

(7)

Final Year Class Test

MCQs Total No: 45
Time allotted 50 minutes

1. An infant sits with minimal support, transfer objects from one to another hand, and attempts to reach a toy, roll over from supine to prone position with no pincer grasp and stranger anxiety. He is at a developmental age of

- b) 3 months
- c) 6 months
- d) 11 months
- e) 4 months

2. Speech delay in a child is considered if the child does not talk by

- a) 12 months
- b) 24 months
- c) 36 months
- d) 18 months

3. A 3 years old girl comes to outdoor with high grade fever for 6 days and development of discrete vesicular rash all over the body for 3 days. On clinical examination some lesions are new vesicular and some are old with scab formation and there is some evidence of itching also. Among which of the following is most likely diagnosis.

- a) Measles
- b) Steven Johnson syndrome
- c) Chicken pox
- d) Rubella

4. A 4 years old unvaccinated child presents in emergency room with complaints of unable to open the mouth for 2 days and recurrent tonic contractions of body for 1 day. On clinical examination patient is conscious but there is lock jaw and recurrent tonic contractions of whole body with arching which are provoked by touch and loud sound. Among which of the following is the most likely possibility?

- a) Tetanus
- b) Hypoglycaemia
- c) Hypocalcemia
- d) Strychnine poisoning
- e) Meningitis

5. A 2 years old child presents with complaint of not gaining weight. On clinical examination his weight is 6.2kg, height is 72cm with generalized loss of muscle bulk. What average growth parameters are expected at this age?

- a) Weight 9kg and height 75cm
- b) Weight 10kg and height 70cm
- c) Weight 12kg and height 85cm
- d) Weight 10kg and height 95cm

7. A 2 year old girl presents to doctor with high grade fever for one week associated with...
 8. A 9 year old boy comes to outdoor with complaints of fever for 10 days. Fever is high grade...
 9. A 2 years old child comes to outdoor for evaluation. According to his mother he is not gaining weight...

10. A 2 year old child presented with recurrent infections, delayed milestones. O/E he is having broad wrists and genu valgum. Investigations showed ca 6.9 mg/dl, increased parathyroid hormone decreased 1,25(OH)₂D, normal 25(OH)D. The treatment of this child include?

11. A 2 year old child presents to doctor with high grade fever for one week associated with...
 12. A 2 year old child presents to doctor with high grade fever for one week associated with...
 13. A 2 year old child presents to doctor with high grade fever for one week associated with...

- a) Blood culture
- b) Stool culture
- c) Urine culture
- d) Liver biopsy
- e) Widal test

14. A 2 years old child comes to outdoor for evaluation. According to his mother he is not gaining weight. He is on cow's milk with half dilution since birth with poor weaning. On clinical examination her weight is 6.5kg and height is 78cm. He has generalized muscle wasting and loss of subcutaneous fat with protuberant abdomen and no edema. He is active and alert with good appetite. Among which of the following is the most likely possibility.

- a) Marasmus
- b) Kwashiorkor
- c) Cellac disease
- d) Rickets

15. According to Gomez classification degree of malnutrition is classify as 3rd degree when:

- a) Weight of the child is 80% of expected weight
- b) Weight of the child is < 60 of the expected weight
- c) Weight of the child is 75% of the expected weight
- d) Weight of the child is 70% of the expected weight

16. A 2 year old child presented with recurrent infections, delayed milestones. O/E he is having broad wrists and genu valgum. Investigations showed ca 6.9 mg/dl, increased parathyroid hormone decreased 1,25(OH)₂D, normal 25(OH)D. The treatment of this child include?

- a) Vit D
- b) Phosphate
- c) Sun exposure
- d) Fish liver oil
- e) Vit D and calcium

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11. A 9 months old child presents with complaints of severe cough for the last 10 days and respiratory difficulty for one day. His mother tells that he is unvaccinated and cough used to be severe, comes in the form of episodes and associated with post tussive cyanosis and vomiting. His provisional diagnosis is pertussis. Which one of the following is true for post exposure prophylaxis of household contacts?

- a) A macrolide agent should be given to all household contacts and other close contacts
- b) post exposure immunoglobulin should be given
- c) Rifampacin should be given to all household contacts
- d) There is no role of post exposure vaccination

12. A baby has just started crawling and there is eruption of two teeth. His hand circumference is 15cm. The most likely age of the child is?

- a) 6 months
- b) 9-10 months
- c) 1 year
- d) 18 months
- e) 12 months

13. A 3 years old child comes to outdoor with complain of weakness of lower limb for one week. Child is unvaccinated and weakness is more in left side as compared to right side. You are suspecting poliomyelitis. Which of the following investigation is confirmatory for poliomyelitis?

- a) Bone marrow biopsy
- b) MRI spine
- c) CSF culture
- d) Stool culture
- e) Blood culture

14. Severity of malnutrition can be classified by different classification system by using clinical parameters like weight for age, height for age and presence of edema. Among which of the following height for weight is used to classify malnutrition?

- a) Gomez classification
- b) Water low classification
- c) Welcome classification
- d) Harvard classification
- e) Primary classification

15. Marked anterior cervical lymphadenopathy leading to the development of bull neck appearance is the feature of?

- a) Mumps
- b) Rubella
- c) Measles
- d) Diphtheria
- e) Chicken pox

16. Which one of the following is not a preventive measure for enteric fever?

- a) Protection of hand drinking water
- b) Frequent hand washing and other hygienic practices.
- c) Frequent use of antibiotics
- d) Frequent use of disinfectants

17. A 35-year-old male presents with weakness of lower limb for 4 days. It is sudden in onset and associated with severe myalgias, low grade fever and urinary brownish discoloration. On physical examination power in right limb is 1/5 and in left limb it is 3/5. All the reflexes are intact and there is hypotonic with absent deep tendon reflexes and plantar responses. Which one of the following is most likely possibility?

- a) Guillain-Barre syndrome
- b) Paralytic poliomyelitis
- c) Myasthenia gravis
- d) Hereditary sensory motor neuropathy

18. A 2 months old child presents with cough and respiratory difficulty for 2 weeks. It has started with cough 2 weeks back which is severe and comes in the form of bouts followed by post-tussive vomiting. Child was otherwise well in between the bouts of cough. For the last 3 days there is breathing difficulty with poor feeding and increased severity of cough. Patient is unvaccinated also. Which one of the following is the most likely possibility?

- a) Bronchiolitis
- b) Croup
- c) Pertussis with secondary pneumonia
- d) Allergic rhinitis
- e) Asthma

19. A couple has brought their 9 months old baby for routine immunization. The vaccine that is not given is:

- a) MMR
- b) Pneumococcal
- c) Measles
- d) Pentavalent (DTP, Hep. B, Hib)

20. The vaccine use in EPI programme against tetanus is

- a) Killed
- b) Inactivated
- c) Toxoid
- d) Live attenuated

21. Among which of the following growth parameters are used to classify malnutrition in Gomez classification?

- a) Weight according to height
- b) Weight according to age
- c) Height according to age
- d) Weight and edema
- e) Height and edema

22. A 2 years old child comes to you in outdoor with complaint of progressive pallor and failure to thrive. On clinical examination he is pale with generalized muscle wasting and loss of subcutaneous fat. Your diagnosis is primary malnutrition. Among which of the following clinical sign is commonly used to differentiate between marasmus and kwashiorkor?

- a) Mid arm circumference
- b) Skin fold thickness
- c) Edema
- d) Oral ulcers and stomatitis
- e) Xerosis

23. Koplik spots are discrete red lesions with bluish white spots in the center on the inner aspects of the cheeks at the level of the premolars. This is the pathognomic sign of

- a) Diphtheria
- b) Chickenpox
- c) Mumps
- d) Measles
- e) Scarlet fever

24. Vaccine against which of the following disease is live attenuated?

- a) Tetanus
- b) Diphtheria
- c) Hepatitis B
- d) Measles
- e) Pertussis

25. Deficit in weight for height in a 3 years old child indicate?

- a) Acute malnutrition
- b) Chronic malnutrition
- c) Concomitant acute and chronic malnutrition
- d) Under weight

26. Severity of malnutrition can be classify by different classification system by using clinical parameters like weight for age, height for age and presence of edema. Among which of the following edema is used to classify malnutrition?

- a) Gomez classification
- b) Water low classification
- c) Welcome classification
- d) Harvard classification

27. A 9 month old child admitted in ward with complaint of fever 4 days back and extensive cry for last two days, mother noticed child was not moving left leg, according to mother the child is partially vaccinated, what is most most likely diagnosis ?

- a) Spinal polo
- b) Bulbar polo
- c) Bulbospinal polo
- d) GBS

29. A 4-year-old boy presents in clinic with swelling of face for 2 days associated with low grade fever. On examination there is obliteration of angle of jaw bilaterally and swelling is soft.

- What is the most likely diagnosis?
- Measles
 - Scarlet fever
 - Scarlet fever
 - Scarlet fever
 - Scarlet fever

30. Complications of diphtheria include all of the following except:

- Menigitis
- Otitis and Oropharyngitis
- Pancreatitis
- Cardiac involvement
- Giant cell pneumonia

31. A 5-year-old girl comes to outdoor with history of low grade fever 5 days back that lasted for 3 days. Then she developed an erythematous macular rash, that started from face and neck and gradually involve torso and extremities. On examination suboccipital, postauricular and anterior cervical lymph nodes are also prominent. What is your diagnosis?

- Measles
- Scarlet fever
- Rubella
- Erythema toxicum
- Chicken pox

32. A 3-year-old previously well boy comes to clinic with complaint of low grade fever and a vesicular rash all over the body for 4 days. Your diagnosis is varicella zoster virus infection. Among which of the following is not true for it?

- Varicella is a vaccine preventable disease.
- Varicella vaccine contains live, attenuated VZV and is indicated for subcutaneous administration.
- The complications of VZV infection occur more commonly in immunocompromised patients.
- Acyclovir therapy is recommended routinely for treatment of uncomplicated varicella.
- Varicella vaccine is recommended for routine administration as a 2-dose regimen to healthy children at ages 12-15 mo and 4-6 yr.

32. Among which of the following is not the site of lesion for poliomyelitis?

- Anterior horn cells
- Lower motor neuron
- Brain stem
- Upper motor neuron
- Brain parenchyma

32. Which one is the most common type of poliomyelitis?

- a) Inapparent infection
- b) Abortive poliomyelitis
- c) Non-paralytic poliomyelitis
- d) Paralytic poliomyelitis

31. What is the correct method of taking stool culture for the diagnosis of Poliomyelitis

- a) A minimum of 4-5g of stool should be collected.
- b) 2 stool specimens should be collected 24-48 hr apart as soon as possible.
- c) Single specimen of 10g stool is collected
- d) 2 stool specimens should be collected 72hrs apart.

33. Among which of the following is a life threatening complication of malnutrition?

- a) Loss of muscle bulk
- b) Poor weight gain
- c) Hypoglycemia
- d) Motor delay
- e) Dermatitis

34. ReSoMal is an oral rehydrating solution for malnourished children which contain

- a) High potassium
- b) Low potassium
- c) High sodium
- d) High lactate
- e) Low chloride

Assessment of dehydration in a malnourished child should be done by following clinical parameter

- a) Sunken eyes
- b) Weight loss
- c) Low skin elasticity
- d) Urine out put
- e) Depressed anterior fontanel

36. Which one is not the feature of kwashiorkor?

- a) Dermatitis
- b) Loss of muscle bulk
- c) Hair changes
- d) Loss of subcutaneous fat
- e) Edema

17. Which one of the following is centrophere weight gain for the discharge criteria of a malnourished child?

- a) Weight gain should be 20% of body weight per day
- b) Weight gain should be 10% of body weight per day for 3 consecutive days
- c) Weight gain should be 5% of body weight per day for 3 consecutive days
- d) Weight gain should be 10% of body weight per day for 2 consecutive days

18. Among which of the following current parameter is recorded to document growth of a child?

- a) Motor skills
- b) Speech
- c) Fine motor skills
- d) Weight and height
- e) Social skills

19. Bitots spots develop due to deficiency of which micronutrients?

- a) Vitamin D
- b) Vitamin A
- c) Vitamin E
- d) Vitamin C

20. A 2 years old boy comes to you in out door with increased size of head. On examination child is developmentally normal and has short stature, protuberant abdomen and bowing of legs. Anterior fontanel is still open. What is your impression.

- a) Hydrocephalus
- b) Rickets
- c) Storage disorder
- d) Skeletal dysplasia

21. What does activated form of vitamin D do in the body?

- a) Release of calcium from the bones.
- b) Absorption of calcium from intestine
- c) Secretion of hydrogen ion in the renal tubules
- d) Secretion of phosphate in the renal tubules

22. Which one of the following is not the radiological feature of rickets?

- a) Cupping and fraying of epiphyseal end of radius and ulna
- b) Osteopenia
- c) Thin cortex
- d) Egg shell like appearance epiphyseal centre

23. Pincer grasp comes at

- a) 4 months
- b) 6 months
- c) 9 months
- d) 18 months
- e) 15 months

44. Deficiency of which vitamin caused Pellagra?

- a) Vitamin A
- b) Vitamin B2
- c) Vitamin B3
- d) Vitamin B12
- e) Vitamin B6

45. Severe bone pain and skin bleed is the feature of which vitamin deficiency

- a) Vitamin K
- b) Vitamin D
- c) Vitamin E
- d) Vitamin C
- e) Vitamin B1