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

**FINAL MBBS EXAMINATION - MAY 2013**  
**PAEDIATRICS PAPER I**

**22.05.2013**  
**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 No.....**

Q1

- 1.1 A six month-old boy was admitted to a casualty paediatric unit with severe pallor.

List five possible causes for the above presentation in relation to the pregnancy and the delivery. (30 marks)

(30 marks)

- 1.2 List the physical signs you would elicit in this child in relation to the causes you mentioned in 1.1. (30 marks)

(30 marks)

(P.T.O.)

1.3. List **five** investigations you would perform to arrive at a diagnosis and indicate the expected findings. (40 m)

(40 marks)

Part B

Index No.....

Q2

A male infant was born vaginally at 30 weeks of gestation. Birth weight was 1.3 kg. He developed grunting, tachypnoea and intercostal recession one hour after birth.

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

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2.2 Name **one** other condition which may have a similar presentation. (10 marks)

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2.3 Name the investigation you would perform to confirm the diagnosis and state the expected finding. (15 marks)

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2.4 What other investigations would you perform on this child? (20 marks)

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(P.T.O.)

2.6 What are the supportive measures required in the management of this child ? (35 marks)

Part C

Index No.....

Q3

A six year-old girl was admitted with a history of fever and vomiting of five days duration. Her pulse was 110/min and of low volume and the blood pressure was 80/60 mmHg.

Hb 12.6 g/dL

WBC 1800/mm<sup>3</sup> N 44% , L 56%

Platelet count 34,000/mm<sup>3</sup>

PCV 42%

3.1 What is the most likely diagnosis ? (10 marks)

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3.2 What would be the initial fluid management of this child? (40 marks)

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(P.T.O.)

**3.3 How would you monitor this child in the ward for the first 48 hours after initial fluid management? (50 marks)**

(50 marks)

## Part D

Index No.....

Q4

4.1 List three organisms that could cause pyogenic meningitis in a preschool child.

(10 marks)

4.2 List the investigations and expected results that would directly help you to diagnose pyogenic meningitis. (20 marks)

(20 marks)

4.3 Name two antibiotics that would be useful in the empirical therapy of suspected pyogenic meningitis. (10 marks)

(10 marks)

(P.T.O.)

**4.4 List the acute and long-term complications of pyogenic meningitis that could occur in this child.**

**(20 marks)**

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**4.5 Briefly discuss how chemoprophylaxis is given for the contacts after diagnosis has been made.**

**(15 marks)**

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**4.6 Name and discuss the value of vaccines that are available in the prevention of pyogenic meningitis.**

**(25 marks)**

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## Part E

**Index No.....**

Q5

Discuss the initial assessment and follow up plan of the following conditions.

### 5.1 A newborn baby with trisomy 21.

(50 marks)

(P.T.O.)

## 5.2 A one year-old child with cerebral palsy.

(50 marks)

Part F

Index No.....

Q6

A four year-old child admitted to the Paediatric casualty ward with high fever, drooling of saliva and stridor of six hours.

6.1 What is the most likely diagnosis? (15 marks)

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6.2 List three other causes for stridor in a four year old boy. (15 marks)

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(P.T.O.)

**6.4 After the immediate measures have been taken as stated in 6.3, list **three** investigations you would perform in this child. (15 marks)**

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**6.5 Mention the specific treatment you would give in this child. (15 marks)**

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