



UNIVERSITY OF JAFFNA, SRI LANKA

FINAL EXAMINATION FOR MEDICAL DEGREES - NOVEMBER 2024

ACADEMIC YEAR 2017/2018

Paediatrics - Paper II

Date: 18.11.2024

Time: 1.30 pm to 4.30 pm (03 hours)

Index No:-----

Question Number 01

A 6-year-old girl presented with anorexia, easy fatigability, and bone pain for 6 months duration. She was operated for spina bifida during the neonatal period.

On examination, the patient's Weight was 12 kg (3rd centile), height 90 cm (< 3rd centile), pale, and blood pressure was 130/90 mmHg (95th Centile).

A few investigations are given:

Serum calcium 7.8 mg/dl (8.5 to 10.5)

Serum phosphate 6 mg/dl (3.4 to 4.5)

Arterial blood gas showed metabolic acidosis.

1.1. Mention the most likely complete diagnosis. (25 marks)

1.2. List five (05) important investigations and the possible findings to establish the diagnosis. (35 marks)

1.3. Briefly discuss the management of this child (40 marks)



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Question Number 02

A 20-day-old infant was brought to the A&E with a one-day fever of 38.5 °C and poor feeding. He is ill-looking and drowsy and his peripheries are mottled.

2.1. What is the most likely condition that you are dealing with? (05 Marks)

2.2. List three (3) other possible differential diagnoses that you will consider in this patient (15 Marks)

2.3. Mention the investigations you will order for this patient and give reasons for selecting the investigation. (20 Marks)

2.4. What are the steps in immediate management? (30 Marks)

2.5. On examination you also notice the umbilicus has a smelly discharge.

2.5.1. What additional investigation will you order (05 Marks)

2.5.2. What is the long-term complication that you will anticipate concerning the condition described in 2.5 (05 Marks)

2.6. What preventive measures should be undertaken to avoid this clinical condition in this baby? (20 Marks)



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Question Number 03

A 9-year-old boy is admitted feeling tired and lethargic for 2 days. He gives a history of a febrile illness 4 days back. On examination the growth parameters were normal. He was found to be pale and icteric. The abdominal examination revealed a liver span of 11cm, and the spleen was palpable 3 cm below the costal margin.

3.1. List 3 differential diagnoses for the above presentation (15 Marks)

3.2. Mention **two (2)** features in the **examination** that you will elicit in each condition mentioned in 3.1 (20 Marks)

3.3. Mention **five (5)** investigations that you will perform mentioning the expected results in each investigation. (20 Marks)

3.4. The mother gives a history of similar illness in the past and informs that his elder brother also has a similar disease.
What is the most likely diagnosis? (10 Marks)

3.5. Mention the investigation that you will perform to confirm the diagnosis mentioned in 3.4 (10 Marks)

3.6. List Five (5) important steps in the management (25 Marks)



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Index No:-----

Question Number 04

You are called from the emergency department to attend to an 8-year-old boy admitted with a right-sided convulsion lasting for 10 minutes

4.1. Outline the immediate management for this child (30 marks)

4.2. The convulsion settled in 30 minutes after standard treatment.
List the clinical features you will look into in this child to identify the aetiology for the convulsion (20 marks)

4.3. Further inquiry revealed the child was diagnosed with cyanotic heart disease since birth and defaulted the clinic follow-up for the last 3 years, and he has had a fever for the last one week.

What is the most likely cause for his presentation? (10 Marks)

4.4. Elaborate the management plan for the condition mentioned in 4.3 (20 marks)

4.5. Outline the long-term management of this child at discharge (20 marks)



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Question Number 05

Day 5 old baby is referred to the clinic because the heel prick TSH result is 20 mIU/L (0.5 to 5.0)

5.1. Outline the management plan for this baby (20 marks)

5.2. If the baby had not undergone the neonatal screening, mention how this baby would have presented (20 marks)

5.3. Mention one aetiological cause for this same condition that is not detected by the neonatal screening programme (10 marks)

5.4. The baby was commenced on the standard treatment.

Briefly elaborate on the advice you will give to the mother regarding the disease and the treatment (20 marks)

5.5. The baby was lost for clinic follow-up after 3 months and was again referred by the family health officer at the age of 2 years.

Describe the clinical features that you may see in this baby (20 Marks)

5.6. Indicate the prognosis of the disease of this baby (10 Marks)



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Question Number 06

An 11-month-old baby is seen at the paediatric clinic for developmental concerns. She was born at 27 weeks of gestation, needed resuscitation at birth and was ventilated for 6 days at the Neonatal unit. Now she reaches for objects, transfers and can pick small beads using the index finger and thumb. She can sit when the mother puts her in the sitting position, she cannot crawl nor stand with support. Mother also says she is easy to dress with frocks but difficult to put on nappies and trousers.

6.1. List five (5) features that you will elicit in the clinical examination apart from the anthropometric measurements (20 Marks)

6.2. State the most likely complete diagnosis (15 Marks)

6.3. List five (5) management aspects that you will consider to improve this child's development concerns (30 Marks)

6.4. Anthropometric measurements reveal the Weight is less than (-) 3 SD, Length and OFC are in the mean. List three (3) steps in management to improve the growth (15 Marks)

6.5. What measures should have been taken at discharge from the neonatal unit to prevent the above-mentioned concerns (20 Marks)

