thrive
- E. Presence of oral thrush before 4 months of age

20. Cardinal signs of congestive cardiac failure include:

- A. Splenomegaly
- B. Non-tender hepatomegaly
- C. Tachypnoea
- D. Cardiomegaly

E. Orthopnoea

21. Risk of mother to child transmission is increased by:

- A. Milking of the cord
- B. Low maternal CD4 count
- C. Caesarean section
- D. Episiotomy
- E. High maternal viral load

22. Constitutional signs of lymphoma include:

- A. Night sweats
- B. Fever
- C. Unexplained weight loss
- D. Pruritus
- E. Pallor

23. Features likely to occur in marasmus than in kwashiakor include:

- A. Extremely low weight
- B. Old man's face
- C. Irritability and eager to feed
- D. Pot belly
- E. Apathy

24. Meningitis:

- A. May lead to cerebral palsy
- B. CSF protein of 0.2g/dl and glucose of 60mmol/L indicate tuberculous meningitis
- C. Otitis media may be a risk factor
- D. IV crystalline penicillin and gentamycin are indicated
- E. Bulging fontanelle is a clinical sign

25. HIV-defining illnesses include:

- A. Kaposi's sarcoma
- B. CMV retinitis
- C. Oral candidiasis

- D. Pneumocystis jirovecii pneumonia
- E. Toxoplasmosis

26. Features of liver failure include:

- A. Hypercoagulability
- B. Gynaecomastia
- C. Steatorrhoea
- D. Gonadal atrophy
- E. Change of hair distribution

27. Concerning hepatitis:

- A. Usually presents with left upper quadrant pain
- B. May be associated with pruritus
- C. Hepatitis A virus is transmitted via the feco oral route
- D. Hepatitis C infection may cause hepatocellular carcinoma
- E. Lamivudine may be used in the treatment of acute Hepatitis B infection

28. Auscultatory landmarks in cardiovascular exam are:

- A. Sternal angel
- B. 5th intercostals space to the right
- C. 2nd intercostal space mid-clavicular line
- D. 5th intercostal parasternal space
- E. 2nd intercostal parasternal space to the left of the aortic area

29. Causes of haematuria include:

- A. Anti-TB medications
- B. Trauma
- C. Urinary Tract Infections
- D. Nephrotic syndrome
- E. Acute glomerulonephritis

30. Principles of management of diarrhoeal diseases in children include:

- A. Antibiotics
- B. Potassium supplementation

- C. Restrain feeding if patient is vomiting
- D. Rehydration
- E. Zinc supplementation

SECTION B

1. Management of a child with severe asthmatic attack:

- A. IV adrenaline Stat
- B. Nebulization with salbutamol
- C. Oral antibiotics
- D. IV gentamycin

2. Complications of severe malaria:

- A. Hypoglycemia
- B. Fever
- C. Diarrhea
- D. Dysentery

3. Common causes of diarrhea in children:

- A. Rota virus
- B. Shigella
- C. Salmonella
- D. Cholera

4. Presentation of pneumonia:

- A. Fast breathing
- B. Diarrhea
- C. Fever
- D. Vomiting

5. A preterm newborn with severe respiratory distress:

- A. Malaria should be ruled out
- B. Oxygen should never be administered
- C. This could be respiratory distress syndrome
- D. Ear infection is a cause

6. Management of pneumonia in a child weighing 10kg:

- A. Amoxil 400mg 12hourly
- B. Septrin 48mg bid
- C. Cotrimoxazole 480mg 12hourly
- D. Augmentin

7. Common cause of neonatal sepsis:

- A. E.coli
- B. Candida albicans
- C. Staphylococcal
- D. HIV

8: Examination of newborn:

- A. Should be done only in labour ward
- B. May reveal congenital abnormality
- C. Not relevant 2hours after delivery
- D. Should be done away from the mother

9. An infant with blood stained diarrhea:

- A. This may be intussusception
- B. It is cholera
- C. Start IV antibiotics
- D. Laparotomy should be done immediately

10. Stabilization of a pre-term baby involves:

- A. Exposure to the surrounding
- B. Iv morphine
- C. Giving oxygen if severe lower chestwallindrawing
- D. IV diazepam

11. The following is a presentation of complicated malaria:

- A. Multiple seizures in a 24 hour period
- B. Fever
- C. Diarrhea
- D. Tachycardia

12. Clinical presentation of severe pneumonia:

- A. Cough, with severe lower chestwall indrawing
- B. Fever, with cough
- C. Crepitations, with drowsiness
- D. Convulsions with rhonchi

13. The following is one of the causes of death in severe malnutrition:

- A. Anaemia
- B. Hypoglycemia
- C. Oliguria
- D. Anorexia

14. Pre-referral treatment for complicated malaria:

- A. 15mg/kg in 10mls/kg of iv quinine
- B. 20mg/kg of im quinine stat
- C. 20mg/kg in 15mls/kg of ringers lactate
- D. 15mls/kg in 15mls/kg of 5% dextrose

15. Early onset neonatal sepsis:

- A. Managed with IV benzylpenicillin plus ceftriaxone
- B. Caused commonly by staphylococcus aureus
- C. Managed with benzylpenicillin, plus iv gentamycin
- D. Always managed at home

16. 6months old child presenting with diarrhea, blood stained. Diarrhoea has been present for 15days. On examination no dehydration:

- A. Dysentery, with no dehydration
- B. Mild dysentery
- C. Dysentery, persistent diarrhea, no dehydration
- D. Dysentery, severe diarrhea, rota infection

17. Common Presentation of TEF/EA

- A. Bubbling, frothing in the nose, mouth
- B. Fever
- C. Distension of abdomen

D. Vomiting

18. One of the ten steps in management of malnutrition:

- A. Input/output monitoring chart
- B. Management of fever
- C. Management and prevention of hypoglycemia
- D. Investigation for bacterial infection

19. Cause of chronic liver disease:

- A. Anemia
- B. Hepatitis B
- C. Malaria
- D. Intestinal worms

20. Common cause of fever in the tropics:

- A. Malaria
- B. Urinary tract infection
- C. Abscess
- D. Diarrhoea

SECTION C

1.

- a) What are the characteristic features of acute glomerulonephritis?
(2 Marks)
- b) Outline the management of an 8 year old child with acute glomerulonephritis
(8 Marks)

2. Suhaila aged 1 year 6 months old presents to you with a history of dry cough, fever, injected conjunctiva and a maculopapular rash starting from the hair line down to the trunk. On examination the child is in respiratory distress.

- a) What is the mostlikely diagnosis? (2 Marks)
- b) Outline the management of this child (6 Marks)
- c) Enumerate four (4) early complications in the above child
(2Marks)

3. Baby Esma, 5 days old born at home presents to you with history of fever and inability to feed. She is sick looking; febrile, has skin rashes and neck stiffness.

- a) What is the most probable diagnosis? (1 Mark)
- b) Outline six factors predisposing to this condition (3 Marks)
- c) Outline your management (6 Marks)

4. Regarding phototherapy:

- a) State the indications of phototherapy (5 Marks)
- b) Mention early and late complications of phototherapy (5 Marks)

5. Using a table, illustrate the KEPI schedule (10 marks)

TEST PAPER 7

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Which of the following features below is/are suggestive of neonatal sepsis?

- A. No spontaneous movement
- B. Good ability to feed
- C. Convulsions
- D. Apnea
- E. Abnormal movements

2. Signs of severe illness in a neonate are:

- A. Localized severe infection
- B. Prolonged rupture of membranes
- C. Weight loss
- D. Jaundice
- E. Capillary refill more than 3seconds

3. During neonatal resuscitation:

- A. Meconium aspiration has nothing to do with the baby not breathing at all
- B. If the baby has meconium aspiration dry and stimulate fast then do suction
- C. Breathing of a newborn should be started within 60seconds
- D. If anything is visible in the airway use suction to clear
- E. The baby head should be put in neutral position

4. 6months old child with fever, and breathing rate of 57breaths/min:

- A. This is malaria
- B. Classified as pneumonia
- C. Blood slide is important investigation tool
- D. Child can be started on amoxicillin at dose of 40mg/kg bwt 12hourly
- E. Refer the patient to the ward for inpatient management

5. Differential diagnosis of cough plus difficult in breathing:

- A. Pneumonia

- B. Severe anemia
- C. Malaria
- D. Febrile convulsions
- E. Asthma

6. A newborn baby with cyanosis, and severe lower chest wall indrawing:

- A. It may be congenital heart diseases
- B. Start the young infant with oxygen administration
- C. Chest x ray is not important
- D. IV fluids should be given rapidly
- E. Acidosis could complicate to this condition

7. A 2 years old child in status asthmaticus:

- A. Administer adrenaline IV
- B. Start child on iv antibiotics immediately
- C. Give oxygen, nebulise with salbutamol
- D. IV diazepam given in addition to adrenaline
- E. Respiratory failure common complication

8. In severe pneumonia:

- A. Grunting is common
- B. IV benzylpenicillin alone is drug of choice
- C. IV flucloxacillin can be second line treatment
- D. Chest radiology has no role in the management
- E. Oxygen therapy is a MUST

9. Neonatal asphyxia may complicate to:

- A. Respiratory distress
- B. Convulsions
- C. Cerebral palsy
- D. Hyperglycemia
- E. Diabetes mellitus

10. Concerning congenital syphilis:

- A. Infant may appear normal for the first few weeks of life

- B. It is not preventable
- C. Child will present with syphilitic rhinitis
- D. Child will have lymphadenopathy
- E. Laboratory investigations will yield no results

11. A 3day old infant refusing to breastfeed with temperatures of 35.5 degrees celcius:

- A. This is hypoglycemia
- B. GBS organisms likely etiological cause
- C. Sclerema may be present
- D. Rupture of membranes more than 12hours before delivery is a risk factor
- E. Administer vitamin K and ive oral ampiclox to take at home

12. In the prevention of diarrheal diseases:

- A. Proper sanitation must be ensured
- B. Good hygiene must be observed only when preparing food
- C. Proper disposal of feces is a must
- D. Clean utensils must be used to store the food
- E. Good hygiene must be observed only when preparing the food

13. A 2weeks old infant with jaundice involving palms and soles:

- A. This is persistent jaundice
- B. May be caused by biliary atreasia
- C. May be caused by worms
- D. Viral hepatitis possible cause
- E. Liver scan may establish the cause

14. Features of bilirubin encephalopathy:

- A. Refusal to feed
- B. Convulsions
- C. Irritability
- D. Diarrhea
- E. Hypotonia

15. Complications of exchange blood transfusion:

- A. Circulatory overload
- B. Transmission of bloodborne diseases
- C. Air embolism
- D. Diarrhea
- E. Convulsions

16. The following are normal features in a newborn:

- A. Chest circumference greater than head circumference
- B. Head circumference of 42 – 43 cm
- C. Caput succedaneum
- D. Haemorrhagic conjunctiva
- E. Bilateral cephalohaematoma

17. The following are true about management of neonatal hyperbilirubinaemia:

- A. Phenobarbitone may be used
- B. Anti-D serum should not be to Rhesus –ve mothers if they get an abortion
- C. Adequate caloric intake is important
- D. Phototherapy is mandatory for all cases
- E. Exchange transfusion may be necessary

18. Congenital acyanotic heart diseases include:

- A. Transposition of great vessels
- B. Ventricular Septal defects
- C. Tricuspid Atresia
- D. Patent ductus Arteriosus
- E. Infective Endocarditis

19. Causes of macrocytic anaemia include:

- A. Diphylobothrium latum infection
- B. Intrinsic factor deficiency
- C. Hookworm infections
- D. Alcohol abuse
- E. Drugs e.g. phenytoin

20. Common causes of jaundice include:

- A. Alcohol abuse
- B. Viral hepatitis
- C. Malaria
- D. Cardiac failure
- E. Renal failure

21. Risk factors of diarrhoeal disease include:

- A. Lack of immunization
- B. Poverty
- C. Malnutrition
- D. Lack of education
- E. Poor weaning practices

22. Concerning urinary tract infections:

- A. More common in male than female children
- B. Recurrent infections may indicate posterior urethral valves
- C. U/E/C must be done in all patients with UTIs
- D. Mid-stream urine is more diagnostic
- E. Antibiotics play no role in their management

23. Differential diagnosis for a wheeze include:

- A. Foreign body inhalation
- B. Bronchiolitis
- C. Bronchial asthma
- D. Congestive cardiac failure
- E. Pulmonary tuberculosis

24. Common causes of pyogenic meningitis in a 3-year old child include:

- A. *Streptococcus pneumonia*
- B. *Neisseria meningitidis*
- C. *Escherichia coli*
- D. *Haemophilus influenza*
- E. *Listeria monocytogenes*

25. Cyanotic heart diseases include: -

- A. Tetralogy of fallot
- B. Aortic stenosis
- C. Transposition of great arteries
- D. Atrial septal defects
- E. Truncus arteriosus

26. Concerning patent ductus arteriosus (PDA)

- A. Associated with machinery murmur
- B. Is a cyanotic heart disease
- C. May be reversed by giving indomethacin
- D. Surgery has no role in its management
- E. May be associated with pulmonary oedema.

27. Features of severe malaria include: -

- A. Hypoglycaemia
- B. Arthralgia
- C. Splenomegaly
- D. Pulmonary oedema
- E. Disseminated intravascular coagulation

28. Major criteria in diagnosis of infective endocarditis:-

- A. Positive blood cultures
- B. Microscopic haematuria
- C. Pancarditis
- D. Evidence of endocardial involvement
- E. Janeway lesions

29. Poliomyelitis: -

- A. Mainly transmitted by droplet infection
- B. May present with diarrhea
- C. Caused by a gram positive bacillus
- D. Is a notifiable disease
- E. Associated with acute flaccid paralysis

30. Complications of measles include: -

- A. Vitamin A deficiency
- B. Immunosuppression
- C. Encephalitis
- D. Malnutrition
- E. Lobar pneumonia

SECTION B

1. Of the following, which is not considered a major Jones criteria for for rheumatic fever.

- A. Carditis
- B. Erythema marginatum
- C. Sydenham mhorea
- D. Arthralgia

2. Which of the following can be seen in both bacterial endocarditis and cute rhemaatic fever?

- A. Congestive heart failure
- B. Subcutaneous nodules
- C. Petechiae
- D. Erythema marginatum

3. Teusi is a mother who wishes to breast feed but want to supplement with formula, she should:

- A. Start supplementation at bedtime immediately after delivery
- B. Wait several weeks after delivery to supplement to ensure established breast-feeding hormonal patterns
- C. Try a different formula each day until the baby shows a preference
- D. Pump and then mix the formula and breast milk in a one to one ratio

4. The most common bacterial pathogens for neonatal osteomyelitis are:

- A. H. influenza, Moraxella catarrhalis and Pneumococcus
- B. N. gonnorhea, Bacteroides and Enterobacter
- C. Group B Streptococcus, E. coli, S. Aureus

D. Actinomyces Israelei, Pseudomonas, Peptostreptococcus

5. A nine year old boy presents to your office after a camping trip with his boy scouts group one week ago. He looks fairly toxic with fever of 39.5C, headache, myalgia, nausea, vomiting, and an erythematous macular rash on the wrists, ankles and proximally on the trunk. The best treatment for this illness is:

- A. Ceftriaxone
- B. Gentamycin
- C. Acyclovir
- D. Tetracycline

6. The most common congenital obstructive lesion of the left side of the heart is:

- A. Aortic stenosis
- B. Coarctation of the aorta
- C. Mitral stenosis
- D. Pre-aortic septal hypertrophy

7. A well-child developmental assessment of a 3 year old girl reveals that she is able to dress herself and pedal a tricycle; however, her vocabulary skills consist of “mama”, “dada”. You would classify her development as:

- A. Constitutional developmental delay
- B. Completely normal
- C. Developmental deviancy
- D. Developmental dissociation

8. With respect to the TORCH infections, neonates usually acquire during delivery through the birth canal.

- A. Rubella
- B. Herpes Simplex
- C. Syphilis
- D. Trichonosis

9. The vaccine against Neisseria meningitidis is currently recommended to all of the following populations EXCEPT:

- A. Persons in the military
- B. Children under 2 years old
- C. Patients with asplenia
- D. Children lacking complement factor C6

10. Rates of meningococcal disease are highest among which age group?

- A. Ages: 0-4 years old
- B. Ages: 10-14 years old
- C. Ages: 20-24 years old
- D. Ages: 65-69 years old

11. A 15 year old boy comes to your office for follow up of his reactive airway disease. He describes his symptoms as daily and also experiencing nocturnal symptoms approximately 2x per week. Spirometry performed in your office reveal that his FEV1/ PEFr is 75% of his predicted value. These results classify his severity of asthma as:

- A. Severe persistent
- B. Moderate persistent
- C. Mild persistent
- D. Mild intermittent

12. All of the following are true concerning Otitis media EXCEPT:

- A. Chronic or recurrent ear infections lead to conductive hearing loss.
- B. Bottle feeding can predispose children to ear infections
- C. Treatment of choice is clindamycin
- D. One of the most common causes of bacterial otitis media is S.pneumoniae

13. Down's Syndrome is NOT associated with:

- A. transposition between chromosome 14 and 21
- B. Epicanthal fold and single palmar crease
- C. Increased risk of leukemia and alzheimers disease

D. Radial aplasia

14. Select the incorrect statement concerning congenital syphilis:

- A. Late symptoms of the untreated child include keratitis, blindness, saber shin, and mulberry molars
- B. Placental examination may show mononuclear infiltrate with spirochetes present
- C. The tertiary syphilis stage is more likely to infect a fetus than either the primary or secondary stages
- D. A large percentage of fetuses will die in-utero

15. Select the TRUE statement for HIV positive mothers (positive before and at the birth of child):

- A. 90-100% will infect the child during delivery
- B. Must not take zidovudine (AZT) due to its teratogenicity
- C. Should not breast feed their children
- D. Must insist their HIV positive child be immunized with all vaccines scheduled for a non-HIV positive child

16. The new mother of a 3 week old infant is concerned that her child is having difficulty breathing. She states he is a noisy breather but has remained afebrile and sleeps/feeds well. After a benign history/physical exam, it would be prudent to:

- A. Begin IV antibiotics
- B. Prescribe a decongestant
- C. Reassure mom and send home with saline nasal spray
- D. Begin salbutamol nebulisation PRN

17. A 15 month female infant is brought in for a WCC and is noted to have breast buds. Genitalia is Tanner 1. You should:

- A. Order estrogen/progesterone and gonadotropin levels
- B. Order heat CT
- C. Order head MRI
- D. Reassure mom this is a benign process

18. A newborn female is noted to have edema of the hands and feet. Which of the following should be included in the differential?

- A. Turners syndrome
- B. Neuroblastoma
- C. Sepsis
- D. Developmental dysplasia of the hip

19. What is the most likely diagnosis of a 9 month old child who drinks excessive amounts of only whole cow's milk with blue sclerae and no history of trauma?

- A. Osteogenesis imperfecta
- B. Wilson's disease
- C. Iron deficiency anemia
- D. Tay-Sach's

20. What is the most common congenital heart defect in kids with Fetal Alcohol Syndrome?

- A. Coarctation of the Aorta
- B. ASD
- C. Tetralogy of Fallot
- D. VSD

SECTION C

1.

- a) Define child abuse (2 Marks)
- b) Describe the types of child abuse and the factors that contribute to it. (8 Marks)

2.

- a) Define asphyxia neonatorum (2 Marks)
- b) What are the predisposing factors to asphyxia neonatorum? (4 Marks)
- c) Outline its management (4 Marks)

3.

- a) State the various crises of sickle cell disease (5 Marks)
- b) Discuss the presentation and treatment of one of the crises (5 Marks)

4. Regarding typhoid fever:

- a) Outline the clinical presentations in a 8 year old girl (3 Marks)
- b) Outline the specific management of typhoid fever (4 Marks)
- c) State its preventive measures (3 Marks)

5. Explain why children already immunized against measles may still contact the disease (10 Marks)

TEST PAPER 8

INSTRUCTIONS

This paper consists of SECTION A, SECTION B and SECTION C.

Section A consists of 30 True/False Questions

Section B consists of 20 One answer Multiple Choice Questions

Section C consists of essay questions worth 50 marks.

SECTION A

1. Causes of watery bloody diarrhea in 1 year old child:

- A. Dysentery
- B. Rota virus
- C. Shigella
- D. Cholera
- E. Entamoeba histolytica

2. Supportive management of malaria involves the following except:

- A. Parenteral quinine
- B. Correction of hypoglycemia
- C. Blood transfusion for severe anemia
- D. Antipyretics for fever
- E. Rehydration

3. Soil transmitted worms are associated with:

- A. Acute abdomen
- B. Iron deficiency anemia
- C. Malnutrition
- D. Convulsions
- E. Eosinophilia in blood

4. The following is true concerning leishmaniasis:

- A. May complicate to secondary bacterial infection
- B. Transmitted by leishmania donovani
- C. Massive splenomegally is frequently a finding
- D. Diagnostic test by blood slide for amastigotes
- E. Cause of death commonly is anaemia

5. Complications of sickle cell disease

- A. Bacterial septicaemia
- B. Splenomegally
- C. Multiorgan failure
- D. Anaemia
- E. Jaundice

6. Diagnosis of tuberculosis in children involves the following:

- A. Chest radiology
- B. History of cough more than 2weeks
- C. Weight loss
- D. Fever for 2days
- E. Positive HIV test

7. Uncomplicated urinary tract infection in 10 year old boy:

- A. Escherichia coli commonly cause
- B. May be predisposed by full rectum
- C. May be associated with renal abnormality
- D. U/S must be done to confirm diagnosis
- E. Amoxiclav is effective antibiotic

8. Rashid is a 6months old child weighing 9kg, presents with 2day history of cough and hotness of the body. The care taker tells you that the child is not able to breastfeed. He had a seizure 24hours ago ago because of this present illness. Respiratory rate is 60breaths per min, lower chestwall indrawing is noted. B/S done its positive for malaria parasites. Respond to the following:

- A. The child is classified as severe pneumonia or very severe disease
- B. this is complicated malaria
- C. Classified as pneumonia
- D. Malnutrition and HIV should be assessed first
- E. Check initially for immunization status for missed opportunities .

10. Differential diagnosis of 6months old child presenting with a wheeze:

- A. Asthma
- B. Bronchiolitis
- C. Heart failure
- D. Foreign body at airway
- E. Cyclic fibrosis

11. Evaluation of a child presenting with altered level of consciousness

- A. Urgent blood sugar

- B. CSF examination is indicated
- C. History of convulsion is insignificant
- D. Start IV quinine
- E. History of drug ingestion may be relevant

12. Respond to the following:

- A. Pediatric bacterial meningitis revealed by polymorphs of 100 cells/mm³
- B. Febrile seizures commonly genetic predominance
- C. Viral infections of the respiratory system commonly associated with febrile seizures
- D. Complex febrile seizures are associated with temporal lobe epilepsy
- E. Uncomplicated malaria cannot be a differential diagnosis of febrile seizures

13. Which of the following is not a feature of complicated malaria?

- A. Prostration
- B. Respiratory distress
- C. One single seizure in 24hour period
- D. Respirory distress
- E. Inability to stand in a 1year old child without support.

14. An 8 months old infant presents with one week history of cough and difficulty in breathing, fever for 3 days, temperature 38.5 degrees celcius. He also has severe lower chestwall indrawing and respiratory rate of 57 breaths/min. offered a glass of water he drinks but vomits everything immediately. The best classification for this patient:

- A. Severe pneumonia and malaria
- B. Very severe pneumonia or very severe disease
- C. Severe febrile illness
- D. Severe dehydration, with severe pneumonia
- E. Severe disease

15. The following are true about treatment failure in malaria management:

- A. Its not drug resistance
- B. May be due to poor adherence
- C. Can be recognized within 24 hours
- D. Can occur also with correct diagnosis
- E. Develops after 14 days

16. Vitamin B12 deficiency anaemia:-

- A. Associated with reduced MCV (Mean Copurscular Volume)
- B. Associated with hookworms
- C. Pernicious anaemia is a cause
- D. Common in females of the reproductive age
- E. Schilling test has a role in diagnosis

17. True or false?

- A. In Rickets, there is increased parathyroid activity
- B. Calcium serum levels are normal in rickets
- C. Low serum calcium levels may result in tetani
- D. Lack of Vitamin D causes a fall in blood phosphorus
- E. Fish and egg are sources of Vitamin D

18. The following are complications of measles: -

- A. Otitis media
- B. Orchitis
- C. Encephalitis
- D. Pneumocystic carinii pneumonia
- E. Rheumatoid arthritis

19. True or false?

- A. Rubella is transmitted in nasopharyngeal secretions
- B. Incubation period for rubella is 1 to 2 months
- C. The common node groups palpable in rubella are cervical, post auricular and sub occipital
- D. Important complication in rubella is intestinal obstruction
- E. None of the above

20. The following are opportunistic infections in HIV/AIDS:-

- A. Balanoposthitis
- B. Cryptococcal meningitis
- C. Oropharyngeal esophageal candidiasis
- D. Acute myeloid leukemia
- E. Peritonitis

21. True or False?

- A. Cancrum-oris is a condition associated with protein-energy malnutrition
- B. Deficiency of ascorbic acid causes increased capillary permeability
- C. Lack of Vitamin B1 results in pellagra
- D. Human brain growth is maximal at 22 to 24 weeks gestational age.
- E. Riboflavin is Vitamin B2

22. Neonatal syphilis: -

- A. Should be suspected in any newborn with pneumonia, anaemia, jaundice, hepatomegally.
- B. Treatment should be with intravenous penicillin daily for 5 days.
- C. Late manifestations include bloody nasal discharge
- D. Weeping lesions around the mouth and anus present early
- E. Saddle nose deformity is a feature.

23. True or false?

- A. Diphtheria has 3 strains
- B. The illness in diphtheria is caused by exotoxin
- C. Cutaneous diphtheria is not spread by direct contact
- D. Diphtheria is spread through droplets from nose and throat
- E. Incubation period for diphtheria is 2 to 4 days.

24. The following are true or false concerning Pierre Robin Syndrome:

- A. Micrognathia is a feature
- B. It is associated with glossoptosis
- C. Nursing is done when patient is in prone position
- D. It is self limiting

E. May be associated with cleft palate

25. The following are causes of neonatal jaundice: -

- A. Polycythaemia
- B. Cystic fibrosis
- C. Choledochal cyst
- D. Hypothyroidism
- E. Septicaemia

26. Causes of large head at birth include: -

- A. Hydraencephaly
- B. Megalencephaly
- C. Communicating hydrocephalus
- D. Hypervitaminosis
- E. Contraceptive pills

27. Causes of anaemia in the neonatal period include?

- A. Iron deficiency
- B. Hookworm infestation
- C. Severe malaria
- D. Suppression of erythropoietin secretion
- E. Increased intravascular blood volume in the early months.

28. Coloboma: -

- A. Is a benign tumour of the eye
- B. Is a notch or wedge effect in the iris
- C. May be associated with severe visual impairment
- D. Full thickness coloboma requires radiotherapy
- E. It is a choroid malignant lesion

29. The following is true or false concerning intubation: -

- A. Can lead to laryngeal granuloma
- B. Hoarseness is a feature immediately after intubation
- C. Can be done via the nose or mouth
- D. Indicated for all forms of depression at birth irrespective of the type of circulation

E. Intermittent positive pressure ventilation is possible after intubation

30. True or false?

- A. Thyroxine is necessary for early growth
- B. Growth hormone works best at night during sleep
- C. Sex hormones have no significant role in the pre-pubertal growth spurt
- D. Growth is not slowed during illness
- E. Normal growth before and after birth is dependent only on adequate nutrition

SECTION B

1. Which skin lesion is most likely NOT to spontaneously resolve?

- A. Hemangioma
- B. Lymphangioma
- C. Mongolian spot
- D. Milia

2. In which bacterial infection is treatment with antibiotics recommended?

- A. E.coli 0157 gastrointestinal infection
- B. Yersinia mesenteric adenitis
- C. Diarrhea(Salmonella)
- D. Diarrhea(Shigella)

3. A 15yr old comes to you for a football physical. which finding below in this childs history would preclude him from a contact sport?

- A. sickle cell disease
- B. Asthma
- C. A heart mumur
- D. patient has one kidney

4. A patient comes into your office in severe respiratory distress with a deep barky cough and stridor. you diagnose the child with croup and decide to admit the child. along with securing an airway what are other treatment options?

- A. Salbutamol jet nebulizer
- B. Ice Cream PO
- C. Racemic epinephrine and steroids
- D. No treatment options are available

5. The same patient above the next morning looks bad on rounds. He is spiking a fever of 39.4 and looks more toxic today. you are now quite convinced that this is not viral in origin. what bacteria is MOST likely in this fully immunized child?

- A. *Staphylococcus aureus*
- B. *Streptococcus pneumonia*
- C. *Haemophilus influenza*
- D. *Escherichia coli*

6. A 2 year old comes in for a well baby check-up. She should be able to do all of the following except:

- A. Turn pages one at a time
- B. Use 2-3 word phrases
- C. Follow two step commands
- D. Participate in group play.

7. A child has recently started to transfer objects, babble and use the raking grasp. He should also be able to:

- A. Sit unsupported
- B. Walk with support
- C. Say “mama” and “dada”
- D. Build a tower of two blocks

8. All of the following are true regarding infantile spasms except:

- A. Infantile spasms are mixed flexor-extensor spasms that last only a few seconds but may repeat more than one hundred times in a row
- B. Diagnosis is confirmed by hyposarrhythmia on EEG

- C. Developmental delay can be prevented by the use of corticotropin
- D. Infantile spasms may develop into Lennox- Gestaut syndrome

9. A 1 year old white female had a seizure after having a temperature of 39.5 degrees C. If her seizure was a simple febrile seizure, all of the following statements would be true except:

- A. The seizure would consist of generalized tonic/clonic movements
- B. The seizure would probably not recur within 24 hours
- C. The child would not require further evaluation beyond determining the etiology of the fever
- D. The seizure would last approximately 20 minutes

10. A 15 year old white female presents to clinic complaining of numbness in both legs which started yesterday. She has recently recovered from a URI which she had about 10 days ago. She also complains of mild weakness in her proximal muscles. Her condition:

- A. May require treatment with IVIG and plasmaphoresis
- B. Involves degeneration of the anterior horn cells
- C. Consists of symptoms which wax and wane over time
- D. She should be sent home and advised to rest and drink plenty of fluids.

11. A ten month old recently had a mild URI. Over the next couple of days, he develops a “barky cough” with intermittent stridor which is worse at night. He has a low grade fever. Crying seems to exacerbate the stridor. This history is most consistent with:

- A. Epiglottitis
- B. Aspiration of a foreign body
- C. A “thumb print” sign on lateral xray of the neck.
- D. A “steeple sign” on AP neck film

12. The following are seen in anorexia nervosa except:

- A. Delayed growth velocity
- B. Lanugo hair
- C. Increased T3
- D. Amenorrhea

13. The first sign of puberty in a normal male is usually the:

- A. Increase in size of the testes
- B. Appearance of facial hair
- C. Appearance of axillary hair
- D. Appearance of pubic hair

14. A 3 year old white female presents to your office with 4 day duration of increased fussiness, low grade fever, and intermittent tugging of the ears. Exam reveals bulging erythematous tympanic membranes that lack mobility, loss of landmarks, and low grade fever. What is the most likely etiologic agent?

- A. Streptococcus pneumoniae
- B. Hemophilus influenzae B
- C. Moraxella catarrhalis
- D. Virus

15. Breath holding spells are not associated with:

- A. Children 7 years old
- B. Episodes of anger, frustration, or scolding
- C. Short periods of drowsiness after spell
- D. Rhythmic clonic jerking of the extremities

16. Problems not associated with infants of diabetic mothers include:

- A. Macrosomia
- B. Hypoglycemia
- C. Hyperbilirubinemia
- D. None of the above

17. A 4 year old child presents with fever, vomiting, and shortness of breath on exertion. Physical exam shows muffled heart sounds, fever, a gallop rhythm, and tachycardia. The best diagnosis for this child is:

- A. Pericarditis
- B. Costochondritis
- C. Myocarditis

D. Mitral valve prolapse

18. An 18 year old male is has come to you for a sports physical. During the physical, you notice a II/VI systolic murmur. What is your next step?

- A. Have the child perform a Valsalva maneuver.
- B. Do an EKG reading.
- C. Question the teenager's use of drugs.
- D. Ignore the murmur. It is probably benign.

19. A 12 month old patient presents to you for a well child visit. What developmental is most appropriate.

- A. The patient puts three words together. "I want juice."
- B. The patient uses mama and dada consistently.
- C. The child has a vocabulary of at least 50 words.
- D. The patient has one or two words other than "mama" or "dada".

20. Which of these statements is a correct example of inattention?

- A. Tendency to blurt out answers before questions have been completed.
- B. Fidgeting with hands or feet or squirming in seat.
- C. Avoidance or dislike of tasks that require sustained mental effort.
- D. Tendency to interrupt or intrude on others.

SECTION C

1. Briefly discuss the management of a HIV-exposed infant. (10 Marks)

2. Concerning neonatal jaundice:

- a) List 4 causes of indirect hyperbilirubinemia (2 Marks)
- b) Using a diagram, illustrate the Kramer's zones of neonatal jaundice (4 Marks)
- c) Outline the indications of exchange transfusion (4 Marks)

3. a) In table form, describe the milestones in infancy (5 Marks)

b) outline the treatment of neonatal sepsis in a 3 weeks old neonate weighing 3.5 kg (5 Marks)

4.

- a) List ten adverse effects of cytotoxic drugs (5 Marks)
- b) Describe the procedure of giving blood transfusion (5 Marks)

5. Briefly state the types of convulsive disorders and their preferred drugs of choice (10 Marks)

TEST PAPER 9

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 30 True/False Questions and

Section B consists of essay questions worth 50 marks.

SECTION A

1. Lymphoid tissue growth: -

- A. Shows different growth pattern to other organs
- B. Maximal growth is followed by regression
- C. Progressively growth throughout childhood
- D. Ceases to grow at the age of 10-15 years.
- E. Amount of lymphoid tissue in the body increases after puberty

2. Angiotensin receptor blockers: -

- A. Captopril
- B. Lorsatam
- C. Nifedipine
- D. Enalapril
- E. Labetalol

3. Effects of aldosterone in congestive cardiac failure include: -

- A. Fluid retention
- B. Potassium retention
- C. Excretion of sodium
- D. Vasodilation
- E. Calcium retention

4. Metabolic complications of chronic renal failure include: -

- A. Hypocalcaemia
- B. Hyperkalemia
- C. Pulmonary oedema
- D. Osteoporosis
- E. Peripheral neuropathy

5. Principles involved in DKA (Diabetic Keto-acidosis) management include: -

- A. Intravenous insulin
- B. Rehydration with 10% dextrose
- C. Potassium supplementation
- D. Administration of metformin

E. All of the above

6. Features of life threatening asthma include: -

- A. Cyanosis
- B. Silent chest
- C. Rhonchi
- D. Inability to complete sentences
- E. Oxygen partial pressure of 98%

7. A 4 day old child presents in out patient department with history of not passing stool from birth, vomiting and with severe dehydration. The following is a likely diagnosis:

- A. Acute intussusception
- B. Congenital hypertrophic pyloric stenosis
- C. Duodenal atresia
- D. Hirschsprung's disease
- E. Oesophageal atresia

8. The following are conditions classifying a child in WHO stage 4:

- A. Kaposi's sarcoma
- B. Esophageal candidiasis
- C. Pulmonary tuberculosis
- D. Cryptococcal meningitis
- E. HIV encephalopathy

9. About Tetralogy of Fallot (TOF):

- A. Paroxysmal hypercyanotic attacks are common on exertion
- B. Cyanosis is present at birth
- C. Bacterial Endocarditis may be a complication
- D. Systolic thrills may be felt along the left sternal border
- E. Knee chest position relieves cyanotic spells

10. The management of acute diarrhoea with no dehydration include:

- A. 75mls/kg of ORS over 4hrs
- B. 10mls/kg of ORS after each bout of diarrhea

- C. Zinc sulphate in children younger than 6 months
- D. Sustained breast feeding and intake of other fluids
- E. Intravenous fluids for all those with very frequent loose motions even if not severely dehydrated

11. Infants of diabetic mothers have the following associated problems:

- A. Low birth weight
- B. Respiratory distress syndrome
- C. Large for gestational age
- D. Neonatal jaundice
- E. Anaemia

12. Causes of apnoeic attacks include:

- A. Prematurity
- B. Pneumonia
- C. Hypoxia
- D. Hypoglycemia
- E. Congenital heart disease

13. Causes of airway obstruction can be grouped into the following:

- A. Presence of intraluminal material
- B. Partial or total
- C. Respiratory disease
- D. Mural thickening
- E. Sinusitis

14. Complications of mumps infection include:

- A. Oophoritis
- B. Pancreatitis
- C. Deafness
- D. Encephalitis
- E. Thrombocytopenia

15. Complications of pyogenic meningitis include:

- A. Rheumatic fever

- B. Microcephaly
- C. Subdural effusion
- D. SIADH
- E. Spina bifida

16. The following signs indicate an emotional disorder in childhood:

- A. Thumb-sucking
- B. Nail biting
- C. Convulsions
- D. Head banging
- E. Fecal incontinence

17. Causes of nocturnal enuresis include:

- A. Phimosis
- B. Paraphimosis
- C. Ureteric reflux
- D. Diabetes insipidus
- E. Chronic renal failure

18. Pinpoint pupils, sweating and offensive smell indicates:

- A. Kerosene poisoning
- B. Botulism
- C. Paracetamol overdose
- D. Diazepam overdose
- E. Child abuse

19. Pneumothorax occurs in:

- A. Asthma
- B. Congenital heart disease
- C. Whooping cough
- D. Tuberculous pleural effusion
- E. Pneumonia

20. The following clinical features by themselves are harmless to a newborn:

- A. Cephalohematoma

- B. High pitched cry
- C. Subconjunctival haemorrhage
- D. Mongolian spot
- E. Opsithotonus

21. Signs of sickle cell disease in children include:

- A. Leg ulcers
- B. Splenomegaly
- C. Swelling of fingers
- D. Dental carries
- E. Skull bossing

22. Vaginal discharge in a newborn may be due to:

- A. Gonorrhoea
- B. Cervicitis
- C. Candidiasis
- D. Hormonal influence from the mother
- E. Herpes infection

23. True or False:

- A. All congenital anomalies are diagnosed by ultrasound
- B. Causes of neonatal asphyxia and anoxia include cord prolapse and compression
- C. Physiological jaundice appears about the third day
- D. Cleft lip and palate may occur singly or in combination
- E. Advantages of breast milk include free from contamination

24. Regarding congenital heart diseases (CHD):

- A. Atrial septal defects are the commonest
- B. Wide splitting of S1 is characteristic
- C. Tetralogy of Fallot is the commonest acyanotic CHD
- D. Patent ductus arteriosus should be left alone as it closes spontaneously most times
- E. Hypertension in the lower part of the body and cramps and weakness in the arms may occur in coarctation of aorta

25. The following are complications of measles:

- A. Rheumatic heart disease
- B. Infective endocarditis
- C. Protein energy malnutrition
- D. Bronchopneumonia
- E. Pulmonary tuberculosis

26. Protein energy malnutrition (PEM)

- A. Anaemia is very rare
- B. Vitamin A is indicated
- C. Diet is the mainstay of treatment
- D. Multivitamins are contraindicated
- E. Oedema is a complication of kwashiorkor

27. Pneumonia:

- A. Very rarely complicates to meningitis
- B. In infants, it is always lobar pneumonia
- C. Klebsiella pneumonia is best treated with macrolides
- D. In a malnourished child, it is best treated with Gentamycin
- E. PCP is best treated with high dose sulphamethoxazole/ trimethoprim

28. The following are causes of massive splenomegaly:

- A. Sickle cell disease
- B. Ascariasis
- C. Kala-azar
- D. Typhoid
- E. Acute myeloid leukemia

29. In dysentery:

- A. Escherichia coli is a cause
- B. Campylobacter jejuni is a common cause
- C. Mainstay of treatment is rehydration
- D. Amoebic dysentery is rare in our setting
- E. Albendazole is used in the amoebic form

30. Regarding kwashiorkor:

- A. Subcutaneous fat is retained
- B. May present with hepatomegaly
- C. Is associated with vitamin deficiency
- D. Body weight is between 60-80% of expected weight
- E. The child has good appetite

SECTION B

1. A 4 year old child presents to your clinic with a history of abdominal swelling for a period of 1 month. The mass is on the left and is painless.

- a) What are the differentials? (4 marks)
- b) What are the features you would look for in such an abdominal mass? (6 marks)

2. A 6 year old child presents to your clinic with a one day history of difficulty in breathing, cough and a wheezing chest which worsens at night. The child is afebrile. There is a history of similar episodes before and the mother suffers from eczema.

- a) What is the probable diagnosis? (2 marks)
- b) Outline the treatment of the condition. (4 marks)
- c) List 4 complications that may arise from this condition. (4 marks)

3. A 2 year old baby is brought to the ER with cyanosis and dyspnea of one hour duration. He had recurrent such episodes for the last six months. On examination, he is deeply cyanosed, extremely irritable and tachypnoic with finger clubbing. There is an ejection systolic murmur at the pulmonary area.

- a) What is the most likely diagnosis? (2 marks)
- b) Give the emergency treatment (4 marks)
- c) Give steps of long term management (4 marks)

4. An 8 years old child presents with abdominal pain, vomiting and deteriorating conscious level of one day duration. He has been drinking excessive water for the last one week. On examination, he is dehydrated with respiratory rate of 40/min and GCS of 10.

- a) What is the most likely diagnosis? (2 marks)
- b) How will you investigate? (4 marks)
- c) How will you manage? (4 marks)

5. An 8 years old girl is brought to ER with continuous generalized tonic clonic seizure for last one hour. On examination she is afebrile, convulsing with frothin from mouth and has also passed urine. Mother said that she had similar 3 episodes during the last six months.

- a) What is the diagnosis? (2 marks)
- b) Outline her management. (8 marks)

TEST PAPER 10

INSTRUCTIONS

This paper consists of SECTION A and SECTION B.

Section A consists of 50 True/False Questions and

Section B consists of essay questions worth 50 marks.

SECTION A

1. The following organisms may cause acute diarrhea:

- A. *Giardia lamblia*
- B. *Escherichia coli*
- C. *Ascaris lumbricoides*
- D. Rota virus
- E. *Shigella*

2. Regarding cerebral palsy:

- A. Prematurity and anoxia are predisposing factors
- B. Seizures are common
- C. Spasticity is not a feature
- D. The delay is normally in motor development
- E. Never presents with ataxia

3. At the of 9 months, a baby should be able to:

- A. Sit unaided
- B. Crawl
- C. Wear his shoes
- D. Hold toy in each hand
- E. Say “mama” and “dada” with mummy

4. The following medications are contraindicated in breastfeeding:

- A. Phenobarbitone
- B. Digoxin
- C. Chloramphenicol
- D. Warfarin
- E. Cyclophosphamide

5. The following are true of cerebral tumors in children:

- A. Headache is a common presentation
- B. Site is 70% subtentorial;
- C. May cause convulsions
- D. May cause 3rd and 6th cranial nerve palsy
- E. Astrocytoma may be completely resected

6. Malaria in children:

- A. The drug of choice is Artesunate
- B. Artemether/ Lumefantrine are the first line of drugs
- C. Plasmodium vivax is the commonest cause
- D. Paludrine may be used in the treatment of malaria
- E. Parenteral quinine at a dose of 5mls/kg is used for cerebral malaria

7. The following infectious disease are usually spread via the feco-oral route:

- A. Rabies
- B. Typhoid
- C. Hepatitis E
- D. Poliomyelitis
- E. Hepatitis A

8. Causes of dyspnea in a 2 year old infant may include:

- A. Pleural effusion
- B. Bronchiolitis
- C. Aspiration
- D. Pneumonia
- E. Hunger

9. The following are true about undescended testis:

- A. Is left alone as the condition is self-limiting
- B. Is referred for immediate surgical correction
- C. Is not a surgical emergency
- D. Should be admitted for work-up
- E. Be followed for 5 years and surgical correction done when he is around 5 years.

•

10. Which of the following are features of complicated malaria?

- A. Prostration
- B. Respiratory distress
- C. Hyperglycemia
- D. Severe anaemia
- E. Refusal to feed in a one year old

11. The following are signs suggestive of severe dehydration:

- A. Skin pinch goes back slowly in less than 2 seconds
- B. Drinking eagerly ,
- C. Sunken eyes
- D. Lethargic
- E. Restless and irritable

12. The following conditions require antibiotics therapy:

- A. Caput succedaneum
- B. Cephalohaematoma
- C. Subconjunctival haemorrhage
- D. Depressed fracture skull
- E. Fracture of clavicle

13. The following are thought to be effective in the three levels of disease prevention in children:

- A. Replacement feeding
- B. Growth monitoring
- C. Oral rehydration and breast feeding
- D. Female education and child spacing
- E. Immunization and food supplementation

14. Danger signs that indicate high risk of death from respiratory tract infections are:

- A. Malnutrition
- B. Age less than 2months
- C. Stridor at rest
- D. Associated symptomatic HIV infection
- E. Reduced level of consciousness

15. The following vaccines are live attenuated:

- A. Measles
- B. Tetanus toxoid
- C. Polio
- D. Yellow fever
- E. Pentavalent

16. Causes of perinatal mortality include the following:

- A. Prematurity
- B. Placental insufficiency
- C. Birth trauma
- D. Normal labour
- E. Severe maternal infections

17. About acute appendicitis in children:

- A. Obstruction of the appendix by fecalith is a common predisposing factor
- B. Intestinal infestation worm infestation is a predisposing factor
- C. Cause is usually unknown
- D. Perforation always occurs
- E. Laboratory findings are never beneficial in making the diagnosis

18. In a child you suspect to have symptomatic HIV infection during an IMCI assessment the following are important considerations for that classification:

- A. Mothers status
- B. History of tuberculosis in the family in the last 5 years
- C. 2 episodes of diarrhea lasting 1 week each
- D. Fast breathing .
- E. Presence of lymphadenopathy in 1 group of lymph nodes

19. The following anomalies are associated with imperforate anus:

- A. Congenital cardiac anomalies
- B. Oesophageal atresia
- C. Tethered cord .
- D. Absent sacrum
- E. Renal defects

20. The following investigations may be used in the diagnosis of liver disease:

- A. Serum bilirubin
- B. Liver biopsy for histology
- C. Fine liver aspirate

- D. CT scan of the liver
- E. Chest x-rays

21. A 5 year old is brought to you with history of having swallowed a foreign body. The child is choking ,dyspnoeic and has dysphagia.

Management includes:

- A. Chest x-ray to show the foreign body
- B. Manipulation and removal of the foreign body in outpatient
- C. Administration of Aminophylline
- D. Reassure the mother and let the child go home
- E. Give oxygen immediately

22. A 4 year old girl complains of lower abdominal pains. She is pale, has marked abdominal distension and splenomegaly. Which of the following are differential diagnoses?

- A. Chronic malaria
- B. Sickle cell disease
- C. Hookworm infestation
- D. Acute lymphoblastic leukemia
- E. Typhoid fever

23. The following are causes of hemolytic disease of the newborn:

- A. Rhesus incompatibility
- B. Haemorrhagic disease of the newborn
- C. ABO incompatibility
- D. Disseminated intravascular coagulation
- E. Septicemia

24. The following constitute the management of sickle cell crisis:

- A. IV fluids (normal saline)
- B. Exchange transfusion
- C. IV antibiotics
- D. Strong analgesics
- E. Bed rest

25. The following are manifestations of liver disease:

- A. Coma
- B. Jaundice
- C. Ascites
- D. Intense generalized itching
- E. spider angiomas

26. The following are true about anencephaly:

- A. Congenital heart defects are additional anomalies
- B. Is genetically predisposed
- C. Has a higher incidence in low socio-economic background
- D. Associated with polyhydramnios
- E. Has complete absence of cerebral hemispheres and overlying skull

27. The following are true of HIV in children:

- A. Elisa test immediately after birth is a confirmatory test
- B. Mixed feeding is discouraged in the first six months
- C. Complications include failure to thrive
- D. PCR is a confirmatory test
- E. Pulmonary tuberculosis is a common opportunistic infection

28. Respond to the following statements about spina bifida:

- A. Is the most common neural tube defect
- B. Causes permanent disability
- C. May cause paralysis
- D. Small percentage have hydrocephalus
- E. Low folic acid increases its chances in pregnancy

29. Features of hypothyroidism include:

- A. Weight gain
- B. Increased physical activity
- C. Wet skin
- D. Cold intolerance
- E. Early puberty

30. The following are predisposing causes of short stature:

- A. Familial tendency
- B. Malnutrition
- C. Growth hormone excess
- D. Intrauterine growth restriction
- E. Achondroplasia

1. In a severely malnourished child, tuberculosis can be suspected in:

- A. Acute cough
- B. Poor weight gain despite good intake
- C. Chest infection not responding to antibiotics after two weeks of treatment
- D. Good weight gain once management of malnutrition is initiated
- E. A history of contact with an adult TB patient

32. A child with hypoxia may present with the following:

- A. Convulsions
- B. Gastric ulceration
- C. Proteinuria
- D. Haemoptysis
- E. Congestive cardiac failure

33. The following are causes of haematuria in children:

- A. Urethritis
- B. Urinary bladder stones
- C. Heavy exercise
- D. Cystitis
- E. Pyelonephritis

34. In fetal circulation:

- A. Waste products and CO₂ from fetus are sent back through umbilical vein
- B. 1/3 of what enters the right atrium does not go through the foramen ovale

- C. Blood from the right ventricle goes to the lung
- D. Fetus receives nutrients through umbilical arteries
- E. The umbilicus has 2 veins

35. The following are features of abnormal developmental growth pattern:

- A. No bowel control at 36 months
- B. Good neck support at 3 months
- C. Putting all the objects in the mouth at 18 months
- D. Standing with support at 36 months
- E. Sitting with support at 24 months

36. The following are predisposing factors to failure to thrive:

- A. Emotional deprivation
- B. Parental cultural nutritional beliefs
- C. Maternal literacy level
- D. Genital urinary tract infections
- E. Sickle cell disease

37. In the treatment of neonatal sepsis:

- A. Only supportive care is sufficient
- B. IV crystalline penicillin 50,000 IV/kg/dose 6 hourly for 10 days is used
- C. IV gentamycin 7.5/kg/dose 12 hourly for 10 days is used
- D. Second and third generation cephalosporins are regarded as second line drugs
- E. Positive cultures should be treated for not less than 14 days

38. In a newborn who has collapsed:

- A. The colour of extremities is of no essence
- B. Inflation breaths must be given with oxygen
- C. Suction may be necessary due to meconium
- D. Resuscitation is done with 3 compressions to each breath
- E. Adrenalin has no role in management

39. Kerosene poisoning:

- A. Gastric lavage should be undertaken immediately
- B. It may cause pneumonitis
- C. It is the commonest form of accidental poisoning in children
- D. All patients with kerosene poisoning must be admitted
- E. Chest x-ray is important in confirming diagnosis

40. A one year old baby swallowed a whole bottle of syrup of ferrous sulphate. 6 hours later, the child is drowsy and twitches are noted:

- A. This child may develop gastric perforation
- B. Desferrioxamine is indicated
- C. This is iron poisoning
- D. Gastric lavage is contraindicated
- E. Neostigmine is the appropriate antidote

41. Rectal prolapse:

- A. May present with rectal bleeding
- B. Is associated with Trichuris trichuria
- C. Stool softeners are recommended
- D. Can be reduced digitally
- E. Can be caused by acute diarrhea

42. In hepatitis:

- A. Transmission of Hepatitis B is through blood and blood products
- B. Hepatitis A is rarely infectious by the time of development of clinical jaundice
- C. Blood donors are screened for hepatitis
- D. Hepatitis B chronic carriers have a higher incidence of developing hepatocellular carcinoma in later life
- E. Progression to chronic hepatitis is more frequent in hepatitis A than hepatitis B

43. Leukaemia:

- A. Patients usually present with recurrent infections
- B. A massive spleen is a feature of chronic myeloid leukemia
- C. May present with increased intracranial pressure

- D. Is best managed with MOPP therapy
- E. Fever is a major feature

44. In Haemophilia:

- A. Clotting time is prolonged
- B. Bleeding time is normal
- C. The defect is in factor VII
- D. Patient may develop joint deformities
- E. Is apparent in males who are homozygous

45. Indications for treatment of malaria with intravenous quinine are:

- A. Anaemia of 5gm/dl and below
- B. Parasitaemia of $> 5\%$.
- C. Vomiting everything
- D. Associated severe dehydration
- E. Severe pneumonia with uncomplicated malaria

46. Pertussis infection:

- A. Is commonly caused by adenovirus
- B. Its drug of choice is erythromycin
- C. Can lead to rectal prolapse in young children
- D. Isolation is recommended
- E. Commonly causes malnutrition

47. In Cerebral Palsy:

- A. It can be predisposed by anoxia
- B. The athetoid type is the commonest
- C. The ataxic type presents with tonic neck reflexes
- D. It is a life long condition
- E. It may present with strabismus

48. A dull tone on percussion over the clavicle of a 1 year old child could suggest:

- A. Pleural effusion
- B. Lung abscess

- C. Pulmonary tuberculosis
- D. Apical pneumonia
- E. This is a normal finding in children

49. In drowning:

- A. Always induce emesis
- B. Treatment of hypothermia can be done by warm peritoneal lavage
- C. Death occurs as a result of hypoxia and acidosis
- D. Treatment of hypoglycemia is paramount
- E. Near-drowning refers to survival of a drowning event

50. The following are methods of oxygen delivery:

- A. Nasal prongs
- B. Nasopharyngeal catheter
- C. Oxygen cylinders and concentrators
- D. Nasal catheter
- E. Nebulizer

SECTION B

- 1. a) State 8 causes of bloody diarrhoea (4 Marks)
- b) Discuss the management of giardiasis (6 Marks)

- 2. Discuss the causes of anaemia in chronic renal failure 10 Marks)

- 3. A 5-year old boy presents to you with cervical lymphadenopathy:
 - a) What are the differential diagnosis of his condition? (4 Marks)
 - b) Investigate the boy (6 Marks)

- 4. a) List 5 risk factors of infective endocarditis (5 Marks)
- b) Discuss investigations and treatment options in infective endocarditis (5 Marks)

- 5. Classify and discuss the causes of acute renal failure (10 marks)

THE PUBLISHER

DR AUDI

When you ask him what he yearns for, he'll tell you that he yearns to be a source of inspiration to humankind through his books, speeches, businesses and investments. In his writing career, in which he has published 30 books, he has been able to influence people, directly and directly, through his books.

Dr Audi, a graduate of BSc Clinical Medicine and Community Health from Jomo Kenyatta University of Agriculture and Technology, as many know him, is a 25 year old Kenyan with the dreams to make the world a better place starting with his continent Africa. He calls himself the capital of Africa and that's why he is Founder and CEO of Africapitol Group. The group consists of various companies which encompass media, publishing and business consultancy.

He is also a book publishing consultant who helps people write and publish their books. He is the Founder of Dr Audi International which is a company that manages his brand.

INSTAGRAM: @_draudi

WHATSAPP: 0710138968

MEDICAL BOOKS BY DR AUDI

- 1. ANATOMY REVISION QUESTIONS:
MCQs WITH ANSWERS**
- 2. ANATOMY REVISION QUESTIONS:
ESSAYS**
- 3. INTERNAL MEDICINE REVISION
QUESTIONS**
- 4. REPRODUCTIVE HEALTH REVISION
QUESTIONS**
- 5. SURGERY REVISION QUESTIONS**
- 6. PEDIATRICS REVISION QUESTIONS**
- 7. COMMUNITY HEALTH REVISION
QUESTIONS**
- 8. HEALTH SYSTEM MANAGEMENT
REVISION QUESTIONS**
- 9. GYNECOLOGY SHORT NOTES**
- 10. OBSTETRICS SHORT NOTES**
- 11. OBSTETRICS CASE STUDIES**
- 12. GENERAL PATHOLOGY REVISION
QUESTIONS**
- 13. NEUROLOGY: MCQs WITH
ANSWERS**



DR AUDI
— INTERNATIONAL —

**TO ORDER A BOOK:
CONTACT: +254795662513**

**INSTAGRAM: @_draudi
FACEBOOK: DrAudi KE**