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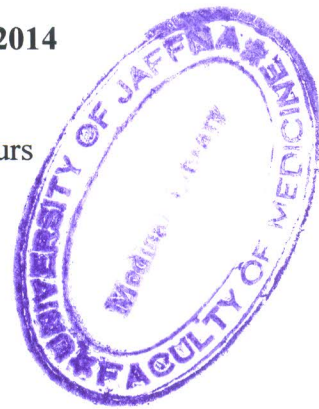
**UNIVERSITY OF JAFFNA, SRI LANKA**  
**FINAL EXAMINATION FOR MEDICAL DEGREES—November 2014**  
**PAEDIATRICS Paper II**

Date: 19.11.2011.

Time: 03 hours

ANSWER ALL THE **SIX (6)** QUESTIONS

Answer each question in separate answer book



- 1 A six year old boy was admitted with generalized body swelling of 3 days duration. He had been unwell for last two days with vomiting and reduced urine output. The past medical history is unremarkable. On examination he was conscious and afebrile
- 1.1 List four(4) possible differential diagnosis ( 08 Marks)
- 1.2 List two(2) relevant questions you would ask in the history in each of the above mentioned differential diagnosis ( 16 Marks)
- 1.3 List two (2) specific clinical signs you would look in the physical examination in each of the above mentioned differential diagnosis ( 16 Marks)
- 1.4 As an initial investigation the urine full report was done and it showed: Pus cells 2-3/HPF, Red cells 8-10/HPF and Albumin was 4+  
What is the most likely diagnosis? ( 04 Marks)
- 1.5 List four (4) other investigations you will order giving reasons ( 16 Marks)
- 1.6 Outline the management of this child in the ward and at discharge ( 30 Marks)
- 1.7 List five (5) complications that can occur with this illness ( 10 Marks)
- 2 You are called to attend a delivery of a mother who is undergoing an elective LSCS at 38 weeks of gestation for diabetes mellitus complicating the pregnancy. This is her 3<sup>rd</sup> pregnancy with 2 previous miscarriages. She is on insulin with poor glucose control.
- 2.1 List the fetal & neonatal complications that can occur when the mother is having diabetes mellitus with poor glycemic control. ( 20 Marks)
- 2.2 The baby was 3.9 Kg at birth & well without any obvious congenital abnormalities. He was transferred to the post natal ward with mother after commencing breast feeding. On routine check at 3 hours after birth he was found to have a Random Blood Sugar (RBS) level of 2.4 mmol/l. How will you manage this baby? ( 20 Marks)
- 2.3 Two hours after the initial management the baby developed a tonic clonic convulsion. RBS showed 1.4 mmol/l.  
Outline the management of this condition. ( 30 Marks)
- 2.4 After controlling the convulsion he was started with routine maintenance IV fluid. But the blood sugar levels were persistently low. List the reasons to get persistent hypoglycaemia in this child? ( 10 Marks)
- 2.5 Outline the other treatment modalities which are available to manage hypoglycaemia (20 Marks)

- 3            8 year old girl presented to the casualty paediatric ward with the history of fever & joint pain of 1 week duration. On examination she was ill looking & pale. Pulse rate was 112/min and on auscultation there was a grade 3 systolic murmur at the lower sternal edge. On abdominal examination there was a 2cm spleen.
- 3.1 List the possible causes for this condition (15 Marks)
- 3.2 What other information will you obtain from the history and examination to arrive at a diagnosis? (25 Marks)
- 3.3 List the investigations you will order mentioning the expected findings to arrive at a diagnosis (20 Marks)
- 3.4 On further questioning mother reveals that she was referred from school medical inspection to a paediatric clinic 2 years back for a cardiac murmur, but as she was well they have not followed the clinic. Describe the management of the most likely diagnosis in this child (25 marks)
- 3.5 What advice will you give the mother at discharge? (15 Marks)
- 4            Outline the principles of **fluid and electrolyte** management in the first 24 hours in the following clinical situations
- 4.1 Hypernatremic dehydration (25 Marks)
- 4.2 Diabetic ketoacidosis (25 Marks)
- 4.3 Dengue shock syndrome (25 Marks)
- 4.4 Acute adrenal insufficiency (25 Marks)
- 5            An 18 month old boy is admitted with a history of cough of 4 weeks duration. There was mild fever and the child refused to take the usual meals. In the past the child was treated for blood and mucous diarrhea at the age of 4 months and fever without focus at 8 months of age. Mother had recently returned from Kuwait and wants to take the child with her. The weight was <-3SD
- 5.1 List five (5) causes for this presentation (20 Marks)
- 5.2 What other information will you obtain from the history and examination to arrive at a diagnosis (30 Marks)
- 5.3 List the investigations you will order giving reasons (20 Marks)
- 5.4 Describe the management of the most likely cause for this presentation (30 Marks)
- 6            You notice a paper article stating the problems in the adolescent population is increasing and the health sector is taking serious actions regarding this.
- 6.1 Describe the medical, psychological and social problems encountered by adolescents (40 Marks)
- 6.2 Describe transitional care considering survival of children with congenital heart disease into adults. (30 Marks)
- 6.3 What health promotion activities will you plan for adolescents to minimize the above mentioned problems? (30 Marks)