



UNIVERSITY OF RUHUNA
FACULTY OF MEDICINE

FINAL EXAMINATION FOR MEDICAL DEGREES – NOVEMBER 2016
PAEDIATRICS PAPER I

23.11.2016

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 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

Index Number

1.1. What is the goal of Sri Lanka's Every Newborn Action Plan (SLENAP)? (10 marks)

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1.2. What is the current neonatal mortality rate in Sri Lanka? (5 marks)

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1.3. List the 4 (four) main causes of neonatal mortality in Sri Lanka (20 marks)

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1.4. Mention 1 (one) effective intervention to reduce neonatal deaths in each category mentioned in 1.3. (30 marks)

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1.5. List **3 (three)** causes for hospital re-admissions following early post-natal discharge in healthy term neonates. (15 marks)

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1.6. Mention **4 (four)** actions that should be followed in the post-natal wards to prevent these readmissions. (20 marks)

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Part B

Index Number

2. A six-month- old infant was brought to the Emergency Treatment Unit (ETU) with cough and difficulty in breathing of two-day duration. On examination he was afebrile and tachypnoeic with sub-costal and inter-costal recessions. There were few bilateral crepitations with equal air entry. Cardiovascular system was clinically normal.

2.1. What is the most likely diagnosis? (10 marks)

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2.2. How would you assess this child's breathing on arrival to the ETU? (30 marks)

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2.3. What **3 (three)** measures would you take immediately to manage the child in the ETU? (15 marks)

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2.4. Discuss the important steps you would take to treat this condition.

(20 marks)

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2.5. What is the prognosis of this condition?

(10 marks)

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2.6. List **3 (three)** risk factors which would increase the severity of this disease

(15 marks)

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Part C

Index Number

3. A 10-year-old boy was referred to the pediatrics clinic with short stature, pallor, headache and poor exercise tolerance. He has undergone ablation of posterior urethral valve at the age of 6 months. The child lost for follow up. According to the mother the child has been on a healthy diet.

On examination he was pale and the height was below -3 SD.

3.1. Mention **4 (four)** examination findings which would help in the management of this child. (20 marks)

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3.2. List **5 (five)** investigations that would help in the initial management. (20 marks)

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The child presented with a generalized convulsion 2 weeks after the initial visit.

3.3. List **3 (three)** possible causes for the convulsion and outline the immediate management. (25 marks)

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Part D

Index Number

4.1 A 4-month-old infant was brought for routine immunization. On examination he was extremely floppy with complete head lag.

4.1.1 Mention **5 (five)** conditions to account for this abnormality. (20 marks)

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4.1.2 What features in the history and examination would distinctively aid in the diagnosis of the conditions mentioned in 4.1.1. (30 marks)

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Part E

Index Number.....

5.1.1. List the **3 (three)** most common acyanotic congenital heart diseases. (15 marks)

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5.1.2. Explain how auscultation findings would help you to make a clinical diagnosis of the conditions mentioned in 5.1.1. (30 marks)

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5.1.3. Which condition you mentioned in 5.1.1 is most likely to be symptomatic in the latter part of infancy? (5 marks)

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5.1.4. What would be the presenting features of such a child in infancy? (15 marks)

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5.1.5. Mention an acyanotic congenital heart disease presenting with cardiogenic shock in the early neonatal period. (10 marks)

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5.2. 1. List the **2 (two)** most common cyanotic congenital heart diseases. (10 marks)

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5.2.2. Which condition mentioned in 5.2.1 would need intervention in the early neonatal period? (5 marks)

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5.2.3. State **1 (one)** medical and **1 (one)** surgical intervention required in the condition you mentioned in 5.2.2. (10 marks)

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Part F

Index Number

6.1. A 3-year-old girl was admitted on third day of fever with a White Blood Cell Count of $3200/\text{mm}^3$, N-34%, L-61%, Platelet - $123,000/\text{mm}^3$.

6.1.1. Parents were worried whether it is dengue fever. What investigation could be helpful at this stage? (10 marks)

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6.1.2. If the diagnosis is dengue fever list parameters that you would monitor. (30 marks)

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6.1.3. What criteria would suggest that the child is entering to critical phase? (10 marks)

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6.1.4. What is the fluid quota recommended for the critical phase if the patients' weight is 20kg? (10 marks)

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6.2. A 6-year-old boy came with recurrent abdominal pain of 6 month duration.

6.2.1. Write 5 (five) common causes. (20 marks)

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Further questioning revealed that his school performance has deteriorated over the last six months and he was very lethargic.

6.2.2. Based on the information given what is the most likely cause for his abdominal pain? (5 marks)

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6.2.3. What is the diagnosis? (10 marks)

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6.2.3. What blood investigations would you do to confirm the diagnosis? (5 marks)

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