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UNIVERSITY OF JAFFNA, SRI LANKA
FINAL EXAMINATION FOR MEDICAL DEGREES—November 2016
PAEDIATRICS Paper II

Date: 23.11.2016.

Time: 03 hours

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

Answer each question in separate answer book

- 1 A six year old girl is admitted with a history of fever of four days duration, vomiting and abdominal pain. She received the following treatment prior to admission; Paracetamol one adult tablet 4hourly for four days and Amoxicillin 250 mg 8 hourly for 3 days.
On examination her weight was 30kg, Height was on the 50th centile. Blood pressure was 85/68mmHg (50th centile 100/58mmHg). The initial blood reports are: WBC 3000/cumm (N60%, L40%), PCV 51, Platelets 45,000; SGPT(ALT) 2000U/l
 - 1.1 What is the most likely diagnosis? (10 Marks)
 - 1.2 List the relevant clinical features that should be elicited in this child to arrive at a diagnosis (25 Marks)
 - 1.3 How will you manage this child in the next 48 hours (45Marks)
 - 1.4 List five(5) complications this patient may develop (20 Marks)

- 2 Describe the **long term management** of the following situations
 - 2.1 10 month old baby who has had corrective surgery for transposition of great arteries (30 Marks)
 - 2.2 One year old child presents with ascites who was operated for biliary-atresia at the age of 3 months (40Marks)
 - 2.3 12 year old boy with a BMI of 24kg/m² (>95th centile), has acanthosis nigricans and a random blood sugar was 12mmol/l (30Marks)

- 3 3 year old boy is brought to the paediatric clinic with difficulty in walking since he started to walk at the age of 20 months. On examination the child walks abnormally with a broad base and a waddle. His brother also had the same problem and now is confined to wheel chair. He also has a sister who is normal.
 - 3.1 Name five (5) conditions that you will consider as differential diagnosis (15Marks)
 - 3.2 What information will you obtain from the history to arrive at a diagnosis (25 Marks)
 - 3.3 On examination of the lower limbs you notice the power is grade 3 and the reflexes are difficult to elicit.
List three (3) possible causes for this presentation and list the other features you will look in the examination in each condition (25 Marks)
 - 3.4 List the investigations you will order giving reasons (15 Marks)
 - 3.5 How will you manage this child's most likely diagnosis? (20 Marks)

- 4 Fifty hours old baby is transferred from a peripheral hospital for the management of yellowish discoloration of the body. On further questioning the mother also says the baby has vomited once and feeds less. On examination she is less active and mottled.
- 4.1 List the possible causes of jaundice at 50 hours of age (10 Marks)
 - 4.2 List the clinical features you will look for to arrive at the diagnosis (20 Marks)
 - 4.3 List the relevant investigations you will request to come to a diagnosis. Indicate your expected findings (20 Marks)
 - 4.4 Three hours after admission the baby developed a convulsion with eyes rolled up. Describe the management of the convulsion and the most likely underlying disease (30 Marks)
 - 4.5 Outline the long term management plan for this baby (20 Marks)
- 5 Eight month old baby is seen in the clinic for "failure to thrive"
- 5.1 Define the term Failure to Thrive (20 Marks)
 - 5.2 What information will you obtain in the history and examination to arrive at the aetiology of failure to thrive (30 Marks)
 - 5.3 List the first line and second line investigations you will order to arrive at the diagnosis and give the possible abnormalities in each investigation (20 Marks)
 - 5.4 How will you manage this baby initially and on a long term basis (30 Marks)
- 6 8 year old girl is admitted with the history of difficulty in breathing and she was managed as having an acute severe attack of bronchial asthma. She was on Beclomethasone 100 microgram two times daily and Salbutamol Metered Dose Inhaler (MDI) on an as needed basis.
- 6.1 What clinical features will support the diagnosis of acute severe exacerbation of bronchial asthma? (20 Marks)
 - 6.2 Describe the immediate management of this child (10 Marks)
 - 6.3 She did not improve with the first line management. Outline your second line management of this child (15 Marks)
 - 6.4 She was stabilized with the second line management and 2 hours after that the child suddenly developed increased work of breathing and the oxygen saturation dropped to 85%. What is the most likely diagnosis? and how will you manage this situation (20 Marks)
 - 6.5 The Doctors say her asthma is poorly controlled. Indicate the features you will elicit to see the long term control of bronchial asthma (20 Marks)
 - 6.6 Outline the long term management of this child (15 Marks)