

PEDIATRIC MEDICINE

(SEQ'S)

Time Allowed: 2 hours & 15 Minutes

Roll No. 1216

Total Marks: 45

Instructions

1. The SEQ's part is to be submitted within 2 hours & 15 minutes. Extra time will not be given.
2. Neat Hand Writing use of margin and marker for headlines will increase the presentation of your paper.
3. Do not write your name or disclose your identity in any way.

1. A 7 years old boy comes to outdoor with history of high grade intermittent fever for the last 2 week. There is also history of anorexia, malaise, abdominal pain and occasional vomiting. On clinical examination child is febrile, toxic with hepatosplenomegaly.

- a) Give two differential diagnoses. (1) *Typhoid & Malaria*
- b) How will you investigate him further? (2)
- c) Give steps of management (2) *220 Book*

2. A known case of asthma presents in emergency department with acute severe attack of asthma. He also has the history of worsening of the symptoms for the last 2 months. Now he has >2 per week of day symptoms and >2 per month of night symptoms.

- a) What class of asthma now he has? *Mild Persistent* (1)
- b) How will you manage his acute attack? (2)
- c) Regarding long term management how will you step up his treatment? (2)

3. A 2 years old child presents in outdoor with complaint of not gaining weight. On physical examination his weight is 6kg and length is 75cm. He has generalized loss of muscle bulk and loss of subcutaneous fat with poor dentition. Otherwise he is alert and has good appetite.

- a) According to Gomez classification which degree of malnutrition he has? (1)
- b) Describe any two classification system for malnutrition. (2)
- c) Discuss steps of management. (2)

4. A 10 year old girl received in emergency room in state of generalized tonic clonic fit associated with frothing and urinary incontinence for the last 10 minutes. She was alright before this episode with no history of fever, headache or vomiting. According to her father she had same episode of fit 3 months back and was alright afterward with no focal deficit.

- a. What is the diagnosis? *Epilepsy* (1) *344 UMS*
- b. How will you manage this episode of fit? (2)
- c. What is the long term management? (2)

5. A one day old male baby, delivered through caesarean section, admitted in NICU with history of respiratory difficulty since birth. On examination he is oxygen dependent and his respiratory rate is 80/minute with grunting and intercostal recessions. AECs showed respiratory acidosis.

Transient Tachypnea of the newborn

- a) What is most likely diagnosis? (1)
- b) Give two differential diagnoses. (1)
- c) What other investigations you would like to do? (1)
- d) What are treatment options? (2)

186 Book

Repeat

6. Previously healthy 7 years old girl presented in OPD with history of poor school performance and excessive weight gain for last 3 months, she has dry course skin, her weight is 32 kg, and Height is below 5th percentile.

- a. What is the likely diagnosis? (1)
- b. Write down important investigations to reach the diagnosis? (2)
- c. Give steps of treatment? (2)

Repeat

7. A 3 years old child presented in outdoor with complaints of body edema for 4 days. On examination he has puffiness of eyes and marked periorbital edema. There is bilateral decreased air entry in chest and evidence of free fluid in peritoneal cavity. The CXR is normal and there is no skin rash or hematuria.

- a) What is the most likely possibility? (1)
- b) How will you investigate? (2)
- c) Give your treatment plan? (2)

Nephrotic syndrome

388 UHS

Repeat

8. A 5 year old girl presented in OPD with complaint of off and on fever for one month, multiple joint pain involving small and large joints with restricted movement and morning joint stiffness, on examination she is febrile, multiple oral ulcers, erythematous rash over face, involved joints are hot, tender and erythematous.

- a) Write down two differential diagnoses? (1)
- b) Write important investigations to reach the diagnosis? (2)
- c) What are treatment options? (2)

RF, JRA

or

9. A 6 years old boy comes out door with complaint of fever for one month. Fever is low grade, intermittent and associated with easy fatigability, malaise and weight loss. On examination child is thin lean with obvious hyperpigmentation of skin and oral mucosa. He has low blood pressure and low glucose level.

- a) What is most likely diagnosis? (1)
- b) How will you investigate him? (1)
- c) Give your treatment plan? (2)

Kawasaki

360 UHS