



UNIVERSITY OF JAFFNA, SRI LANKA
FINAL EXAMINATION FOR MEDICAL DEGREES -FEBRUARY 2023
ACADEMIC YEAR 2015/2016
PAEDIATRICS – PAPER II

Date: 22.02.2023

Duration: 01.30 Pm - 04.30 Pm (3 Hours)

Answer All Six Questions

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Question Number 1

A two (2) day-old term baby was admitted from post-natal ward to the special care baby unit with poor sucking. Mother had pregnancy induced hypertension since second trimester. The labour was prolonged and baby was delivered via forceps. Apgar score was 6, 8, and 10 at 1, 5, and 10 minutes respectively. The birth weight was 2.1 kg.

1.1. List five (5) causes for poor sucking in this baby. (20 Marks)

1.2. Mention ten (10) investigations, that you will perform to arrive at a diagnosis and give reasons. (30 Marks)





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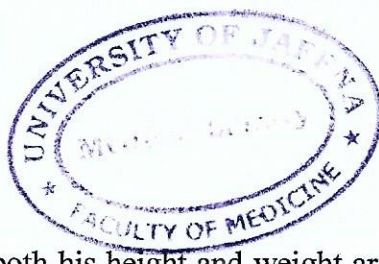


Question Number 2

A 5-year-old boy was transferred from a peripheral hospital for further evaluation of persistent fever and cough. He was admitted to the local hospital with a history of fever of 1 week and cough of 2 weeks duration. There was no response to oral antibiotics even after 5 days.

2.1 List 4 possible causes for this presentation (10 marks)

2.2 Mention five (5) other information you will obtain in the history to differentiate the above-mentioned causes (10 marks)



2.3 On examination, both his height and weight are below – 3SD. He is febrile, pulse rate is 102/min, respiratory rate is 48/min and the air entry is reduced on the right side. List five (5) other clinical signs that you will look in this child to differentiate the causes mentioned in 2.1 (20 Marks)

2.4 The child was commenced on intravenous Cefotaxime after taking the basic investigations. The fever persisted 72 hours after the commencement of the antibiotics. Outline the steps in the evaluation of this child. (20 Marks)

The fever persisted in low grade despite 10 days of intravenous antibiotics. The repeat investigations are as follows.

Full blood count		
WBC	15 x 10 ⁹ /L	(4-11)
	N. - 30%	L - 70%
Hb	10.3g/dL	(11-15)
Platelet count	350 x 10 ⁹ /L	(150 – 450)
CRP	12	(<6)
ESR	110mm in the 1 st hour	(1-20)
Blood culture	no growth	
CXR -	Bilateral marked hilar lymphadenopathy with right-sided pleural effusion	

2.5 Mention the most likely diagnosis. (10 marks)



2.6 Mention three (3) other investigations you will request in this child to confirm/ support the most likely diagnosis (15 marks)

2.7 Outline the specific management of this child (15 marks)



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Question Number 4

A 12-year-old girl is admitted with right knee joint pain and swelling of 2 weeks duration. She was seen nearly a month ago with the same problem and was treated by the general practitioner. Her weight was 49 kg (75th centile) and height was 140 cm (90th centile)

4.1 List three (3) possible causes for the above presentation (15 Marks)

4.2 Mention five (5) other information that you will obtain in the history to arrive at a diagnosis. (30 marks)

Basic investigations were done and given below:

WBC	12.8 x 10 ⁹ /L	(4-11)
	N – 37%, L – 60%, M – 2%	
Platelet	580 x 10 ⁹ /L	(150-450)
Haemoglobin	10.5g/dL	(11-15)
ESR	110 mm in the first hour	



4.3 List three (3) other investigations you will perform and mention the expected findings.

(15 marks)

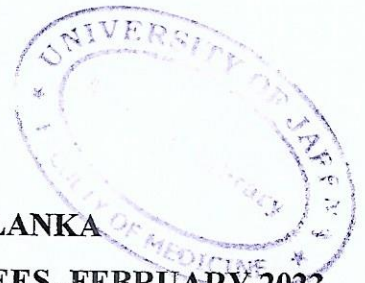
She was discharged and two weeks later she was readmitted with right knee joint swelling and redness of the eyes. Apart from the pain she was generally feeling well. Her weight remained same and there was no bony tenderness nor a rash. Her eyes were red, and she complained of pain in the eyes. Rest of the system examinations were normal. The repeat ESR remained the same as before.

4.4 What is the most likely diagnosis

(10 Marks)

4.5 List the steps in the management of the most likely diagnosis

(30 Marks)



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Question Number 5

A 5-year-old girl is admitted to the emergency department with drowsiness after bouts of vomiting. On examination, she is drowsy and afebrile. Her pulse is 120/min and her blood pressure is 100/70mmHg. Her respiratory rate is 50/min. Examination of the respiratory system and abdomen were normal.

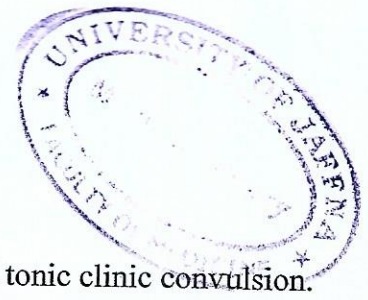
The Arterial blood gas report is given below

pH	7.1	(7.35- 7.45)
pO ₂	92	(80-100)
pCO ₂	30	(35-45)
HCO ₃	4.6	(18-23)

Random blood sugar 18.6 mmol/l (5.6-11.1)

5.1 Mention the most likely diagnosis. (10 marks)

5.2 List five (5) investigations you will request in this child with expected findings (15 marks)



5.5 Two weeks after the discharge she is admitted with a generalised tonic clinic convulsion.

Outline the immediate management plan for the convulsion

(15 Marks)

5.6 During the management of the convulsion, the blood sugar was checked and it was 2.1 mmol/L.

Indicate how you will manage this condition.

(10 Marks)



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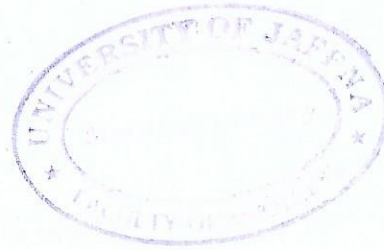
Question Number 6

An 8 year old girl is seen at the paediatric clinic with learning difficulties. She was born preterm at 34 weeks gestation and was in the NICU for 12 days. She was lost for follow up after that. There were few episodes of unresponsiveness in the past which resolved spontaneously.

6.1 List two (2) most likely causes for learning problems in this child (10 Marks)

6.2 Mention five (5) features in the examination that you will look in this child to arrive at a possible aetiology for the learning problem (20 Marks)

6.3 Mention three (3) investigations that you will perform in this child (15 Marks)



The teacher reported that she went into episodes of unresponsiveness several times a day in the class.

6.4 What is the most likely diagnosis

(15 Marks)

6.5 List five (5) steps in the management of this child

(10 Marks)

6.6 During the history taking you came to know that the child was bullied at school for poor learning by her peers.

Mention the steps you will take to prevent bullying in school

(10 marks)

