



UNIVERSITY OF JAFFNA, SRI LANKA
FINAL EXAMINATION FOR MEDICAL DEGREES - JULY 2023
ACADEMIC YEAR 2015/2016

Paediatrics - Paper II

Date: 12.07.2023

Time: 03 hours

Question Number 01

You are called to attend an emergency cesarian section in a mother with a gestational age of 30 weeks and the pregnancy was complicated with gestational diabetes and preeclampsia. The baby cried at birth and the birth weight is 1200 grams and transferred to NICU for further management.

1.1. At the age of 2 hours, the baby developed grunting and tachypnoea.

1.1.1. What is the most likely diagnosis? (05 marks)

1.1.2. Mention one investigation that you will request to support your diagnosis indicating the expected finding (10 marks)

1.2. List five (5) early neonatal complications the baby can develop in the NICU (20 marks)

The baby was managed with ventilatory support for respiratory distress in the NICU for 7 days and weaned to nasal prong oxygen. He tolerated expressed breast milk 5ml 2 hourly. On day 15 of the life the baby developed greenish vomiting and abdominal distention.

1.3. What is the most likely diagnosis for this presentation (10 marks)

1.3.1. List four (4) investigations you will request at this stage to support your diagnosis indicating the expected findings (20 marks)

1.4. After completion of 28 days in the neonatal unit, the baby is ready for discharge. Outline the discharge plan for this baby (20 marks)

1.5. List five (5) late complications that the baby can develop. (15 marks)



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Question No 02

A 6-year-old boy is admitted with vomiting and abdominal pain of one day duration. The boy had a high fever and was given 375mg of paracetamol 6 hourly. There was a tender hepatomegaly of 3cm. The weight of the child was 22kg.

The Investigations are given below:

Hb	11.6g/dl	(9-11)
WCC	$7.2 \times 10^9/L$	(4-11)
Platelets	320×10^6	(250-430)
CRP	3.5mg/L	(<6)
AST	56U/L	(<40)
ALT	46U/L	(<40)
Sodium	135mmol/L	
Potassium	4.5mmol/L	

2.1. List three (3) Differential diagnosis (15 Marks)

On day 3 of admission the child deteriorated and became drowsy following an episode of haemetemesis. He developed jaundice and examination of the abdomen revealed free fluid.

Blood investigations done on day 3 are given below:

AST	1200U/L	(<40)
ALT	985U/L	(<40)
Sodium	135mmol/L	
Potassium	3.1mmol/L	

2.2. Name the complication the child has developed on day 3 (15 Marks)

2.3. Mention three (3) factors that may have precipitated the complication (15 Marks)

2.4. List five (5) **other investigations** you will perform to support the diagnosis (15 Marks)

2.5. List ten (10) steps in the management of this child on day 3 (40 Marks)



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Question Number 03

Studies indicate acute kidney injuries are observed in one-quarter of the hospitalized children

3.1. Define Acute kidney injury (10 marks)

3.2. List five (5) common causes of intrinsic renal conditions leading to acute kidney injury (20 Marks)

3.3. List three (3) investigations you will request to differentiate pre-renal injury and intrinsic renal disease causing acute kidney injury. Indicate your expected findings (15 Marks)

3.4. The basic investigations revealed a serum potassium (K) level of 6.5mEq/L

Outline the steps in the management of this child

(15 marks)

3.5. Mention the dietary advice you will give to this child during the acute stage (10 marks)

3.6. Outline the principles in the management of acute renal failure

(30 marks)



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Question Number 4

A 6-year-old girl presented to the clinic with a history of recurrent cough of 6 months duration. She gets a cough nearly 3-4 days a week, and the symptoms are worse at night. She needed nebulisation monthly and she is having sleep disturbance 4-5 days a month. Apart from these symptoms she is otherwise well and her growth is adequate.

4.1. Mention the complete diagnosis of this child (10 marks)

4.2. Outline the management plan you will initiate in the clinic for this child. (15 marks)

4.3. She was followed up in the clinic for 2 months on regular medications. The symptoms diary revealed monthly symptoms of cough and difficulty in breathing of 8-10 times during the daytime and sleep disturbance of 2 days in a month.

4.3.1. Indicate **the current state** of her condition by giving reasons (10 marks)

4.3.2. How will you **evaluate** this child in the clinic at this point for the issue identified in
4.3.1 (20marks)

4.4. Two weeks later the child presented with cough and wheezing of 2 days duration. On admission, the child was diagnosed with acute severe attack of asthma.

4.4.1. Mention the clinical features you will expect in this child at the presentation. (15 marks)

4.4.2. She was commenced on back-to-back nebulisation with oxygen and the clinical symptoms remained the same.
Outline the **management plan** at this point. (30 marks)



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Question No 05

An 8-year-old girl is admitted with fever with pain and swelling of left knee joint of 3 days duration. She gives a history of having pain and swelling of right ankle joint 5 days ago which resolved spontaneously.

5.1. What further information will you obtain in the **history** to arrive at the diagnosis? (15 Marks)

On examination she was febrile, and the right knee was swollen, red and warm to touch.

5.2. List three (3) other examination findings that you will look to arrive at a diagnosis? (15 Marks)

Blood investigations and the results are given below:

Hb	10.6g/dl	(9-11)
WCC	$7.2 \times 10^9/L$	(4-11)
Platelets	420×10^6	(250-430)
ESR	100mm in the 1 st hour	

5.3. What is the most likely diagnosis? (10 Marks)

5.4. List three (3) investigations you will perform to **confirm** the diagnosis (15 Marks)

5.5. List five (5) steps in the management of the most likely diagnosis mentioned in 5.3. (30 Marks)

5.6. List three (3) important information that you will give at discharge (15 Marks)



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Question No 06

An 8-year-old girl was referred from the school medical inspection for short stature. She also feels tired, and mother has noticed that she opens bowels once in 4days. She was born at term with a birthweight of 2.2kg. Her weight was 30kg (+2SD) Height was 110cm (<-2SD).

6.1. Calculate her Body Mass Index (BMI) (10 Marks)

6.2. List five (5) features in the **examination** that you will look in this child to support the diagnosis. (20 Marks)

6.3. Investigations were performed and the bone age was reported as compatible with 5 years.

List three (3) possible differential diagnosis (15 Marks)

6.4.List five (5) Important steps in the management

(30 Marks)

6.5.List five (5) key information that you will give at discharge.

(25 Marks)

