

PAEDIATRICS

Note: Attempt all questions.

Draw suitable diagrams (wherever necessary)

- Q. 2. Give reasons why:** (1 x 4 = 04)
- Ends of long bones get widened in rickets.
 - Mothers are advised not to skip breast feeding their infants at night.
 - The jaundice of hemolytic anemia is called 'Acholuric Jaundice'.
 - Glucose is present in ORS powder.
- Q. 3. Problem based question:** (1 x 4 = 04)
- A 10 months old infant has a weight of 5 kg and has anasarca with hypopigmented hair, patchy skin pigmentation and skin peeling of legs.
- What is your diagnosis?
 - What is the cause for anasarca?
 - Which investigation will confirm the cause of anasarca?
 - What treatment will you plan for this child?
- Q. 4. Write short notes on:** (2 x 4 = 08)
- Clinical features of measles
 - Febrile seizures
 - Prevention of neonatal hypothermia
 - Advantages of breast feeding
- Q. 5. Structured question:**
- (i) Define prematurity. Describe physical features of a preterm baby and list early (< 1 week) complications of prematurity. (1+2+1 = 04)
- (ii) What are the diseases caused by Herpes Zoster virus? Describe clinical features of one of them. How can you prevent this disease in children? (1+2+1 = 04)
- Q. 6. Write in brief about:** (2 x 4 = 08)
- Draw a diagram of fetal circulation
 - Draw a diagram of CSF circulation
 - Comparison of OPV and IPV
 - Draw the life cycle of malarial parasite

**M.B.B.S. FINAL PROF. PART-II EXAMINATION, FEBRUARY - 2019
PAEDIATRICS**

[Time allotted: Three hours]

Set - B

[Max Marks: 40]

Q. 1. Multiple choice questions (attempt all MCQs in the allotted first 15 minutes in the OMR sheet) ($\frac{1}{2} \times 16 = 08$)

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| <p>1. Which of the following is a complication of oxygen therapy in prematurity?</p> <p>a. Osteopenia
b. Rickets
c. Anemia
d. Retinopathy</p> <p>2. The commonest bacterial etiology of meningitis in children of age above 6 years:</p> <p>a. Streptococcus pneumoniae
b. Escherichia coli
c. Staphylococcus aureus
d. Hemolytic streptococcus</p> <p>3. Which of the following is typically seen in minimal change nephrotic syndrome?</p> <p>a. Hypercholesterolemia
b. Hypertension
c. Hematuria
d. Hyperproteinemia</p> <p>4. What is the route of administration of rota virus vaccine?</p> <p>a. Intra muscular
b. Intradermal
c. Oral
d. Subcutaneous</p> <p>5. In a 24 hours old neonate, below what level of blood glucose (mg/dl) will you label as hypoglycemia?</p> <p>a. 70
b. 60
c. 50
d. 40</p> <p>6. Which of the following will be abnormal in a patient with liver disease?</p> <p>a. PT
b. APTT
c. Both PT & APTT
d. None of the above</p> <p>7. A 7 months old infant has fever, cough and cold and respiratory rate of 64/min. Which of the following is the most likely diagnosis?</p> <p>a. Upper respiratory tract infection
b. Pneumonitis
c. Severe pneumonia
d. Lobar consolidation</p> <p>8. Which of the following characteristic milestones is achieved by an infant at the age of 9 months?</p> <p>a. Stand with support
b. Say 'Mama'
c. Head holding
d. Pincer grasp</p> | <p>9. At what age (in years) does a child know his/her gender?</p> <p>a. 1
b. 1½
c. 2
d. 2½</p> <p>10. Toilet training should be started by age (years):</p> <p>a. 1-2
b. 2-3
c. 3-4
d. 4-5</p> <p>11. Which of the following is a killed vaccine?</p> <p>a. Diphtheria
b. Pertussis
c. Rotavirus
d. Tetanus</p> <p>12. The current WHO targets for the world are:</p> <p>a. Sustainable Development Goals
b. Millennium Development Goals
c. Universal Development Goals
d. Health Development Goals</p> <p>13. Peak height velocity in adolescent girls precedes:</p> <p>a. Menarche
b. Thelarche
c. Weight gain
d. Pubarche</p> <p>14. Which of the following is a feature of Vit A deficiency?</p> <p>a. Xeroderma
b. Xeroderma pigmentosa
c. Scleroderma
d. Scleroma</p> <p>15. Which of the following condition has a 'Baggy Pants' appearance?</p> <p>a. Acute flaccid paralysis
b. Marasmus
c. Hypothyroidism
d. Nephrotic syndrome</p> <p>16. Which one of the following exanthematous fevers causes polymorphic rash?</p> <p>a. Chicken pox
b. Measles
c. Rubella
d. Scarlet fever</p> |
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PAEDIATRICS

[Time allotted: Three hours]

[Max Marks: 40]

Note: Attempt all questions.

Draw suitable diagrams wherever necessary.

Q. 2. Give reasons:

(1 x 4 = 04)

- a. Red blood cell undergo early destruction in a child with thalassemia major.
- b. Oral suction is done before nasal suction during resuscitation of a neonate at birth.
- c. Dehydration occurs early and is more severe in infants than older children.
- d. Steroids are started before albendazole in treatment of a child with neurocysticercosis.

Q. 3. Problem based question:

(1 x 4 = 04)

A 4 year old boy with normal milestones and fully immunized for his age is brought to Pediatrics OPD by his mother with complaint of swelling starting from around eyes and spreading all over body in last 4-5 days. It is accompanied with markedly diminished urine output. On examination, child has normal blood pressure for his age, has puffiness around both eyes, everted umbilicus with bulging flanks and bilateral pitting edema over legs. Write answer to following questions based on above described clinical scenario:

- a. What are possible causes of child's illness?
- b. Write bedside differential diagnosis of child's illness?
- c. What investigation will you do to confirm diagnosis of child's illness?
- d. Write the most important drug and its dose and duration, you will use for this child.

Q. 4. Write short notes on:

(2 x 4 = 08)

- a. Post streptococcal acute glomerulonephritis
- b. Febrile seizures
- c. Nutritional rickets
- d. Congenital hypothyroidism

Q. 5. Structured question:

(i) Describe etiology, and clinical manifestations laboratory findings and treatment of iron deficiency of iron deficiency in a child. (04)

(ii). Discuss the etiology, clinical features, investigations and treatment of a case of Croup. (04)

Q. 6. Write in brief about:

(2 x 4 = 08)

- a. Hemodynamics of ventricular septal defect in a child.
- b. Write algorithm of "Neonatal Resuscitation" in first golden minute after birth.
- c. Low osmolarity oral rehydration solution.
- d. Make a table comparing 'Normal CSF' findings with those in 'acute bacterial meningitis' and 'tubercular meningitis'.

**M.B.B.S. FINAL PROFESSIONAL PART-II EXAMINATION, MAY/ JUNE - 2019
PAEDIATRICS**

[Time allotted: Three hours]

SET – B

[Max Marks: 40]

Q. 1. Multiple choice questions (attempt all MCQs in the allotted first 15 minutes in the OMR sheet) (½ x 16=08)

1. The most common cause of secondary immunodeficiency in children is:
 - a. Severe malnutrition
 - b. Following measles
 - c. Human immuno deficiency virus infection
 - d. Nephrotic syndrome
2. Varicella vaccine (Chicken Pox vaccine) is derived from:
 - a. Oka strain
 - b. Edmmston Zagreb strain
 - c. Jeryl lynn strain
 - d. RA 27/3 strain
3. Children below 5 years of age in contact with an adult with pulmonary tuberculosis are treated prophylactically with:
 - a. INH
 - b. Rifampicin
 - c. INH and Rifampicin
 - d. No. prophylactic treatment
4. A 2 year old boy is brought to emergency with severe anemia (Hb 2 gm%) and features of congestive cardiac failure. The most appropriate immediate therapy for by would be:
 - a. Packed red cell transfusion
 - b. Partial exchange transfusion
 - c. Whole blood transfusion
 - d. Parenteral iron infusion
5. The first sign of puberty in girls is:
 - a. Onset of menstruation
 - b. Appearance of pubic hair
 - c. Change in voice
 - d. Enlargement of breast
6. "Red currant jelly" stool in an infant is characteristic of:
 - a. Acute gastroenteritis
 - b. Intussusception
 - c. Rectal polyp
 - d. Anal fissure
7. Infective endocarditis is least likely to develop in:
 - a. Atrial septal defect
 - b. Small ventricular septal defect
 - c. Mitral valve prolapse
 - d. Tetralogy of Fallot
8. A non-functioning kidney in a child is best diagnosed by:
 - a. Ultrasonography
 - b. IVU
 - c. DTPA scan
 - d. Creatinine clearance
9. Which of the following is a common cause of congenital hydrocephalus?
 - a. Craniosynostosis
 - b. Intra-uterine meningitis
 - c. Malformation of vein of Galen
 - d. Aqueductal stenosis
10. If both parents are suffering from achondroplasia, what are the chances of them having a normal child?
 - a. 0%
 - b. 25%
 - c. 50%
 - d. 100%
11. All of the following are observed in marasmus except:
 - a. Severe muscle wasting
 - b. Low insulin level
 - c. Hepatomegaly
 - d. Extreme weakness
12. In a child with acute liver failure most important prognostic factor for death is:
 - a. Increasing transaminases
 - b. Increasing bilirubin
 - c. Gram negative sepsis
 - d. Increasing prothrombin time
13. A child starts imitating simple acts at the age of:
 - a. One year
 - b. One and a half year
 - c. Seven to eight months
 - d. Four months
14. Clubbing of toes without that of finger can occur in which of the following conditions?
 - a. Coarctation of aorta
 - b. Cyanotic congenital heart disease
 - c. Infective endocarditis
 - d. Bronchiectasis
15. An infant born through meconium stained liquor (MSL) is considered "Vigorous" if infant has:
 - a. Strong respiratory efforts
 - b. Good muscle tone
 - c. Heart rate >100/minute
 - d. All of the above
16. Jaundice in a newborn is recognized by dermal staining of bilirubin described by Kramer Dermal zone-3 estimates total serum bilirubin as:
 - a. 6 – 8 mg/dl.
 - b. 8 – 12 mg/dl
 - c. >15 mg/dl
 - d. None of the above