

Dr. Igbal

said PDA

THE SUPERIOR COLLEGE, LAHORE

FINAL YEAR MBBS ANNUAL EXAMINATION 2020

PEDIATRICS

Ammana Khan.
Roll No. Els-254

(SEQ's)

Time Allowed: 2 hours

Total Marks: 45

Instructions

- The SEQ's part is to be submitted within 2 hours, Extra time will not be given.
- Neat Hand Writing use of margin and marker for headlines will increase the presentation of your paper.
- Do not write your name or disclose your identity in anyway.
 - 1. A. nine years old girl presented in emergency with rapid breathing and disturbed consciousness. She has history of polyuria and vomiting. No history of diarrhea. On examination she is dehydrated. Her pulse rate is 120/minute. Respiratory rate is 40/min with deep breathing.
 - A. What is most likely diagnosis?
 - B. Give diagnostic criteria of the illness.
 - C. Give steps of management. (2)
 - 2. A 2 year child came in emergency with history of respiratory difficulty and stridor .on examination he has signs of upper respiratory infection with mild fever and he looks toxic. There is drooling of saliva. On examination of throat there is congestion and there is no exudates on tonsillar area. Acute epglotittis
 - A. What is most likely diagnosis?(1)
 - B. Give two differential diagnosis (2)
 - C. Give steps of management. (2)
 - 3. A 5 month old infant came to outdoor with complaint of repeated chest infections and not gaining weight. On examination he has tachypnea and intercostal recessions, on auscultation crepitation are present on both side of chest and there is continuous murmur below left clavicle which is also heard on the back. His liver was palpable below right costal margin. VSD with bronchopne
 - A. What is most likely diagnosis? (1)

4. Three year old boy came in emergency with compliant of fever and disturbed (Dr. Shabbir) consciousness. He had 103 fever. On examination child has neck etifform is positive. In emergency he also had one fit like activity.

A. What is most likely diagnosis?(1)

B. Give two differential diagnosis.(1)

C. How will you confirm the diagnosis? (1)

D. Give steps of management. (2)

Meningitis

Transient

of new

boin

A. Give most likely diagnosis. (1)

B. Give two differential diagnosis.(2)

C. Give steps of management(2)

6. A 7 years old boy came with complaint of petechial rash and bruises all over the body. He also has history of oral bleeding. On examination he was febrile and there is generalized to was the second or the lymph- adenopathy and there is hepatosplenomegaly.

A. What is most likely diagnosis? (1)

Give two differential diagnosis (1)

- C. What is most appropriate laboratory test to confirm the diagnosis? (1)
- D. Give steps of management. (2)
- 7. A 4 year old boy has history of chronic diarrhea, anorexia and abdominal distention. On examination he is pale lethargic, malnourished with protuberant abdomen. He has vesicular Both are correct) rash on his arms.

A. Give most likely diagnosis. (1)

B. Give two differential diagnosis.(1)

C. Give list of investigation to confirm the diagnosis.(1)

D. Give steps of management.(2)

- 8. A 10 year old boy came in emergency with fever for last ten days, pain abdomen and vomiting for 3 days. On examination tongue is coated, abdomen is tender with splenomegaly. CBC shows neutropenia with relative lymphocytosis Typhoid fever
 - A. Give most likely diagnosis. (1)
 - Give 2 differential diagnosis.(1)
 - C. How will you investigate? (1)
 - D. Give steps of management.(2)
- 9. A 7 years old boy who is known patient of nephrotic syndrome currently taking prednisolone for its treatment. He has complaint of fever abdominal pain and distension. On examination abdomen is tender and there is free fluid in the abdomen.
 - A. What is most likely complication of nephrotic syndrome?(1)
 - B. How will you investigate in this case?(2)
 - C. Give steps of management. (2)

is common in premature

ROS

+ seen in RDS but RDS