



UNIVERSITY OF NAIROBI

DEPARTMENT OF PAEDIATRICS AND CHILD HEALTH

MBCLB IV 2010/2011 ACADEMIC YEAR

TERM III - MCQ EXAMINATION

DOCUMENT NO: UON/DOP/CH H401: ET 2

DATE: MONDAY AUGUST 29, 2011

INSTRUCTIONS

This examination consists of only one section (Multiple Choice Questions)

Section 1:

- There are 50 questions in this section.
- Each section has 5 alternative answers.
- Only one of the alternative answers is correct.
- Tick only the chosen alternative on the corresponding number in the separate answer sheet.
- No mark will be given whenever more than one alternative is ticked.
- Do not write on the question paper.
- Ensure that you have written your registration number neatly on the answer sheet.

Uaret 4

Ruffect

BECKY
(8)

Kathleen Salim / L12

KSA

1. Which of the following statements about Attention, Deficit and Hyperactivity Disorders (ADHD) is INCORRECT?
TCN, clonidine.

- A. ADHD is more commonly seen in boys than girls ✓
 - B. Defiance and seizure disorders must be excluded before the diagnosis of ADHD is made ✓
 - C. Three characteristic features of ADHD are inattention, hyperactivity, and mental retardation ✓
 - D. Ritalin is effective in the treatment of about 70% of cases of ADHD ✓
 - E. Side effects of Ritalin include poor growth, insomnia, and tics ✓
- Ritalin: (phenylpropanolamine) dopamine ↑ appetite

2. A 6-year-old child is brought into the Emergency room by his father because of a fractured arm. Although his father states that the child fell off his bicycle, the fracture does not seem consistent with this story. On inspection, you discover that the child seems to have a number of old bruises on his back and on his legs, some of which seem reminiscent of finger markings. Which of the following steps is not appropriate in this circumstance?

- A. Let the child go home with his father since you cannot really prove anything ✗
- B. Document the injuries that you saw with possible photographs ✓
- C. Call the social worker and inform them ✓
- D. Try to interview the child alone ✓
- E. Do additional investigations (e.g. skeletal survey) ✓

child abuse

3. Common signs of heart failure in children include all of the following EXCEPT:

- A. Decreased exercise tolerance ✓
- B. Fatigue ✓
- C. Failure to thrive ✓
- D. Frequent upper respiratory tract infections - more common in ✓
- E. Peripheral oedema ✓

CUS

4. Antibiotic prophylaxis against infective endocarditis is required for all of the following EXCEPT:

- A. Rheumatic valve lesions ✓
- B. Prosthetic heart valves ✓
- C. Isolated secundum ASD ✓
- D. Pacemaker leads ✓
- E. Patent Ductus Arteriosus ✗

* CUS
* Report

GTES M

diabetes
 HbA1c = 7.5 - 8.5% in <6yrs
 done every 3 months
 = <8% in those 6-12yrs
 = 7.5% in 12-19yrs
 13. A 9-year-old girl presents to the paediatric outpatients clinic with a tendency to drink water more often than usual, secondary enuresis and loss of weight. A dipstick test revealed: sugar 3+, protein nil, blood nil, and her random blood sugar was 17.4 mmol/L

- OGIT - Type I DM
- X A. She needs an oral glucose tolerance test to confirm the diagnosis
 - X B. A glycosylated haemoglobin level of 12% indicates excellent control of blood sugars
 - X C. Her HbA1c may be an initial presentation of this disease
 - X D. Education of the disease process is not very useful to children as they rarely understand medical matters
 - X E. A combination of insulin and an oral hypoglycaemic agent is the best choice of treatment for this child

Neurofibroma

14. Which of the following is NOT associated with Neurofibromatosis-1?
- A. Lisch nodules (iris hamartomas)
 - B. Axillary freckling
 - C. Ash-leaf spots
 - D. Optic gliomas
 - E. Seizures
15. The adolescent-age group is LEAST affected by which of the following?
- A. Homicide
 - B. Poisoning
 - C. Suicide
 - D. Substance abuse
 - E. Pregnancy

16. The following is NOT true in regards to Atopic eczema:

- A. Does not start within the first two weeks of life
- B. Will have cleared by puberty in at least 50% of children
- C. Is best managed with an egg and milk free diet
- D. Predisposes to cutaneous viral infections
- E. May be exacerbated by a viral infection

17. Complications of measles include all EXCEPT:

- A. Severe corneal ulceration
- B. Cancer of the oral cavity
- C. Higher incidence of acute appendicitis
- D. Post-measles encephalopathy
- E. Subacute sclerosing panencephalitis

18. Parental smoking does NOT increase the risk of:

- A. Chronic secretory otitis media
- B. Sudden infant death syndrome
- C. Admission with bronchiolitis
- D. Low birth weight

19. A newborn child should be given hepatitis B immunisation and specific immunoglobulin if:

- A. Mother is Chinese
- B. Mother is HBsAg negative
- C. Mother is HBsAg positive and the antibody positive
- D. Mother is HBC antibody positive
- E. Mother is HIV positive

20. Allergic rhinitis about conjunctivitis EXCEPT:

- A. When inherited, are rarely bilateral
- B. Can be seen in infants of diabetic mothers
- C. Can be seen in patients with rhyboid, Toxicoplus mites, CDV, HSV, VZV
- D. Can be seen in pre-term babies exposed to high oxygen concentration
- E. Are found in patients on long-term steroids

21. Concerning juvenile idiopathic arthritis all are true EXCEPT:

- A. It may be associated with HLA DR4
- B. Complement factor 3 is decreased in large joint effusions
- C. It is almost always associated with sicca syndrome
- D. The pauciarticular form is associated with anterior uveitis
- E. The systemic form is usually associated with splenomegaly

Handwritten notes and diagrams at the bottom left of the page, including a drawing of a child's face and some illegible text.

22. Early cardiac failure during the neonatal period is often associated with all the following EXCEPT:

- A. Respiratory distress ✓
 - B. Failure to thrive ✓
 - C. Feeding difficulties ✓
 - D. Episodes of apnoea ✓
 - E. Raised pulse rate but normal respiratory rate ✓
- Tachycardia
Tachypnoea
Bradycardia
Extreme
Tender hepatomegaly*

23. All of the following may cause deafness in children EXCEPT

- A. Meningococcal septicaemia ✓
 - B. Maternal rubella ✓
 - C. Ceftriaxone administration ✓
 - D. Hereditary nephritis ✓
 - E. Peridural syringomyelia ✓
- Neuritis
Nephropathy
Deafness
Hypothyroidism
Cochlear*

24. The following are unlikely to occur after severe birth asphyxia:

- A. Seizures within the first 6 hours ✓
- B. A cord pH less than 7.05 ✓
- C. A normal Moro reflex ✓
- D. Acute tubular necrosis ✓
- E. Marked hypotonia ✓

25. A baby born at 31 week gestation has recurrent cessation of breathing for up to 10 seconds during which his heart rate and colour remain normal. This is normal ✓

- A. Indicates infection ✓
- B. Needs treatment with caffeine due to too high oxygen concentration ✓
- C. Requires ventilation ✓

26. Simple febrile convulsions:

- A. Frequently recur during a 24-hour period ✓
- B. May occur at any age between 6 months and 5 years ✓
- C. Are usually focal & generalised tonic-clonic ✓
- D. Often occurs without fever ✓
- E. Should always be investigated by lumbar puncture to exclude meningitis ✓

27. Cerebral palsy is:

- A. Caused by meningitis in most cases ✓
- B. Characterised by both motor and sensory abnormalities ✓
- C. More common in females ✓
- D. Associated with progressive dementia ✓
- E. Associated with an increased risk of fits ✓

28. Human Immunodeficiency virus infection in children:

- A. In most cases is due to administration of contaminated blood products ✓
- B. May present with Pneumocystis pneumoniae infection in a previously asymptomatic child ✓
- C. Neurological signs are usually the first presentation ✓
- D. PMCT prevents up to 99% of mother to child transmission ✓
- E. A 15 month-old baby with HIV antibodies definitely has HIV disease ✓

29. Serum calcium level is:

- A. Increased by parathyroid hormone mobilising calcium from bone ✓
- B. Decreased by vitamin D action on distal renal tubule absorption ✓
- C. High in nutritional rickets ✓
- D. Increased by high serum phosphate levels ✓
- E. High in calcitonin hypersecretion ✓

30. A 7-month old infant is admitted with seizures and found to have serum calcium of 2.2 mmol/L, phosphorus 1.0 mmol/L and elevated alkaline phosphatase of 800. Which of following statements is true?

- A. Neurological sequelae are common ✓
- B. Vitamin D therapy is required ✓
- C. Concomitant aminoaciduria indicates renal tubular disease ✓
- D. Vitamin B12 deficiency needs to be ruled out ✓
- E. Congenital hypothyroidism is a likely diagnosis ✓

*High ALP & raised corrected Ca²⁺ & phosphate activity
→ Livey also
→ Dargy's sign
→ Hypocalcaemia
→ Bone hypoplasia
→ Osteopenia, osteoporosis, osteomalacia, rickets, deformities*

*Low ALP
→ Hypothyroidism
→ Malnutrition
→ Anaemia - aplastic & pernicious
→ OML
→ Acute pancreatitis
→ Ca²⁺ & phosphate
→ Oral contraceptives*

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*Low ALP
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→ Ca²⁺ & phosphate
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31

May is a 2 year old child who has swallowed an unknown quantity of a strong solution of bleach. The following are true of her condition:

- A. Should be allowed home if there is no ulceration of the lips or tongue X **mouth**
- B. Should have vomiting induced with ipecac **do not induce vomiting**
- C. Should be investigated with a barium swallow on day 1 **not on day 1**
- D. May present with recurrent vomiting in future **not recurrent**
- E. Should have an urgent chest X-ray **not chest X-ray**

Pertussis

Parvovirus B19
 - 32.2 year old Omar was admitted with fever, barking cough, redness of his mucous membranes and a rash that began spreading from behind the ears to the rest of the body. During examination, Dr. Oryang noted that the left cornea looked dry and hazy. Which of the following is NOT true of his condition? **no**

- A. The condition is associated with a very high risk of dying **if worsens - can lose army**
- B. There is increased vulnerability to secondary bacterial infection **no**
- C. Serum vitamin A levels are depressed **no**
- D. This child is at risk of becoming blind **no**
- E. His condition is preventable **no**

33. Habbaba is a 3 week Somali boy who has just been admitted to children's ward with a history of vomiting after feeds since birth. He is dehydrated, wasted and hungry. He has a distended abdomen. As you are taking the history, you observe Habbaba feeding hungrily on his mother's breast and a few minutes after completing the feed he has a bout of voluminous projectile vomiting. Which of the following is true of his condition?

- A. There is systemic acidosis **no**
 - B. The condition has a female preponderance **no**
 - C. Requires increasing potassium supplement from the time of diagnosis **no**
 - D. Hypochloremia should be corrected with ammonium chloride **no**
 - E. Surgery must be deferred till correction of electrolyte imbalance has been achieved **no**
- pyloric stenosis**
 - **obscure non bilious projectile vomiting**
 - **due to loss of gastric acid**
 - **achieved after 4-6 weeks**
 - **achieved after 2 weeks**

34. Which of the following activities is important in the treatment of tetanus?

- A. Treatment of aspiration pneumonia **no**
- B. Tetanus immune globulin eradicates the bacteria **no**
- C. Antibiotic therapy neutralizes the toxin **no**
- D. The infant should be allowed to suckle on the breast as usual **no**
- E. Administration of tetanus toxoid after recovery **no**

35. Ochieng, an 11 month old, presents with swollen feet, poor appetite on hyper-pigmented skin lesions. He weighs 7.0 kg and is dehydrated in the surrounding. Which of the following statements is true?

- A. History of measles in the past month is relevant **no**
- B. High dose topical steroids are useful in managing the skin lesions **no**
- C. Total body sodium and potassium are likely to be elevated **no**
- D. He requires an infusion of 30ml/kg of normal saline over 1 hour **no**
- E. If pneumonia is diagnosed then crystalline penicillin alone is indicated **no**

36. Which of the following statements regarding childhood tuberculosis is true?

- A. Pulmonary cavitation is common **no**
- B. Mantoux test is useful even with a previous history of BCG vaccination **no**
- C. Diagnostic yield of mycobacterium from gastric aspirates is in excess of 40% **no**
- D. Streptomycin, rifampicin and isoniazid are the recommended initial therapy **no**
- E. Meningitis may be the first presentation **no**

37. A 7 year old is started on cytotoxic therapy for Burkitt's lymphoma. He develops cardiac arrhythmias and anuria. The following is true of his condition:

- A. Serum potassium is low **no**
 - B. Serum calcium is low **no**
 - C. This is Adriamycin cardiotoxicity **no**
 - D. Dialysis may be life saving **no**
 - E. This problem is potentially preventable **no**
- hypertensive encephalopathy**
 - **hypertensive encephalopathy**
 - **hypertensive encephalopathy**

38. A 1 year old Luo child presents with history of swelling of the hands and as well as yellowness of the eyes for 2 months. The fingers are tender on there is splenomegaly.

- A. She most probably has septic arthritis **no**
- B. Pneumococcal vaccine should be given immediately **no**
- C. A top up blood transfusion is indicated **no**
- D. This problem is confined to the African continent **no**
- E. Aplastic anaemia is a known complication of this condition **no**

Pre-eclampsia
 - **Pre-eclampsia**
 - **Pre-eclampsia**

ALL over a night incidence of delirium & is rapidly progressive. All human cells age from the outside in. treated for the end of effective eg: acetylcholinesterase.

39 In childhood leukaemia: - myeloid leukaemia

- 39 In childhood leukaemia:
 - A. ALL presents with chloromas ✓
 - B. Anaemia is due to reduced red cell lifespan ✓
 - C. Age 2 to 10 years has a good prognosis ✓
 - D. The outcome in patients with ALL is generally poorer than those with AML ✓
 - E. Diagnosis is made using a peripheral blood film that shows blasts ✓

- 40 In tropical splenomegaly syndrome:
 - A. An elevated serum IgM is an expected finding ✓
 - B. The condition occurs in areas where malaria is rare ✓
 - C. The treatment of choice is metronidazole ✓ antituberculous
 - D. The liver biopsy reveals fatty change ✓
 - E. The incidence of thrombocytopenia is reduced ✓

- 41 In a young child with a four-day history of bloody diarrhoea:
 - A. Shigellosis is a likely diagnosis ✓
 - B. The finding of cysts of ~~Shistosoma~~ in the stools confirms a diagnosis of acute amoebic dysentery ✓ ~~Shistosoma~~ flat shaped warts containing cysts
 - C. Cholera is a likely diagnosis ✓
 - D. A negative amoebic fluorescent antibody test excludes a diagnosis of acute amoebic dysentery ✓
 - E. Giardiasis is the most likely diagnosis ✓ ~~WT B/D drug & pretty gross~~

42 Kamau, 3 year old boy, is brought to Paediatric Tiller Clinic with a history of ingesting an insecticide known to contain organophosphate. Clinical examination is suggestive of organophosphate poisoning. Which of the following statements is true?

- A. Kamau is likely to have constipation ✓
- B. Kamau is likely to have dilated pupils ✓
- C. He should be given intramuscular atropine ✓
- D. Hypertension is a likely feature ✓
- E. He should have psychiatric evaluation before discharge ✓

Seizures
Salivation
Lacrimation
Urination
Diarrhoea
Gastric motility & activity
Exaggerated pain point

- 43 Indications for adenotomomy in children include:
 - A. Occasional snoring at night ✓
 - B. Severe upper respiratory infections once a year ✓
 - C. Frequent sleep apnoea ✓
 - D. Hypertrophic tonsils ✓
 - E. One bout of purulent tonsillitis ✓

- 44 Which of the following is NOT a feature of severe malaria:
 - A. Severe anaemia (Hb < 5g/dl) ✓
 - B. Generalised convulsions ✓
 - C. Jaundice ✓
 - D. Bleeding tendency ✓
 - E. Hypoglycaemia ✓ ~~hypoglycaemia~~

- 45 In the management of ingested poisons:
 - A. Gastric lavage is safe in an unconscious child ✓
 - B. Emesis is indicated for ingested hydrocarbons ✓
 - C. Antibiotics are not given in paraffin poisoning ✓
 - D. In organophosphate poisoning atropine is given every 30 minutes ✓
 - E. Acetyl cysteine and methionine are used in paracetamol poisoning ✓

46 A neonate is brought to the clinic at 4 weeks of age. Mother reports that she does not have a fever. On examination she is normal and she has yellow mucous membranes. The following is true:

- A. Urinary tract infection is a possible cause. ✓
- B. A liver biopsy is indicated in each case. ✓
- C. A history of constipation and poor feeding is irrelevant ✓
- D. Reducing sugar in the urine is diagnostic of galactosaemia ✓

- 47 The following is true pertaining to neonatal sepsis:
 - A. Rupture of membranes for 6 hours is a risk factor ✓
 - B. The majority of cases present with convulsions and a stiff neck ✓ ~~respiratory distress~~
 - C. Thrombocytopenia is a sign of poor prognosis ✓
 - D. Blood cultures are positive in 80% of cases ✓
 - E. The first line of treatment uses a second generation cephalosporin ✓

Respiratory distress
Metabolic acidosis
Hypotension & oliguria
↓
Respiratory distress
Metabolic acidosis
Hypotension & oliguria

Causes Hypertensive O2
Diagnose hypotensive & hypoxia
CM → Anaphylaxis / Neurolept anaesthesia
Cpilot → Nitroglycerine

1 peracetic acid
respiratory distress
hypotension
hypoxia
↓
respiratory distress
metabolic acidosis
hypotension & oliguria

metabolic acidosis
hypotension & oliguria
respiratory distress

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 UNIVERSITY OF NAIROBI
 DEPARTMENT OF PAEDIATRICS AND CHILD HEALTH
 END OF TERM II EXAMINATION
 INSTRUCTIONS

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Cyanosis/petech
 Anorexia
 Vomiting
 Irritability
 Convulsions
 Hypoglycaemia
 Hypocalcaemia tetany

A two year old boy has a tendency of breath holding when he has tantrums. He may present with which of the following during these episodes.

1. a. Cyanosis/petech
 2. b. Anorexia
 3. c. Vomiting
 4. d. Irritability
 5. e. Convulsions
 6. f. Hypoglycaemia
 7. g. Hypocalcaemia tetany
- Emotional deprivation is a child may present as
- Sleep disorder
 - Gender confusion
 - Failure to thrive
 - Stammering
 - Lack of attachment

An autistic child is likely to:

- Pervasive devt disorder
- Impaired social interaction
- Absent (or) speech on language devt
- Narrow range of interest, stereotypic, repetitive behaviours to objects

Generally withdraw contact with people in the immediate surrounding ✓
 He obsessed with order (OCD)
 Have advanced language development ✓
 Be very good with numbers ✓
 Awareness of eye contact (gaze aversion)
 Failure to retrieve speech (repeating)
 Repetitive play
 Obsession with order ✓

K.S.A Jurer (5)
 Kullthum

4. A one month old baby is brought to the hospital because of failure to open bowels for two days. The last time he did so, the "stool was very hard". The likely cause could be:
 - a. Anal fissure - fresh blood ✓
 - b. Increased fat in the feeds ✓
 - c. Increased protein in feeds ✓
 - d. Inadequate feeds
 - e. Giving water in between breast feeding ✓
5. Obesity is becoming an increasing problem among the affluent society in Kenya. It is most likely to occur:
 - a. In the first year of life ✓
 - b. In adolescents ✓
 - c. In the second five years of life ✓
 - d. In the neonatal period ✓
 - e. In the kindergarten school age ✓

A child suspected to have early signs of ticks is in advertently treated with prolonged administration of high dose Vitamin D. This child may develop:

- Hypercalcaemia
- Diarrhoea
- Dehydration
- Hypotonia
- Hypertonia
- Polyuria
- Vomiting

The following is NOT true of Vitamin E deficiency:

- Confusion ✓
- Peripheral neuropathy ✓
- Hypotonia ✓
- Constipation ✓
- Small birth weight ✓

Which of the following is true:

- a. a. ~~They occur in biliary atresia - fat malabsorption~~
- b. b. ~~Emolytic anaemia may occur in premature babies~~
- c. c. ~~Muscle weakness is a feature of vegetative diet~~
- d. d. ~~A good source can be found in eating mud~~
- e. e. ~~There is frequent poor wound healing~~

Which of the following is true:

- a. a. ~~METABOLIC ACIDOSIS~~ ↑ pH ↓ PCO₂ ↓ bicarbonate
- b. b. ~~RESPIRATORY ACIDOSIS~~ ↓ pH ↑ PCO₂ ↑ bicarbonate
- c. c. ~~METABOLIC ALKALOSIS~~ ↑ pH ↓ PCO₂ ↓ bicarbonate
- d. d. ~~RESPIRATORY ALKALOSIS~~ ↓ pH ↓ PCO₂ ↓ bicarbonate
- e. e. ~~MIXED ACIDOSIS~~ ↓ pH ↑ PCO₂ ↑ bicarbonate

Respiratory
 Metabolic
 Mixed

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Emotional deprivation is a child may present as

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- Narrow range of interest, stereotypic, repetitive behaviours to objects

9. A term newborn infant presents with marked respiratory distress. The baby is noted to have scaphoid abdomen. The most likely diagnosis is:-

- a. Septicaemia ~~febrile~~
- b. Ventricular septal defect ~~Dowrie Syndrome~~
- c. Diaphragmatic hernia ~~did basal cord bands ends at chest, hrt sound displaced~~
- d. Airway mucus plug ~~DOB, vigorous~~
- e. Imperforate anus ~~abdominal distention~~

10. The ability to manipulate objects using the pincer grasp usually occurs at age:-

- a. 3 to 5 months
- b. 6 to 9 months
- c. 10 to 12 months
- d. 1 to 2 months
- e. 12 to 15 months

11. Tuacnis is considered developmentally NORMAL when associated with:-

- a. Lying
- b. Fear of ridicule by peers
- c. Depression
- d. Fear of failing in school
- e. None of these

12. Sexual abuse in a ten year old should be considered if the following are found in relevant tests EXCEPT:-

- a. HIV
- b. Syphilis
- c. Gonorrhoea
- d. Chlamydia
- e. Sperm

13. A child with mental retardation is noted to have microcephaly, chorioretinitis, and a history of petechial rash at birth. This child most likely has:-

- a. TORCHES infection
 - b. Trisomy 21
 - c. Galactosaemia
 - d. Fetal-alcohol syndrome
 - e. Hunter's disease
- microcephaly, chorioretinitis, petechial rash at birth*
- Rubella, toxoplasmosis, CMV, HSV*
- 10X0, HIV, VZV, OHR*
- microcephaly, chorioretinitis, petechial rash at birth*
- Rubella, toxoplasmosis, CMV, HSV*

14. A child with failure to thrive is NOT likely to benefit from hospital admission on account of:-

- a. Further diagnostic evaluation
- b. Treatment of a minor infection
- c. Evaluation of parent-child feeding and interaction
- d. Lack of catch up growth
- e. Severe malnutrition

15. A four month old infant with vitamin D deficient rickets is expected NOT to show the following:-

- a. Bowlegs ~~Bowing or band~~
- b. Rosary
- c. Low phosphate levels
- d. High alkaline phosphatase
- e. Craniotables

16. A five year old child presents with severe hypernatraemic dehydration. A serious complication which may occur in his treatment is:

- a. Cerebral Oedema
- b. Cerebral thrombosis
- c. Hyperventilation
- d. Hypoglycaemia
- e. Gas embolism

17. A child presents with respiratory disorder of decreased tidal volume and tachypnoea. The likely cause would be:-

- a. Pneumo thorax
 - b. Myothenitis gravis
 - c. Carbon dioxide retention
 - d. Severe atelectasis
 - e. Severe hypoxaemia
- Restrictive*
- pulm fibrosis*
- RDS*
- wear vests in pneumothorax*

18. Raised capillary refill time is a poor indicator of severity of shock due to:-

- a. Blood loss from trauma
- b. Septicaemia
- c. Severe gastroenteritis
- d. Anaphylaxis
- e. Heat injury

Tidal volume:

19.

A mentally retarded 13 year old boy is found to have prominent ears and large testis. His mental retardation is likely to be due to:

- a. Trisomy 21
- b. Acromegaly
- c. Precocious puberty
- d. Fragile X syndrome
- e. Hypothyroidism

Enlarged face
Large protruding ears
 Boh. - voice s.a. characteristic

that is X-linked (band a region) of 4th pair of chromosomes. Joint laxity, talipes equinovarus, hypotonia, joint laxity, talipes equinovarus.

20.

An infant has the following records at 5 minutes of life; pulse 110/min; good muscle tone, cyanosis of hands and feet, strong cry and grimace. This infant has an Apgar score of:-

a. 6	1	9	10	11
b. 9	2	2	2	2
c. 10	2	2	2	2
d. 7	2	2	2	2
e. 8	2	2	2	2

21. In performing the APT Test, the advantage being utilised is that:-

- a. Foetal haemoglobin is alkali resistant
- b. Adult haemoglobin is alkali resistant
- c. Rh-sensitised cells are alkali resistant
- d. Adult haemoglobin is acid resistant
- e. ABD antibodies are present in serum

Differential
fetal iron blood
in bleeding during labor
due to rbc cells
Paracetamol
at resp.

22.

Jaundice is most likely to be physiologic in a term newborn infant if:-

- a. Serum bilirubin level is rising at the rate of less than 85 μmol (5 mg) L⁻¹ 24 hours in the first 4 days of life.
- b. Jaundice is present at day 12 of life
- c. Half of serum bilirubin is conjugated
- d. Jaundice appears at 12 hours of age
- e. Direct Coombs' test is positive

total bilirubin
paraacetamol
at resp.

23.

A newborn term infant is noted to have respiratory movements with no air entry in the lungs when the mouth is closed. The most probable diagnosis is:-

- a. Mucus plug in airway
- b. Chanal atresia
- c. Diaphragmatic hernia
- d. Tracheo-oesophageal atresia with fistula
- e. Pulmonary hypoplasia

24.

Perinatally acquired late onset neonatal septicemia in a term infant is likely to be associated with:-

- a. Diphtheria
- b. 75% cause of severe pneumococcal meningitis
- c. Shock
- d. Group B haemolytic Streptococci
- e. Severe impetigo

6-10 bacteria
off

25. Perinatal acquired neonatal septicaemia can be due to the following organisms except:-

- a. Listeria monocytogenes
- b. Group B haemolytic streptococci
- c. Pneumococci
- d. Escherichia coli
- e. Haemophilus influenzae - non typable

OTC

26. The most likely cause of one breast enlargement which is hard and tender, in a girl of 12 years old is:-

- a. Cysto sarcoma phyllodes
- b. Breast abscess
- c. Carcinoma of the breast
- d. Fibroadenoma
- e. Early pubertal breast

40-50
all age
not take, childbearing

27. In giving a short talk on childhood asthma, the following will be listed as risk factors for tubercle infection:-

- a. Dust into exposure in early life
- b. Black race
- c. Maternal smoking
- d. Neonatal respiratory distress syndrome
- e. Frequent respiratory infections

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In discussing the feeding options for a new born baby whose mother is sero-positive for HIV and the baby is completely virus free, she wants to know the best method to avoid her baby getting infected. The option you would give is:-

- a. Exclusive breastfeeding for the first six months of life
- b. Exclusive breast feeding for the first four months of life
- c. Intermittent breastfeeding
- d. Intermittent breastfeeding and allowing for formula top-up feeds for the rest of the time
- e. Exclusive breastfeeding with early weaning

29. Oral rehydration therapy IS NOT appropriate in the management of dehydrated children with:

- a. Vomiting and high fever ✓
- b. Pending shock (due to asplenia) ✓
- c. Cholera diarrhoea ✓
- d. Shigellosis ✓
- e. Rotavirus diarrhoea ✓

30. Salmonella Osteomyelitis is a common occurrence in children with:

- a. Repeated broad spectrum antibiotic exposure ✓
- b. Sickle cell anaemia ✓
- c. Beta thalassaemia major ✓
- d. Haemophilia ✓
- e. Sickle cell trait ✓

31. Urinary tract infection in a one year old child may present with all of the following EXCEPT:

- a. Irritability ✓
- b. Refusal to feed ✓
- c. Recurrent vomiting ✓
- d. Polydipsia only in children. NOT neonates or infants ✓
- e. Intermittent fever ✓

32. In practising proper hand hygiene, the following is the best effective method:

- a. Washing hands using water and soap and drying them under electric drier. ✗
- b. Using alcohol hand gel ✓
- c. Washing hands using soap and water from manual taps ✓
- d. Washing hands using soap and water and turning water off using paper hand towels ✓

33. A two year old child diagnosed to have severe pneumonia maximises his flow through the respiratory passages by:

- a. Granting very active ✓
 - b. Tachypnoea ✓
 - c. Flaring the alae nae ✓
 - d. Use of accessory muscles ✓
 - e. Head nodding ✓
- ↳ ability to drink.
↳ use of accessory m. and increasing pressure.
- Tachypnoea.
- Tachypnoea.

34. Immunosuppressed eight year old on treatment for leukaemia develops fungal septicaemia. The most likely organism is:-

- a. Histoplasma ✓
- b. Mycomycosis ✓
- c. Candida ~~most common (oral / crypto candida) + PCP~~ ✓
- d. Aspergilloma ✓
- e. Cryptococcus ✓

35. Which of the following vaccines should not be given to child with severe immunodeficiency disorder?

- a. DTR vaccine ✓
 - b. Polio vaccine ✓
 - c. Hepatitis B vaccine - Recombinant DNA ✓
 - d. Pneumococcal vaccine - conjugated ✓
 - e. Measles vaccine ✓
 - f. Salk polio vaccine - live (Sabin) ✓
- Viruses - Vaccines are live attl
- OPV
- BCG
- BNTM
Killed viruses - Bacterial
- Hib
- Polio
- Cholera
- DTaP
- Hib
- Meningococcal
- Pneumococcal
- Polio

36. The common non-infection cause of Pyrexia of undetermined origin (PUO) in childhood is:-

- a. Connective tissue disorders ✓
 - b. Allergies ✓
 - c. Teething ✓
 - d. Malignancy ✓
 - e. Pictitious fever - absent ✓
- D 1st
D malernancy
D connective tissue
A Malakula
E Undiagnosed cancer

37. An eight year old child is diagnosed with acute appendicitis for which he is treated. He is at risk of developing the following complications EXCEPT:-

- a. Wound infection ✓
 - b. Vitamin B6 deficiency ✓
 - c. Intra abdominal abscess ✓
 - d. Intestinal volvulus ✓
 - e. Liver abscess ✓
- gallbladder + liver

38. Which of the following statements is FALSE regarding pyloric stenosis:-

- a. Commonly presents in the first month of life ✓
- b. Males are affected more than females ✓
- c. There is frequent bilious stained vomiting ✓
- d. The vomiting is usually post prandial ✓
- e. Metabolic alkalosis is frequent finding - venous pH 7.45 ✓

A four year old child whose weight falls below the 3rd Z score presents with diarrhoea and vomiting. The best way to rehydrate this child would be by:-

- Intravenous Hartman's solution
- Intravenous Darrow's solution $\frac{1}{2}$ Darrow's $\frac{1}{2}$ Ringers
- Low salt ORS
- Resomal solution orally ✓
- Oral coconut water

40. A seven year old boy who has enjoyed good health presents with acute onset of fever, cough, dyspnoea and he is found to have bronchial breathing on his right lung. The best choice of antibiotic empirical treatment would be:-

- Ceftriaxone X
 - Cofatoxime X
 - Crystalline penicillin ✓
 - Ceftazidime X
 - Gentamycin X
- V. Severe pneumonia: Xpen + Gent
S. pneumonia: Benzyl-penicilline.
Pneumonia 5 septica

41. A three year old boy who has been known to get acute cyanotic attacks with chest pain presents in hospital in one such attack. His management in the immediate period include all to the following EXCEPT:-

- Oxygen ✓
 - Knee chest position ✓
 - Morphine ✓
 - Epinephrine ✓
 - Sodium bicarbonate - correct metabolic acidosis ✓
- Cycloctic spell
Knee chest position - block aorta and IVC
Or = Clonidine - block symp
Sedate = calm the child
Morphine + diazepam
IVE to ↑ pH
Bicarbonate = acidosis
Correct metabolic acidosis

42. A child who presents with asymptomatic pulmonary stenosis may be offered initial relief by doing:-

- Balloon catheter vulvoplasty ✓
- Blalock - Taussig stunt ✓
- Valve replacement X
- Prostaglandin therapy to keep the ductus arteriosus open ✓
- Open surgical valvotomy ✓

43. Congestive heart failure is not a feature of:-

- Truncus arteriosus ✓
- VSD (L→R), PDA ✓
- Tetralogy of Fallot ✓ PS ✓
- Coarctation of the aorta ✓
- Total anomalous venous return ✓
Hydropsic left lung
Atrial or FI

44. Infective endocarditis is most appropriately diagnosed by:-

- Complete blood count ✓
- Blood culture ✓
- Doing ESR
- ECC
- Urine examination

45. During blood examination in a child who presented with jaundice, a large number of spherocytes are reported. The cause of this could include all of the following EXCEPT:-

- Sickle cell anaemia ✓
 - Hereditary spherocytosis ✓
 - Postnatal septicemia ✓
 - Wilson's disease ✓
 - Immune haemolytic anaemia ✓
- Hemolytic anaemias
EBV, CMV, VZV and mycoplasma
X Spherocytosis

46. A child presents with history of recurrent bleeding on slight trauma. The ward doctor orders, among other tests, for bleeding time. The test mainly determines:-

- Fibrinolysis - ptt and FDP
 - Platelet function ✓
 - Factor VIII coagulant activity - APTT (intrinsic)
 - Antithrombin III activity
 - Factor IX coagulant activity ✓
- bleeding time
platelet function
TT - common pathway
LpPT - extrinsic

47. A child on chemotherapy for Burkitt's lymphoma presents with acute loin pains, reduced urine output and hematuria. The best line of action would be:-

- To organise for immediate dialysis ✓
 - To increase oral fluids
 - To give morphine
 - To give allopurinol and intravenous fluids
 - To put on bed rest and give allopurinol
- TLS

48. A ten year old boy on follow-up for nephritic syndrome is being considered for vaccination. The most critical vaccine for him would be:-

- Haemophilus influenzae type b (Hib) ✓
 - Typhoid
 - Pertussis
 - Mumps, Measles, Rubella (MMR) ✓
- Edema, loss of IgG
peritonitis + cellulitis
pneumococcus
influenza

49. The most common presentation of diabetes mellitus in children is:-

↳ DKA

- a. Acute hypoglycaemic reaction $R \times$
- b. Acute ketoacidosis
- c. Recurrent urinary tract infection α
- d. Unexplained acute fever α
- e. Convulsions α

50. A neonate presenting with features strongly suggestive of congenital hypothyroidism is likely to have the following laboratory findings:-

↓ T₃, ↓ T₄, ↑ TSH.

- a. Low TSH, high T₃
- b. Low T₄, high T₃
- c. Low T₃, high T₄
- d. High TSH, high T₃
- e. High TSH, low T₄

12. Low birth weight infants differ from the normal ones in which one of the following? The mother in developing countries is?
 A. They are always premature. **prem - or SGA**
 B. They invariably have less mature lungs at birth.
 C. They have less ability to generate and conserve heat.
 D. They require less nutrients per unit weight.

13. The essential elements in initial care of all low birth weight infants includes which one of the following
 A. Administration of antibiotics.
 B. Thermal protection.
 C. Intravenous fluid administration.
 D. Nasogastric feeding.

14. The definition of birth asphyxia is: **Failure of baby to establish & maintain low apgar score at initial assessment**
 A. History of difficult delivery.
 B. Low apgar score and subsequent neurological symptoms.
 C. Convulsive disorders following difficult delivery.
 D. Prolonged bag and mask ventilation.

15. One of the following factors may increase asphyxial brain injury
 A. Hypoglycaemia.
 B. Early feeding.
 C. Oxygen supplementation.
 D. Prolonged bag and mask ventilation.

16. Which of the following is a major risk factor for possible development of early neonatal infection
 A. Delivery outside hospital.
 B. Prolonged rupture of membranes.
 C. Passage of meconium during labor.
 D. Presence of Hyperbilirubinemia.

17. Which of the following is true about bacterial meningitis in the newborn?
 A. The commonest causative organism is haemophilus influenzae.
 B. It is associated with high occurrence of subsequent complications.
 C. Lumbar puncture not essential in diagnosis.
 D. Cannot be diagnosed by antigen detection tests.

18. An African infant who is deeply jaundiced or 'day' one is likely to have?
 A. Physiological jaundice. **After 24 hrs**
 B. Early infection.
 C. Haemolysis from RH disease.
 D. Haemolysis from ABO incompatibility disease.

19. Which of the following statements is true about growth and development of a child
 A. Period of the most rapid post-natal brain growth.
 B. Most infants are able to walk by the end of infancy.
 C. Cognitive assessment is not possible at this age.
 D. Neonatal feeding has minimal effects on development at this stage.

20. Which of the following is true about language development?
 A. Most children are able to engage in conversation at 15 months of age.
 B. It begins within the first three months of life.
 C. It is completed by the beginning of adolescence.
 D. Cannot be assessed in infancy.

21. Which of the following is true about language development?
 A. Most children are able to engage in conversation at 15 months of age.
 B. It begins within the first three months of life.
 C. It is completed by the beginning of adolescence.
 D. Cannot be assessed in infancy.

22. Which of the following is true about language development?
 A. Most children are able to engage in conversation at 15 months of age.
 B. It begins within the first three months of life.
 C. It is completed by the beginning of adolescence.
 D. Cannot be assessed in infancy.

23. Which of the following is true about language development?
 A. Most children are able to engage in conversation at 15 months of age.
 B. It begins within the first three months of life.
 C. It is completed by the beginning of adolescence.
 D. Cannot be assessed in infancy.

19. Which one of the following infants are at highest risk of Balambrin Encephalopathy?
 A. A healthy term infant with bilirubin level of 400micol x
 B. A healthy preterm infant with bilirubin level of 340micol x
 C. A healthy preterm infant with bilirubin level of 340micol x
 D. A sick preterm infant with bilirubin level of 340micol x
 E. A sick term infant with bilirubin level of 40micol

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 No 5/10/14

20. Hydrocephalus is defined as:
 A. An abnormally large head x
 B. An abnormally large brain x
 C. The presence of sun-set eyes in an infant
 D. Enlargement of the ventricular system of the brain

21. Which of the following must be present in order to make a clinical diagnosis of congestive heart failure?
 A. Tachycardia x
 B. Bilateral crepitations x
 C. Gallop Rhythm x
 D. Hepatomegaly x

CCF → Tachycardia - PUP
 Tachypnoea - Hefatomeg
 Bial C. rep - Babbing

22. Acute bacterial endocarditis is most likely to cause which of the following in a previously stable child with rheumatic heart disease?
 A. Heart failure x
 B. Cardiac rhythm disorders x
 C. Development of cyanosis x
 D. Recurrence of rheumatic fever x

23. The commonest bacterial cause of pneumonia in early childhood is:
 A. Group A Streptococcus
 B. Group B Streptococcus
 C. Streptococcus pneumoniae x
 D. Haemophilus influenzae type b x

24. Sepsis pneumoniae is present when a child has which one of the following:
 A. Homogenous white x-ray picture
 B. Widespread crepitations, fever and leucopenia x
 C. Respiratory distress, sings of hypoxia and inability to feed → very severe
 D. Hypertension and persistent cough

25. The distinctive features of splenic enlargement include one of the following:
 A. Diagonal growth from right hypo-condrium x
 B. Bi-manually palpable x
 C. Notch on the lateral aspect medial
 D. Evidence of bowel loops above it. x

26. In the welcome classification of malnutrition, the presence of oedema indicates that the child may have:
 A. Marasmus
 B. An inter-mediate infection
 C. Severe malnutrition
 D. Had recent rapid deterioration

27. In the management of severe malnutrition, the most important micronutrients are the B-complex vitamins
 A. The first step is feeding with a lower calorie diet
 B. If severely dehydrated use standard intravenous solutions
 C. They should all have tests for possible infections

28. Risk factors to development of ticks include all the following except?
 A. Pre-maturity
 B. Cerebral palsy
 C. Tropical climate
 D. Temperate climate

29. Major congenital anomalies may be caused by the following factors except:
 A. Chromosomal duplication during early embryology
 B. Maternal malnutrition during pregnancy
 C. Maternal drugs during pregnancy
 D. Maternal HIV infection

30. Mother to child infection of HIV infection is highest in which one of the following conditions?
 A. Maternal age
 B. Viral load in the mother during pregnancy
 C. Stage of disease in the mother regardless of the viral load
 D. Time of commencement of anti-retroviral therapy

31. In the prevention of mother to child transmission of HIV program, a child who did not breastfeed and received initial drugs needs which intervention while waiting for the 15-18 month antibody test?
 A. Cotrimoxazole
 B. Zidovudine
 C. Three monthly antibody tests
 D. First-line antiretroviral drug therapy

32. Acute renal failure is characterized by which of the following:
 A. Reduced urine output, high urea and high potassium in blood
 B. Reduced urine output, high sodium and high urine protein x
 C. Reduced urine output, massive proteinuria and high potassium in blood x
 D. Reduced urine output, cast cells and high potassium levels in blood x

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- C. Low serum copper/zinc
 D. Low serum albumin
 E. Low serum globulins

34. An infant with hypothyroidism is expected to have;
 A. Persistent hypothermia
 B. Persistent bradycardia
 C. Hypertuberclemaemia and poor weight gain
 D. Glossitis

35. Hypoglycaemia may be seen in all the following except;
 A. Extremely pre-mature infants
 B. Diabetic children on insulin
 C. Small for gestation term infants
 D. Infants on intravenous fluids.

36. The inheritance mode of insulin dependent diabetes mellitus is thought to be;
 A. Autosomal recessive
 B. Autosomal dominant
 C. Multiple origin
 D. Chromosomal

37. The following are risk factors for development of respiratory distress syndrome except;
 A. Infant of diabetic mother
 B. Delivery through elective caesarian section
 C. Fetal asphyxia
 D. Infant born following prolonged rupture of membranes.

38. Anaemia of prematurity is brought about by all the following except
 A. Inadequate iron and other haematinics
 B. Blood sampling during early care
 C. Oxidant damage in early life
 D. Late clamping of the umbilical cord at birth - causes polycythemia

39. The micro-organism that causes tuberculosis has which one of the following characteristics;
 A. Resistant to acid
 B. Usually appear in pairs of 2
 C. Stains gram negative - Intracellular
 D. Usually extra-cellular

40. Characteristics of febrile convulsions include the following except;

- A. Age between 6 months and 6 years
 B. Family history of convulsions
 C. Normal EEG
 D. History suggestive of previous brain injury

41. The components of the tuberculosis scoring system include the following except one
 A. Duration of symptoms
 B. Weight for age
 C. Family history of contact
 D. Temporal variation of symptoms

42. Which of the following drugs is not essential in the treatment of tuberculous meningitis?
 A. Rifampicin ✓
 B. Streptomycin ✓
 C. Prednisone ✓
 D. Isoniazid ✓

43. A child with an audible wheeze may have all the following except which one?
 A. Acute asthmatic attack ✓
 B. Broncho-pneumonia ✓
 C. Congestive heart failure ✓
 D. Restrictive lung disease ✓

44. The following neurological signs are pathognomonic of grade 3 neonatal encephalopathy from asphyxia except;
 A. Decorticate rigidity ✓
 B. Occurrence of convulsion ✓
 C. Central apnoea ✓
 D. Severe hypotonia ✓

45. Which one of the following is a feature of an upper motor neuron lesion?
 A. Hyper-reflexia ✓
 B. Hypotonia ✓
 C. Inability to close the ipsi-lateral eye lid firmly ✓
 D. Normal muscle power ✓

46. About hookworm infestation
 A. Route of entry is usually feco-oral ✓
 B. They reside in the large intestines. ✓
 C. The syndrome caused is related to iron deficiency ✓
 D. They do not cause any pulmonary pathology ✓

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Acid Fast

47. The preventable causes of acute viral hepatitis include all the following except;

- A. Hepatitis B
- B. Hepatitis A
- C. Hepatitis C
- D. Acute icterical hepatitis

48. Which one of the following conditions is mediated by type 4 (excessive cell mediated) reaction;

- A. Tuberculosis
- B. Acute glomerulonephritis
- C. Acute rheumatic fever
- D. Transfusion reactions

49. Which of the following is true; about acute leukaemias in Kenyan children

- A. The lymphocytic variety is much more common than the myelocytic
- B. Younger children have better prognosis than older ones
- C. Males respond better to treatment than females
- D. Should be suspected whenever a child has anaemia and splenomegally not otherwise explained

50. The following can cause large amounts of free peritoneal fluid except;

- A. Constrictive pericarditis
- B. Nephrotic syndrome
- C. Portal hypertension
- D. Chronic renal failure

Read

June 0.

done

Zinat (3)

(5)

K.S.A Kullum

UNIVERSITY OF NAIROBI
DEPARTMENT OF PAEDIATRICS AND CHILD HEALTH

END OF TERM II EXAMINATION

BECK (7)

INSTRUCTIONS

1. There are 50 questions in this paper, each of them with 5 alternative answers
2. Only one of the alternatives is correct
3. Answers are to be written in the provided answer sheet.
4. No mark will be given if two or more alternatives are marked
5. Mark the correct alternative with an X
6. To change an answer cross the original one visibly then tick the preferred one
7. The time allocated for the examination is 90 minutes

1. A two year old boy has a tendency of breath holding when he has tantrums. He may present with which of the following during these episodes.

- a. Cyanosis ~~ANS~~
 - b. Syncope ~~ANS~~
 - c. Convulsions -
 - d. Hypoglycaemia
 - e. Hypocalcaemia tetany
- Basal widening + loss of corticomedullary junction + loss of corticomedullary junction + loss of corticomedullary junction*

2. Emotional deprivation is a child may present as

- a. Masturbation
 - b. High pitched shouts
 - c. Thumb sucking ~~ANS~~
 - d. Inappropriate laughter
 - e. Obsession with order
- 1) Aggressive behaviour & self
 - 2) Executive dependency
 - 3) Hyperactive
 - 4) Unpredictable moods & mood

3. An autistic child is likely to:

- a. Have strong urge to play with other children's toys ~~XX~~
- b. Generally withdraw contact with people in the immediate surrounding ~~X~~
- c. Be obsessed with order ~~XX~~
- d. Have advanced language development ~~X~~
- e. Be very good with numbers. ~~X~~

- Impaired social interaction
- Absent inappropriate speech
- Avoidance of eye contact / gaze aversion
- Repetitive activity

stms

(Time left)

- RLS - respiratory
- lead poisoning
- CP
- Hypomyelination
- Damage to myelin sheath
- Demyelination

4. A one-month old baby is brought to the hospital because of failure to open bowels for two days. The last time he did so, the "stool was very hard". The likely cause could be:-

- Anal fissure - correct
- Increased fat in the feeds
- Increased protein in feeds ✓
- Inadequate feeds
- Giving water in between breast feeding - prevents coarctation

5. Obesity is becoming an increasing problem among the affluent society in Kenya. It is most likely to occur:-

- In the first year of life
- In adolescents
- In the second five years of life (6-14yr)
- In the neonatal periods
- In the kindergarten school age

6. A child suspected to have early signs of rickets is in advertently treated with prolonged administration of high dose Vitamin-D. This child may develop:-

- Confusion ✓
- Peripheral neuropathy ✓
- Hypertonia ✓
- Hypotonia ✓
- Constipation ✓

7. The following is NOT true of Vitamin E deficiency

- May occur in biliary atresia ✓
- Hemolytic anemia may occur in premature babies ✓
- Muscle weakness is a feature ✓
- A good source can be found in eating nut oil ✓ *?? reg. oil*
- There is frequent poor wound healing → inflammation, poor epithelialization, neurodermatitis ✓

8. Which of the following is true:-

- METABOLIC ACIDOSIS: ↓ PH ↓ PCO₂ ↓ bicarbonate ✓ compensated
- RESPIRATORY ACIDOSIS: ↑ PH ↑ PCO₂ ↑ bicarbonate ✓
- METABOLIC ALKALOSIS: ↑ PH ↑ PCO₂ ↓ bicarbonate ✓
- RESPIRATORY ALKALOSIS: ↓ PH ↓ PCO₂ ↓ bicarbonate ✓
- MIXED ACIDOSIS: ↓ PH ↓ PCO₂ ↓ bicarbonate ✓

9. A term newborn infant presents has marked respiratory distress. The baby is noted to have scaphoid abdomen. The most likely diagnosis is:-

- Septicaemia
- Ventricular septal defect ✓
- Diaphragmatic hernia ✓
- Airway mucus plug
- Imperforate anus

10. The ability to manipulate objects using the pincer grasp usually occurs at age:-

- 3 to 5 months ✓
- 8 to 9 months ✓
- 10 to 12 months ✓
- 0 to 2 months ✓
- 12 to 15 months ✓

11. Truancy is considered developmentally NORMAL when associated with:-

- Lying ✓
- Fear of ridicule by peers ✓
- Depression ✓
- Fear of failing in school ✓
- None of these ✓

12. Sexual abuse in a ten year old should be considered if the following are found in relevant tests EXCEPT:-

- HIV ✓
- Syphilis ✓
- Gonorrhoea ✓
- Chlamydia ✓
- Sperm ✓

13. A child with mental retardation is noted to have microcephaly, chorioretinitis and a history of febrile rash at birth. This child most likely has:-

- TORCHES infection → chorio-retinitis, microcephaly & cerebral calcifications ✓
- Trisomy 21
- Galactosemia → hyperreflexia, hepatomegaly, jaundice, ↑ bilirubin ✓
- Fetal-alcohol syndrome → respiratory distress ✓
- Hurler's disease

Microcephaly, Mental retardation, Febrile rash at birth, Chorioretinitis, Microcephaly, Chorioretinitis, TORCHES infection

Other: HIV, Hypothyroidism, Down's syndrome, VZV (type text)

turnes a as art
 Cerebellar
 or
 Quadriplegia
 or
 paraplegia

14. A child with failure to thrive is NOT likely to benefit from hospital admission on account of:-
- a. Further diagnostic evaluation
 - b. Treatment of a minor infection
 - c. Evaluation of parent-child feeding and interaction
 - d. Lack of catch up growth
 - e. Severe malnutrition

15. A four month old infant with vitamin D deficient rickets is expected NOT to show the following:-
- a. Bowlegs ✓
 - b. Rosary ✓
 - c. Low phosphatic levels ✓
 - d. High alkaline phosphatase ✓
 - e. Craniotabes ✓ (soft brain)

16. A five year old child presents with severe hypernatraemic dehydration. A serious complication which may occur in his treatment is:
- Hypernatra
- a. Cerebral Oedema ✓ (give normal)
 - b. Cerebral thrombosis
 - c. Hyperventilation
 - d. Hypoglycaemia
 - e. Gas embolism
- cognitive dysfunction, seizures, coma, death
 • neurological, renal, electrolyte imbalance, hypocalcaemia
 • dehydration (sepsis) or dehydration
 • electrolyte imbalance, tachycardia, hypotension, dry mucous membranes, weight loss
 • General weakness

17. A child presents with respiratory disorder of decreased tidal volume and tachypnoea. The likely cause could be:-
- a. Pneumothorax ✓
 - b. Myasthenia gravis
 - c. Carbon dioxide retention
 - d. Severe adenoid enlargement
 - e. Severe hypoxaemia
- Dead in obstructive
 Dead in restrictive

18. Raised capillary refill time is a poor indicator of severity of shock due to:-
- a. Blood loss from trauma
 - b. Septicaemia
 - c. Severe gastroenteritis
 - d. Anaphylaxis ✓
 - e. Heat injury ✓
- Respiratory
 pleural effusion
 - pneumothorax
 Resp distress syndrome
 weak resp muscles

19. A mentally retarded 13 year old boy is found to have prominent ears and large testis. His mental retardation is likely to be due to:-
- a. Trisomy 21
 - b. Acromegaly
 - c. Precocious puberty
 - d. Fragile X syndrome - Klinefelter
 - e. Hypothyroidism
- ← band 21 agn 7 q x chromosome affects
 Klinefelter syndrome - long testis, broad chest &
 small testes, gynecomastia, sterility, 10:10:10
 45:XY:XX

20. An infant has the following records at 5 minutes of life: pulse 130/min, good muscle tone, cyanosis of hands and feet, strong cry and grimace. This infant has an Apgar score of:-
- (P-R-P-H-A)
- 2 + 2 + 1 + 2 + 2 = 9
- a. 6
 - b. 9
 - c. 10
 - d. 7
 - e. 8

21. In performing the APT Test, the advantage being utilised is that:-
- a. used to determine fetal blood in maternal blood on basis of volume ratio
 - b. fetal haemoglobin is alkali resistant ✓
 - c. Rh-sensitised cells are alkali resistant
 - d. Adult haemoglobin is acid resistant
 - e. ABD antibodies are present in serum
- * Quantitative test for Rh factor in cord blood
 + Quantitative test for Rh factor in cord blood
 + Quantitative test for Rh factor in cord blood
 + Quantitative test for Rh factor in cord blood

22. Jaundice is most likely to be physiologic in a term newborn infant if:-
- a. Serum bilirubin level is rising at the rate of less than 85 μmol (5 mg) / L/24 hours in the first 4 days of life ✓
 - b. Jaundice is present at day 12 of life
 - c. Half of serum bilirubin is conjugated
 - d. Jaundice appears at 12 hours of age
 - e. Direct Coombs' test is positive

23. A newborn term infant is noted to have respiratory movements with no air entry in the lungs when the mouth is closed. The most probable diagnosis is:-
- a. Mucus plug in airway
 - b. Chanal atresia ✓
 - c. Diaphragmatic hernia
 - d. Tracheo-oesophageal atresia with fistula
 - e. Pulmonary hypoplasia

24. Perinatally acquired late onset neonatal septicemia in a term infant is likely to be associated with:-
- a. Bone and joint infections in all cases
 - b. 75% cause of severe pneumonitis
 - c. Shock
 - d. Group B haemolytic Streptococci
 - e. Severe impetigo
25. Perinatally acquired neonatal septicemia can be due to the following organisms except:- Q, L, E, C, H
- a) Group B haemolytic streptococci
 - b) Group B haemolytic streptococci
 - c) Group B haemolytic streptococci
 - d) Escherichia coli
 - e) Haemophilus influenzae - non typable
26. The most likely cause of one breast enlargement which is hard and tender in a girl of 12 years old is:-
- a) Cysto sarcoma phylloides
 - b) Breast abscess
 - c) Carcinoma of the breast
 - d) Fibroadenoma
 - e) Early pubertal breast
27. In giving a short talk on childhood asthma, the following will be listed as risk factors for trigger (EXCEPT):-
- a. Dust mite exposure in early life
 - b. Black race
 - c. Maternal smoking
 - d. Neonatal respiratory distress syndrome
 - e. Frequent respiratory infections
28. In discussing the feeding options for a new born baby whose mother is sero-positive for HIV and the baby is completely virus free, she wants to know the best method to avoid her baby getting infected. The option you would give is:-
- a. Exclusive breastfeeding for the first six months of life
 - b. Exclusive breastfeeding for the first four months of life
 - c. Strict formula feeding following by weaning after six months of life
 - d. Manually breastfeeding and allowing for formula top up feeds for the very hungry baby.
 - e. Exclusive breastfeeding with early weaning

29. Oral rehydration therapy IS NOT appropriate in the management of dehydrated children with:-
- a. Vomiting and high fever
 - b. Dehydrating shock
 - c. Cholera diarrhoea
 - d. Shigellosis
 - e. Rotavirus diarrhoea
30. Salmonella Osteomyelitis is a common occurrence in children with:-
- a. Repeated broad spectrum antibiotic exposure
 - b. Sickle cell anaemia
 - c. Beta thalassaemia major
 - d. Haemophilia
 - e. Sickle cell trait
31. Urinary tract infection in a one year old child may present with all of the following EXCEPT:-
- a. Irritability
 - b. Refusal to feed
 - c. Recurrent vomiting
 - d. Polydipsia
 - e. Intermittent fever
32. In practising proper hand hygiene, the following is the best effective method:-
- a. Washing hands using water and soap and drying them under electric drier.
 - b. Using alcohol hand gel
 - c. Washing hands using soap and water and drying them with paper towel
 - d. Washing hands using soap and water from manual taps
 - e. Washing hands using soap and water and turning water off using paper hand towels
33. A two year old child diagnosed to have severe pneumonia manifests air flow through the respiratory passages by:-
- a. Grunting
 - b. Tachypnoea
 - c. Flaring the alae nasae
 - d. Use of accessory muscles
 - e. Head nodding.

34. Immunosuppressed eight year old on treatment for leukaemia develops fungal septicaemia. The most likely organism is:-
- Histoplasma
 - Mycomycosis
 - Candida - oral swab (oral / oesophageal) + PCP
 - Aspergilloma
 - Cryptococcus
35. Which of the following vaccines should not be given to child with severe immunodeficiency disorder?
- DTP vaccine
 - Hepatitis B vaccine
 - Pneumococcal vaccine
 - Measles vaccine
 - Salk polio vaccine (called)
36. The common non-infection cause of Pyrexia of undetermined origin (PUO) in childhood is:-
- Connective tissue disorders
 - Allergies
 - Teething
 - Malignancies
 - Infectious fevers
37. An eight year old child is diagnosed with acute appendicitis for which he is treated. He is at risk of developing the following complications EXCEPT:-
- Wound infection
 - Vitamin B6 deficiency
 - Intra abdominal abscess
 - Intestinal volvulus
 - Liver abscess
38. Which of the following statements is FALSE regarding pyloric stenosis:-
- Commonly presents in the first month of life ✓
 - Males are affected more than females ✓
 - There is frequent bilious stained vomitus → malnutrition
 - The vomiting is usually projective ✓
 - Metabolic alkalosis is frequent finding ✓

39. A four year old child whose weight falls below the 3 score presents with diarrhoea and vomiting. The best way to rehydrate this child would be by:-
- Intravenous Hartman's solution
 - Intravenous Darrow's solution
 - Low salt ORS
 - Reosomal solution orally
 - Oral coconut water
40. A seven year old boy who has enjoyed good health presents with acute onset of fever, cough, dyspnoea and he is found to have bronchial breathing on his right lung. The best choice of antibiotic empirical treatment would be:-
- Ceftriaxone
 - Cotaxoxime
 - Crystalline penicillin ✓
 - Cefazidime
 - Gentamycin
41. A three year old boy who has been known to get acute cyanotic attacks with chest pain, presents in hospital in one such attack. His management in the immediate period include all to the following EXCEPT:-
- Oxygen ✓
 - Knee chest position ✓
 - Morphine ✓
 - Epinephrine
 - Sodium bicarbonate ✓ correct metabolic acidosis
42. A child who presents with symptomatic pulmonary stenosis may be offered initial relief by doing:-
- Balloon catheter valvuloplasty
 - Ballock - Taussing stent ✓
 - Valve replacement
 - Prostaglandin therapy to keep the ductus arteriosus open
 - Open surgical valvotomy
43. Congestive heart failure is not a feature of:-
- Truncus aorticus
 - VSD ✓ large aortic sinus
 - Tetralogy of Fallot ✓ PS
 - Coarctation of the aorta ✓
 - Total anomalous venous return ✓ Hypoplastic left lung syndrome, ASD, PS ✓

[Type text]

[Type text]

44. Infective endocarditis is most appropriately diagnosed by:-
 a. Complete blood count
 b. Blood culture
 c. Doing ESR
 d. ECG
 e. Urine examination
45. During blood examination in a child who presented with jaundice, a large number of spherocytes are reported. The cause of this could include all of the following EXCEPT:-
 a. Sickle cell anaemia
 b. Hereditary spherocytosis
 c. Clostridial septicemia
 d. Wilson's disease
 e. Immune haemolytic anaemia
46. A child presents with history of recurrent bleeding on slight trauma. The ward doctor orders, among other tests, for bleeding time. The test mainly determines:-
 a. Fibrinolysis - PT, FDP
 b. Platelet function
 c. Factor VIII coagulant activity - APTT (inverted)
 d. Antithrombin III activity
 e. Factor IX coagulant activity - APTT
47. A child on chemotherapy for Burkitt's lymphoma presents with acute loin pains, reduced urine output and hematuria. The next line of action would be:-
 a. To organise for immediate dialysis
 b. To increase oral fluids
 c. To give morphine
 d. To give allopurinol and intravenous fluids
 e. To put on bed rest and give allopurinol
48. A ten year old boy on follow-up for nephrotic syndrome is being considered for vaccination. The most critical vaccine for him would be:-
 a. Haemophilus influenzae type b (Hib)
 b. Typhoid
 c. Pertussis
 d. Mumps, Measles, Rubella (MMR)
 e. Pneumococcal

49. The most common presentation of diabetes mellitus in children is:-
 a. Acute hypoglycaemic reaction
 b. Acute ketoacidosis
 c. Recurrent urinary tract infection
 d. Unexplained acute fever
 e. Convulsions
50. A neonate presenting with features strongly suggestive of congenital hypothyroidism is likely to have the following laboratory findings:-
 a. Low TSH, high T3
 b. Low T4, high T3
 c. Low T3, high T4
 d. High TSH, high T3
 e. High TSH, low T4

Zinat (8)

Naim



UNIVERSITY OF NAIROBI. COLLEGE OF HEALTH SCIENCES. DEPARTMENT OF PAEDIATRICS AND CHILD HEALTH

MCB CHD IV END OF TERM ONE MULTIPLE CHOICE QUESTIONS

15-3-2010

TIME: 9.30-11AM

INSTRUCTIONS

- 1. Read all the questions carefully and fill the answers in the separate answer sheet.
2. There are five responses. If you think the answer is correct insert T and if wrong insert F in the spaces provided
3. If you are not sure leave the space blank.
4. If you change your mind cross the answer and write the new response next to it.
5. A mark will be awarded for the correct answer and negative half mark for incorrect answers.
6. Ambiguous letters e.g. T will be read as incorrect answers.

1 Exams

At BIRTH

1. At age 12 months the infant:

- a) Weighs triple the birth weight
b) Becomes attentive to their name
c) Waves bye-bye
d) Measures 25cm
e) Xis able to draw a small circle

2. The following are contraindicated in the first hour of Diabetes ketoacidosis management:

- a) Normal saline
b) Ketorolam
c) Intravenous glucose
d) Insulin
e) ECG recording

3. Osteomyelitis

is diagnosed mostly in children less than 1 year of age without underlying septic arthritis. Subperiosteal abscesses are common in boys than girls. Due to group B streptococcus infection following bird sores. Most common in patients with Salmonella infection. Is best treated with intravenous drugs for five days then oral Vancomycin for two weeks.

4. The following are differential diagnosis of a 3 year old wheezy child:

- a) Koffler's syndrome
b) Bronchiolitis
c) Bronchial asthma
d) Meconium aspiration
e) Pleural effusion

5. In the treatment of shock secondary to severe diarrhoea:

- a) In the absence of intravenous access, drinking water is given through NG tube
b) IV 100ml/kg of normal saline is given as initial bolus
c) Calcium replacement is mandatory
d) Intravenous insulin with glucose is indicated to lower the high potassium levels
e) Intravenous insulin with glucose is indicated to lower the high potassium levels

Diagnose histiocytosis

clinical features
- osteolytic lesions
- hepatosplenomegaly
- lymphadenopathy
- skin lesions
- diabetes mellitus
- hypercalcaemia
- hypernatraemia
- hypernatraemic dehydration
- hypernatraemic encephalopathy
- hypernatraemic coma
- hypernatraemic death

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10. The following statement(s) about childhood asthma are not correct:

a) The commonest presentation in infants is recurrent nocturnal cough
b) Prevalence has risen in the last two decades
c) Inhaled steroids have almost no side effects even in the long-term
d) Anti-inflammatory agents are indicated in all cases
e) Antibiotics are indicated in all cases

11. Mary a 6-year old girl presents with recurrent finger clubbing and widespread crackles. The following are unlikely diagnoses:

a) Cystic fibrosis
b) Congenital bronchiectasis
c) Foreign body aspiration
d) Interstitial pneumonia
e) Atelectasis

12. Carmen, a 4-year old girl has a 3-day history of barking cough and loss of voice. She is found to be in marked respiratory distress and has cyanosis. The following are not indicated for the management of her condition:

a) Nebulised salbutamol
b) Nebulised budesonide
c) Nebulised adrenaline
d) Nebulised ipratropium
e) Nebulised morphine

13. Khamis travelled to the coast 3 weeks ago. Now he presents with fever and chills. Examination reveals a sick child with moderate pallor and splenomegaly. The blood slide shows heavy parasitaemia, Hb level is 5.5g/dl. The following is not true regarding this condition:

a) A urgent packed cell transfusion is justified
b) Chloroquine is recommended for treatment
c) Artemisinin derivatives have a role in the management
d) About one third of such children have long term neurological sequelae
e) Mefloquine has proven role in the prevention of this condition

14. In a child with congenital hypothyroidism:

a) Treatment should be started at 6 months of age
b) Trial treatment withdrawal is attempted at 2 years
c) Thyroxine is best absorbed in an empty stomach
d) Propylthiouracil is added at 1 year of age
e) Thyroid function tests are done regularly after starting treatment

15. In a child with spastic quadriplegia:

a) This child has significant in this case
b) Events before and around the significant in this case
c) The diagnosis could have been made as early as 3 months of age
d) Some cases like this have autosomal dominant pattern of inheritance
e) Some frequent chest infections are primarily caused by deficiency of humoral immunity

16. The following statement about micronutrient deficiencies in Kenya are false:

a) Iron deficiency is the commonest nutritional cause of anaemia
b) Routine vitamin A supplementation should be given starting from age 6 months according to our National Guidelines
c) Iodine deficiency is more prevalent in the lake basin than the central highlands
d) Zinc deficiency is a common finding in the malnourished child
e) Micronutrient deficiency commonly occurs in the setting of protein energy malnutrition

17. Ochieng is 3 years old. Has never been able to sit or stand on his own. He also has hypernatraemia in all the limbs and is frequently treated for chest infection. The following statements are true:

a) This child has spastic quadriplegia
b) Events before and around the significant in this case
c) The diagnosis could have been made as early as 3 months of age
d) Some cases like this have autosomal dominant pattern of inheritance
e) Some frequent chest infections are primarily caused by deficiency of humoral immunity

18. In a child with congenital hypothyroidism:

Diagnose histiocytosis
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- hypernatraemic death

ORON

RHICZ

14. The following statement(s) are true regarding childhood tuberculosis:
 a) Almost always acquired from adults ✓
 b) Tuberculosis meningitis is often the first presentation ✓
 c) Treatment in the initial phase requires four drug combination ✓
 d) Diagnosis rests on the identification of mycobacteria in body fluids ✓
 e) Can be accurately diagnosed using various scoring systems ✓

15. Helicobacter pylori infection:
 a) Uncommon in children ✓
 b) Prevalence increases with age ✓
 c) Responsible for the majority of cases of childhood peptic ulcer disease ✓
 d) Cannot be diagnosed without the use of endoscopy ✓

16. A year Wanliu has been having a running nose for the last two days. Now his mum notices emerging skin lesions on his skin. The lesions appear at different week. The following is not true:
 a) She should be isolated from her sister who is two years younger ✓
 b) This condition is caused by a pox-virus ✓
 c) The child should be started on prophylactic antibiotic to prevent pneumonia ✓
 d) A good outcome is expected ✓
 e) This is not a vaccine-preventable illness ✓

17. Regarding HIV infection in children:
 a) CD4+ T-cells is an important indicator of disease progression ✓
 b) CD4+ T-cells percent is not an important indicator of disease progression ✓
 c) Zidovudine is beneficial to children with low CD4 percent ✓
 d) Zidovudine is beneficial to children with low CD4 percent ✓
 e) Zidovudine is a preventable condition ✓

18. Achieng is born to a 36 year old mother. She is noted to have prominent occiput, low set ears, small mouth, clenched hands and macroglossia.
 a) This is most likely a congenitally acquired infection ✓
 b) Down's is most likely to be a chromosomal anomaly ✓
 c) The prognosis is often poor ✓
 d) A septal defect may be associated ✓
 e) The mother's age is not important in causation ✓

19. Match the following antiretroviral drug with common side effects:
 1. Zidovudine - myelosuppression
 2. Nevirapine - rash, hepatotoxicity, elevated liver enzymes
 3. Stavudine - peripheral neuropathy
 4. Efavirenz - rash, dizziness, headache
 5. Nelfinavir - hepatotoxicity, diarrhea
 6. Neutropenic disorders

20-50 - 2-11 (highly)

20. The following are true regarding acute renal failure in children:
 a) Urinary output less than 0.5ml/kg per hour ✓
 b) Urinary output less than 10ml/kg per hour ✓
 c) Urinary output less than 20ml/kg per hour ✓
 d) Urinary output less than 30ml/kg per hour ✓
 e) Urinary output less than 40ml/kg per hour ✓

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22. The following signs are pertinent initial investigations in a child who presents with easy bruising and bleeding of the gums:
 a) Liver function tests ✓
 b) PT/APTT ✓
 c) Urea and electrolytes ✓
 d) Hemoglobin electrophoresis ✓
 e) Hemoglobin assay ✓

23. Monica is a 6-month old who is brought with a history of recurrent chest infections, poor feeding and slow growth. On examination she has high volume bounding and collapsing pulses, and a hyperactive precordium. She most likely has:
 a) Aortic stenosis ✓
 b) Aortic regurgitation ✓
 c) Mitral stenosis ✓
 d) Mitral regurgitation ✓
 e) Patent ductus arteriosus ✓

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26. In the management of a child who presents with a diabetic ketoacidosis the two most important interventions to be given in the first two hours are:

- Insulin and intravenous normal saline
- Insulin intravenous dextrose
- Insulin and potassium supplementation
- Insulin and bicarbonate
- Insulin and parental antibiotics

27. The following are part of the standard management of congestive cardiac failure in children:

- Oral angiotensin converting enzyme inhibitors
- Beta-blockers
- Diuretic fluid restrictions
- Diuretic added salt diet

28. The following are correct statements about acute rheumatic fever:

- Secondarily prophylaxis with monthly benzathine penicillin should be continued till about 2 years of age
- Rheumatic fever follows infections with group B beta hemolytic streptococcus
- Around streptococcal antibody response is useful in diagnosis
- The long-term sequelae are often due to endocardial involvement

29. Factors associated with favorable outcome in acute lymphoblastic leukaemia include:

- Age below 2 years at diagnosis
- White cell count below 20,000/mm³ at diagnosis
- Lack of testicular involvement in boys
- Hyperleucocytosis
- Occurrence in child with trisomy 21

30. While fasting her 4-year old son, Wambui notices a firm mass in the child's abdomen. On evaluation he is well nourished and has a bimanually palpable mass in the left lumbar region. Which of the following conditions are associated?

- Asymmetry in the size of various body parts
- Disproportionate growth
- Hypertension
- Hypertrophic cardiomyopathy
- Hypertrophic pyloric stenosis
- Hypertrophic obstructive cardiomyopathy
- Hypertrophic cardiomyopathy
- Hypertrophic cardiomyopathy
- Hypertrophic cardiomyopathy

31. In a term newly born baby:

- The hemoglobin is between 12-15g/dl
- The body temperature is higher than that of the mother
- The heart rate ranges between 90-120beats/minutes
- The lymphocyte function is reduced

32. Dave who is now 5 months has recurrent vomiting after feeds. In addition he has been treated twice for pneumonia but the chest films always show upper lobe involvement. The following are true regarding this child:

- Surgical management may be indicated
- Mycobacterium tuberculosis should be considered
- Positioning in the sitting position and diet modification suffices in most cases
- The coughing fits are more severe than in older children
- The symptoms rise to a peak at 1 year before declining
- He has a higher than average chance of having congenital anomalies in the respiratory tract

33. The following are true regarding atopic dermatitis in children:

- It presents initially with flexural lesions
- It is associated with high eosinophil count
- Systemic corticosteroids are indicated in many cases
- It is expected to resolve spontaneously by 15 months
- It is more common in boys than girls

34. Which of the following are highly suggestive of child abuse?

- Multiple rib fractures in different parts of the body
- Multiple fractures in different parts of the body
- Multiple fractures in a child with severe mental handicap
- Multiple skull fracture in a 2 month old baby

35. A 10-year old girl presents with progressive unilateral jaw swelling. On evaluation he has displacement of some teeth. The rest of the body is normal.

- The finding of Reed-Sternberg cells is diagnostic
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34. 8 month old Mbul presents with delayed developmental motor milestones. On examination he has bossing of the skull and wide wrists. *Review*

- a) This condition is becoming very prevalent in Nairobi *Acromegaly*
- b) The condition is completely preventable with simple measures *Review*
- c) It is important that his mother used anticonvulsant during pregnancy *Phenyl*
- d) The cause of death in most instances is electrolyte imbalance leading to cardiac arrhythmias *Review*

35. All presents with progressive loss of vision and enlargement of the head. On brain reveals a highly calcified mass and hydrocephalus. Possible diagnoses in this child include the following:

- a) Toxoplasmosis *Review*
- b) Craniopharyngioma *Review*
- c) Burkitts lymphoma *Review*
- d) Tuberculosis *Review*
- e) Cytomegalic inclusion bodies *Review*

36. The following are essential components of the child survival strategies to reduce morbidity and mortality:

- a) Monthly growth monitoring for the first five years of life *Growth and nutrition*
- b) Supply of clean water and electricity to rural households *Water and electricity*
- c) Giving priority to education of the girl child *Education*
- d) Exclusive breastfeeding for the first six months *Exclusive breastfeeding*

37. A five day old neonate born by spontaneous vertex delivery at term with a birth weight of 3.4 kg develops yellowness of the skin and eyes. His bilirubin level is found to be 300 μ mol/l with predominantly indirect reacting bilirubin. Which of the following statements are true?

- a) Rhoeus incompatibility is the most likely diagnosis *Rh*
- b) Incompatibility should be strongly considered *Incompatibility*
- c) Phototherapy alone may adequately control hyperbilirubinemia *Phototherapy*
- d) Finding of diminished neonatal reflexes will significantly alter the management plan *Management plan*

796 HIL 01d: 7350 - 90 phototherapy

38. Which of the following statements regarding comatose children are true?

- a) The Glasgow coma scale can be used in children less than 1 year *Review*
- b) The Glasgow coma scale is most appropriate for children with cerebral malaria *Review*
- c) The Glasgow coma scale of 9 and below is associated with poor outcome *Review*
- d) Coma scales enable us to make an objective assessment of the child's level of consciousness and predict *Review*

39. The following is/are associated with very tall stature:

- a) Achondroplasia *Review*
- b) Infantile hypothyroidism *Review*
- c) Klinefelter's syndrome *Review*
- d) Turner's syndrome *Review*
- e) Hypothalamic failure *Review*

40. The following are true statements:

- a) Solid stooling in a child causes oesophageal varices *Review*
- b) Intestinal obstruction commonly causes pneumonia associated with diffuse interstitial *Review*
- c) Infiltrate in severe HIV infection *Review*
- d) Xerostomia duodenal and Meckel's diverticulum *Review*
- e) Trichinellosis infection causes rectal prolapse *Review*

41. Concerning viral infections:

- a) Meningitis is a feature of mumps virus infection *Review*
- b) Rotavirus is transmitted through faecal/oral route *Review*
- c) Respiratory syncytial virus is known to cause a wheezy illness in infants who may not be asthmatic *Review*
- d) Measles has an incubation period of about 4-6 days *Review*
- e) Coli causes severe diarrhoea disease in children as frequently as Rotavirus *Review*

Direct combi-child Abs
- RBCs check Abs
Indirect combi: Abs in serum
- Abs.

34. 8-month-old Abdul presents with delayed developmental motor milestones. On examination he has bossing of the skull and wide wrists.

- a) This condition is becoming very prevalent in Nairobi ✓
- b) The condition is completely preventable with simple measures ✓
- c) It is important that his mother used anticonvulsant during pregnancy ✓
- d) Majority of the children have hypocalcaemia ✓
- e) The cause of death in most instances is electrolyte imbalance leading to cardiac arrhythmias ✗

35. All presents with progressive loss of vision and enlargement of the head. On brain reveals a highly calcified mass and hydrocephalus. Possible diagnoses in this child include the following:

- a) Toxoplasmosis ✓
- b) Craniopharyngioma ✓
- c) Burkitts lymphoma ✓
- d) Tuberculosis ✓
- e) Cytomegalic inclusion bodies ✓

36. The following are essential components of the child survival strategies to reduce morbidity and mortality:

- a) Monthly growth monitoring for the first five years of life ✓
- b) Supply of clean water and electricity to rural households ✗
- c) Giving priority to education of the girl child ✓
- d) Constant supplementation of relief food to the most needy households ✓
- e) Exclusive breastfeeding for the first six months ✓

37. A five day old neonate born by spontaneous vertex delivery at term with a birth weight of 3.4kg develops yellowness of the skin and eyes. His bilirubin level is found to be 300 μ mol/l with predominantly indirect reacting bilirubin. Which of the following statements are true?

- a) He requires urgent exchange blood transfusion ✗
- b) Rhesus incompatibility is the most likely diagnosis ✗
- c) ABO incompatibility should be strongly considered ✓
- d) Phototherapy alone may adequately control hyperbilirubinaemia ✓
- e) Efficacy of diminished neonatal reflexes will significantly alter the management plan ✓

300 μ mol/l
250 μ mol/l
150 μ mol/l
100 μ mol/l
50 μ mol/l

38. Which of the following statements regarding comatose children are true?

- a) The Glasgow coma scale can be used in children less than 1 year ✓
- b) Blantly coma scale is most appropriate for children with cerebral malaria ✓
- c) A Glasgow coma scale of 9 and below is associated with poor outcome ✓
- d) Coma scales enable us to make an objective assessment of the child's level of consciousness and predict ✓
- e) Pinpoint pupils that poorly react to light indicate cerebral cortical damage ✓

39. The following is/are associated with very tall stature:

- a) Achondroplasia ✗
- b) Infantile hypothyroidism ✗ (41 XXX) -
- c) Klinefelter's syndrome ✓ (47 XXXY) -
- d) Turner's syndrome ✗ (45 X) webbed neck ✓
- e) Hypothalamic failure ✗ ✓ growth hormone

40. The following are true statements:

- a) Schistosomiasis mansoni infection causes oesophageal varices ✓
- b) Ascariis lumbricoideis are known causes of intestinal obstruction ✓
- c) Pneumocystis carini commonly causes pneumonia associated with diffuse interstitial infiltrates in severe HIV infection ✓
- d) Ancylostoma duodenale and Necator americanus cause of folate deficiency anaemia in children ✓
- e) Trichinella spiralis infection causes rectal prolapse ✗

41. Concerning viral infections:

- a) Meningitis is a feature of mumps virus infection ✓
- b) Poliovirus is transmitted through aerosol route ✗
- c) Respiratory syncytial virus is known to cause a wheezy illness in infants who may not be asthmatic ✓
- d) Measles has an incubation period of about 4-6 days ✗ (1-2 weeks)
- e) E. Coli causes severe diarrhoea disease in children as frequently as Rotavirus ✗

42. You are put in charge of triage at the Paediatric Emergency Unit (PEU). Which of the following would indicate a child requiring emergency (priority) management?

- X a) A 2 year old girl with respiratory rate of 55 breaths per minute and is eager to drink OX puerulent.
- b) A 3 month old infant who is able to breast feed
- X c) A 12 month old infant with pericapillary refill of 4 seconds a rapid radial pulse of 100 beats per minute
- X d) A 12 month old infant who cries continuously when you approach
- e) A febrile child whose skin retraction lasts 3 seconds

43. A 3 year old girl presents with a 3 day history of fever and pain in the right knee. She is reluctant to walk. Examination reveals a tender hot swollen knee. Which of the following apply to this condition?

- X Immunization with Haemophilus influenzae b vaccine is likely to reduce the incidence
- X A high percentage of children will have a positive blood culture
- X An X-ray will reveal erosion of the articular cartilage
- X Passive movements of the affected joint should be started immediately
- X Prognosis would have been poor if she presented five weeks later

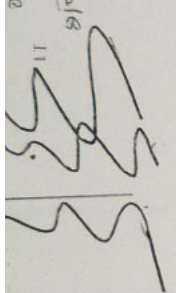
44. Anaemia in a child with chronic renal failure is due to the following:

- X a) Hemolysis
- X b) Poor food absorption at the level of the gut
- X c) Reduced food intake
- X d) Haemocoagulation during dialysis
- X e) Bone marrow suppression

Kawthalaud Asplenia
 45. Kiliu comes from Kivu and presents with gross splenomegaly of ascari, anaemia and loss of weight. Splenic aspirates reveals ID bodies. The following is true:

- a) Hemogram is likely to show thrombocytopenia
- b) Splenic has an increased tendency to develop bacterial infection
- c) Splenic should be screened for tuberculosis if he responds poorly to treatment
- d) Response to treatment is usually very rapid and the spleen is likely to be palpable

after 4 weeks of treatment
 this condition is transmitted by a mosquito
Plasmodium
TB



45. The following are not important activities in the treatment of tetanus:

- a) Control of spasms
- b) Debridement of toxin
- c) Antibiotic therapy to eradicate the pathogenic bacteria
- d) Supportive therapy to allow the patient to breathe
- e) Passive immunization

46. A 12 year old male has had several episodes of febrile urinary tract infection. He has poor urine output and examination reveals a distended bladder. Indicate the true or false:

- a) Anticystogram is indicated
- b) Anticystogram is indicated
- c) Anticystogram includes suprapubic tap to decompress the bladder
- d) Anticystogram includes scanning with DMSA
- e) Anticystogram is recommended

47. A newborn is found to have a phallus not easily identified as either a penis or clitoris. The following are fused with a small opening at the root of the phallus. Buccal clefts are present. Karyotype shows 45XX. Which of the following is true:

- a) This is a true hermaphrodite
- b) This is a true hermaphrodite
- c) This is a true hermaphrodite
- d) This is a true hermaphrodite
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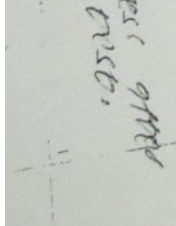
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