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**UNIVERSITY OF RUHUNA**  
**FACULTY OF MEDICINE**  
**GALLE**

**FINAL MBBS EXAMINATION - 03<sup>rd</sup> SEPTEMBER 2009  
PAEDIATRICS PAPER I**

**1.00 p.m. – 4.00 p.m. (Three hours)**

1. There are six parts (A, B, C, D, E & F).
2. There is one question each in each part.
3. Answer all six questions.
4. Answer each question in the space provided.
5. Write the index number in the space provided on top of each part.

## Part A

IndexNo. ....

(Q1) A 5 yr old boy was admitted to the casualty paediatric ward with generalized oedema and oliguria. On examination he was febrile, dyspnoic and having blood pressure of 100/60 mm/Hg. Investigations revealed

Urine protein	+++
Serum protein (total)	4g/dl
Albumin	1g/dl
Globulin	3g/dl
Serum electrolytes	
Na	125 mmol/l
K	3.7 nmol/l
Blood urea	30 mg/dl

### 1.1 What is the diagnosis? (10 marks)

1.2 Mention 4 other investigations helpful in the management (20 marks)

1.3 List the important steps in the management of this child.(30 marks)

His oedema has been increased on the second day of admission and had passed only 100ml of urine since admission.

1.4 How do you manage the present situation?(20 marks)

1.5 List the poor prognostic factors of the disease you mentioned in 1.1.(20 marks)

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(Q2) A 9 year old girl was admitted to surgical casualty ward with a history of severe abdominal pain. She had fever of 4 days and was afebrile for last 24 hours prior to admission.

On examination she was afebrile not pale, and the pulse rate was 104 per minute of low volume. Abdomen was diffusely tender on palpation without guarding and rigidity. Child's body weight was 20kg.

Ultrasound scan of the abdomen performed on admission showed ascitis and a right sided pleural effusion.

2.1 List the important clinical examinations/procedures which would help in the diagnosis and in the management. (15 marks)

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2.2 List the investigations you would perform in this child and discuss the relevance.(30 marks)

2.3 Outline the management of this child. ( 40 marks)

2.4 How would you confirm the diagnosis? (15 marks)

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(Q3) Discuss the differential diagnosis of following conditions.

3.1 A 6 year old child with painful limp in the left hip joint (30 marks)

3.2 A 3 month old child presenting with features of congestive cardiac failure. (30 marks)

3.3 A 3 year old child presenting with a purpuric rash. (40 marks)

(Q4.1) A four year old previously normal child was brought to the clinic by his mother with a history of a single seizure that occurred while he was asleep a few days back. Mothers attention was drawn to the child by the guttural noises that occurred during the seizure. Seizure was apparently generalized with loss of consciousness and frothing at the mouth. It lasted for 3-4 minutes.

Upon questioning the mother mentioned about two episodes of drooling of saliva after rising from the bed in the morning, which she thought was not significant.

#### 4.1.1 What is the diagnosis of the seizure disorder? (10 marks)

4.1.2 What specific changes would you observe in the EEG of this child? (10 marks)

4.1.3 What antiepileptic drug would be effective in the treatment? (10 marks)

4.1.4 Briefly mention the principles of therapy related to this particular patient (20 marks)

## Notes on

ptic seizures (25 marks)

#### 4.2.2 Habit spasms (25 marks)

(Q5) A 26 year old primigravida delivered a baby at 32 weeks of gestation at the District Hospital Akuessa. APGAR was 6 at 1 minute and 10 at 5 minute. Birth weight was 2kg.

5.1 Mention two measures you would carry out to prevent immediate complications. (10 marks)

5.2 A few minutes later the baby started to grunt and the respiratory rate was 60 per minute. What is the diagnosis? (10 marks)

5.3 List the important steps you would take when this baby is transferred to the Teaching Hospital Karapitiya. (20 marks)

5.4 Mention steps you would take when the baby arrived at the Teaching Hospital Karapitiya.(40 marks)

5.5 List the late complications that you would anticipate in this baby.(20 marks)

(Q6)

6.1 List different clinical presentations of childhood asthma. (15marks)

6.2 List 5 conditions that would mimic childhood asthma.(15 marks)

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6.3 Discuss 5 clinical findings that would be helpful in staging the severity of childhood asthma..(15 marks)

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6.4 List 5 features of acute life threatening asthma in a 7 year old child.(20 marks)

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6.5 Mention 5 therapeutic agents with the doses that would be useful in the treatment of acute severe asthma.(20 marks)

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6.6 List 5 therapeutic agents that are used in prevention of childhood asthma.(15 marks)

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