

Class test # 01 (2019-2020)

Done

MCQs Total 20

Time Allotted 20minutes

1. A 6 years old girl came to pediatric out door with complaint of generalized body edema for the last 7 days associated with headache and vomiting. On physical examination patient is hypertensive with B.P of 130/90 mm of Hg. Your provisional diagnosis is Acute Poststreptococcal Glomerulonephritis. Which one of the following is not its feature?

- a) Urine analysis would reveal no RBCs cast ✓
- b) C3 level will be low in the acute phase and returns to normal 6-8 wk after onset.
- c) A 10-day course of systemic antibiotic therapy with penicillin is recommended
- d) AGN follows infection of the throat or skin by certain "nephritogenic" strains of GAS.
- e) Proteinuria is a consistent feature

2. A 3 years old girl comes to outdoor with low grade fever for 3 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. The most likely diagnosis is

- a) Measles
- b) Scarlet fever
- c) Steven Johnson syndrome
- d) Chicken pox ✓
- e) Rubella

3. A 3 year old girl presents in outdoor with high grade fever for one week associated with cough, coryza and conjunctivitis. Now for the last 2 days she has developed an erythematous, confluent and non-itchy rash all over the body which started from the face. Which one of the following is most likely possibilities?

- a) Allergic rash
- b) Scarlet fever
- c) Chicken pox
- d) Rubella
- e) Measles ✓

4. A couple has brought their 9 months old baby for routine immunization. The vaccine due at this age is

- a) MMR
- b) Pneumococcal
- c) Hepatitis B
- d) Measles ✓
- e) Pentavalent (DTP, Hep. B, HiB)

5. A mother asks whether her child will never get any disease against which he is being vaccinated? Your response is:

- a) No vaccine is 100% protective, but does help to decrease disease severity, if it occurs at all. ✓
- b) Only BCG gives 100% protection.
- c) Only Pneumococcal vaccine is 100% effective.
- d) Only Measles vaccine provides 100% protection.
- e) Measles vaccine is 100% protective if 2 doses are given.

6. A 3.5 years old child presents with generalized body edema and decreased passage of urine. After detailed history your provisional diagnosis is nephrotic syndrome. Which one of the following is the feature of nephrotic syndrome?

- a) Hypoalbuminemia ✓
- b. Hematuria
- c. Hypertension
- d. Deranged renal functions
- e. Hypocomplementemia

7. Marked anterior cervical lymphadenopathy leading to the development of bull neck appearance is the feature of?
- Mumps
 - Rubella
 - Measles
 - Diphtheria ✓
 - Chicken pox
8. A 3 year previously well boy comes to with complain 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 age 12-15 months and 4-6 yr.
9. Six weeks old infant presented to you for the first time for immunization. Which one is the appropriate regime of immunization at this age.
- OPV+DPT+HBV+HiB+ PCV
 - OPV+DPT+HBV+HiB
 - BCG+OPV
 - HBV+DPT+HiB
 - OPV+DPT+HBV+HiB+ Rota ✓
10. A 5 years old boy comes to outdoor with sore throat for the last 5 days. On examination of throat there is whitish grey membrane in oropharynx which is difficult to remove. What will be your next step of management?
- It is self resolving condition, just counsel the parents.
 - Admit the patient and give supportive care
 - Admit the patient in isolation and give broad spectrum antibiotics.
 - Admit the patient in isolation and give specific antitoxin and recommended antibiotics.
 - Give oral erythromycin for 5 days
11. The vaccine use in EPI program against tetanus is?
- Killed
 - Inactivated
 - Toxoid ✓
 - Live attenuated
 - Polysaccharide
12. A 4 years old boy comes to you with history of low grade fever and swelling involving both side of face obliterating angle of jaw. The most likely diagnosis is mumps. Among which of the following is not the complication of mumps
- Meningoencephalitis
 - Orchitis and Oophoritis
 - Pancreatitis
 - Sensorineural hearing loss
 - Giant cell pneumonia ✓
13. All are seen in minimal change nephritic syndrome except
- Albuminuria
 - Hypoalbuminemia
 - Edema
 - Hypocomplementemia ✓
 - Hyper cholestremia
14. A 5 year old boy suffering from nephrotic syndrome is responding well to steroid therapy. Most likely finding on light microscopy is
- No finding ✓
 - Basement membrane thickening
 - Hypercellular glomeruli
 - Fusion of foot processes
 - Ig A deposited in mesengium.
- Minimal change disease*

15. A 9 years old girl came to you with complaints of body swelling and passage of dark cola color urine for three days. Your diagnosis is Acute Post streptococcal Glomerulonephritis. Among which of the following statement is not true regarding its management?

- a. A 10-day course of systemic antibiotic therapy with penicillin is recommended.
- b. Sodium restriction should be done
- c. Diuresis with intravenous furosemide may be needed
- d. Prednisone should be administered at a dose of 60 mg/m^2
- e. Single dose of I/M benzathine penicillin

16. Proteinuria is a consistent feature Children with persistent proteinuria should have been evaluated with the more precise measures like Spot urine protein: creatinine ratio (UPr: UCr). What is nephrotic range for this ratio?

- a) A ratio >0.2 suggests nephrotic-range proteinuria
- b) A ratio >0.5 suggests nephrotic-range proteinuria
- c) A ratio >2 suggests nephrotic-range proteinuria
- d) A ratio >1 suggests nephrotic-range proteinuria
- e) A ratio > 1.5 suggests nephrotic-range proteinuria

above 3

17. All are seen in minimal change nephritic syndrome except

- a) Albuminuria
- b) Hypoalbuminemia
- c) Edema
- d) Hypocomplementemia
- e) Hyper cholestremia

18. A 5 year old boy suffering from nephrotic syndrome is responding well to steroid therapy. Most likely finding on light microscopy is

- a) No finding
- b) Basement membrane thickening
- c) Hypercellular glomeruli
- d) Fusion of foot processes
- e) Ig A deposited in mesangium.

19. Following are indications of dialysis except

- a) Hyperphosphatemia
- b) Persistent hyperkalemia
- c) Oliguria/anuria
- d) Uremia
- e) Severe metabolic acidosis not responding to medication

20. Six month old child brought to OPD by mother with history of dry and hacking cough for last 3 days. This burst of interrupted cough follows a loud whoop. Mother also gives the history of running nose and low grade fever. Which of the following is appropriate treatment for this patient?

- a) Nebulize patient with ipratropium
- b) Start intravenous steroids
- c) Azithromycin is appropriate drug for this condition
- d) Give antitussive to patient
- e) Patient with this conditions are not need to be isolated