5. Contraindication of lumbar puncture include all of the following except

- Raised intracranial pressure
- b. Cardiopulmonary compromise
- Bleeding diathesis
- d. Irritable child
- e. Infection at the site of skin
- 6.A 4years old boy comes to you with complaint of short stature. On clinical examination he has disproportionate short stature. He has short lower limbs, dry coarse skin. His weight is 25 kg Which one is the most likely possibility?
 - a. Hypothyroidism
 - Achondroplesia
 - c. Vitamin D deficiency
 - d. Familial short stature
 - e. Growth hormone deficiency
- 7. Two year old boy presents with generalized tonic colonic seizures with no fever. He is hypertonic and has brisk tendon reflexes. CSF examination is unremarkable. There is history of fetal distress and delayed cry at birth. The most likely diagnosis is
 - a. Birth asphyxia
 - b. Meningitis-
 - c. Hypocalcemia
 - d. Intracranial bleed
 - e. Cerebral palsy
- 8. A mother is worried about the pustular lesion that has developed 4 wks after his BCG
 - a. Prescribe oral antibiotic for 5 days.
 - b. Prescribe topical antiseptic.
 - c. Order workup for TB.
 - d. Just reassure the mother about its benign nature in which no treatment is needed.
- 9. Appropriate treatment for a one year old child with acute watery diarrhea, vomiting & 'severe'
 - a. I/V Ringer's Lactate 100ml/kg
 - b. I/V anti emetic injection followed by ORS
 - c. Sip wise ORS 75ml/kg over 4 hrs
 - d. Rehydration by nasogastric tube
 - e. Frequent breast feeding
- 10. Antenatal diagnosis of down syndrome is possible by all of following except
 - a. Alpha fetoprotein,
 - b. HCG.
 - c. Unconjugated estriol
 - d. Fetal nuchal translucency (NT) thickness by ultrasound
 - e. Serum progesterone



- 11. A mother asks whether her child will never get any disease against which he is being vaccinated ? Most appropriate response is:
 - a. No vaccine is 100% protective, but does help to decrease disease severity, if it occurs at
 - b. Only BCG gives 100% protection.
 - Only Pneumococcal vaccine is 100% effective.
 - d. Only Measles vaccine provides 100% protection.
 - e. Measles vaccine is 100% protective if 2 doses are given.
- 12. Anthropometric assessment of nutrition can be done by all of following except?
 - a. Wt. length/ height
 - Measurement of leg length
 - Mid upper arm circumference
 - d. Skin fold thickness
 - e. Weight only
- 13. One year old male child admitted in ward with complaint of recurrent cough fever and breathing difficulty on examination child was febrile and tachypenic and dysmorphic facies further examination reveal pansystolic systolic murmur at 2nd left intercostals area. What is the most common cardiac lesion in this condition?
 - a) Atrial septal defect
 - b) Ventricular septal defect
 - c) Atrioventricular defect
 - d) Patent ducts arteriousis
 - e) TOF
- 14. All of the following are benefits of breastfeeding except?
 - Breast milk provides the ideal nutrition for infants
 - b. It has a nearly perfect mix of vitamins, protein, and fat
 - c. Infant formula milk is more easily digested than breast milk
 - d. Breast milk contains antibodies that help baby fight off viruses and bacteria
 - e. Easy availability
- 15. A 5years old girl presents in OPD with high grade fever and rash for the last 3days. On clinical examination she has congested throat, a generalized erythematous sand paper like rash and red congested strawberry tongue. Which one of the following is most likely possibility?
 - a. Measles
 - b. Scarlet fever
 - c. Chicken pox
 - d. Utricaria
 - e. Rubella

- a) Polio can be prevented by vaccine
- b) There is complete cure of polio
- c) Deformities of the spine (such as scollosis) can occur in poliomyelitis
- d) Injectable vaccine is more effective than oral vaccine
- e) No specific treatment is available of pollomyelitis
- 17. A child has respiratory distress for 2 days, progressively increasing. There is mild fever. On examination heart rate is 130/min, respiratory rate 50/min, poor pulses, liver 4 cm palpable below costal margin. Chest x ray show cardiomegaly and pulmonary edema. What is the most likely diagnosis
 - a. Congestive cardiac failure
 - b. Pneumonia
 - c. Dilated cardiomyopathy
 - d. Pericarditis
 - e. Suraventricular tachycardia
- 18. Most common association of Meningomylocele are all of following except?
 - a. Club foot
 - b. Congenital heart disease
 - c. Dysplasia of hip joint
 - d. Hydrocephalus
 - e. Absent radius
- 19. Simple febrile seizures are describe as?
 - a. Seizures without fever
 - b. Seizures with fever lasting less than 15 minutes
 - c. Seizures with fever lasting more than 15 minutes
 - Seizures with fever and loss of consciousness.
 - e. Seizures with fever and post ictal sleep
- 20. The recurrence risk of disease in autosomal recessive disorders in each pregnancy is?

 - b. 25%
 - c. 50%
 - d. 100%
 - e. 40%
- 21 .A three year old is found unconscious in his family's tool shed. He is tachypneic, coughing, and cyanotic and he has rales in both lung fields. His breath smells like gasoline. The best a. Give Ipecac

 - b. Perform gastric lavage
 - Begin Antibiotics
 - d. Begin steroids
 - e. Begin Oxygen

- 27. Among which of the following vaccine is not a live attenuated one?
 - a. BCG
 - b. MMR
 - c. OPV
 - d DPT
 - e. Varicella vaccine
- 28. A 9years old girl came to you with complaints of body swelling and passage of dark colar prime for the property of the pro color urine for three days. Your diagnosis is Acute Poststreptococcal Glomerulonephritis. Among which of the following statement is not true regarding its management?
 - A 10-day course of systemic antibiotic therapy with penicillin is recommended.
 Sodium and the systemic antibiotic therapy with penicillin is recommended.
 - b. Sodium restriction should be done
 - Diuresis with intravenous furosemide may be needed
 - d. Prednisone should be administered at a dose of 60 mg/m²/day
 - e. Single dose of I/M bezathine penicillin
- 29. A 10years old boy is on your regular follow-up with diagnosis of Moderate persistent asthma. He is going well with his long term management. How much duration is required to step down his long term management?
 - a. At least 3 months
 - b. At least 6 months-
 - At least 12months
 - d. At least 9 months
 - e. At least 10months
- 30. Among which of the following is not a complication of acute renal failure
 - a) Metabolic acidosis.
 - b) Hypocalcemia
 - c) Volume overload
 - d) Hypophosphatemia
 - e) Hyperkalemia
- 31. Six years old child presented with the history of headache and vomiting for 6 hours and altered sensorium for 1 hour. He had seizures in Emergency department .On examination he is toxic looking, febrile, and neck stiffness present. He is noted to have 6th cranial palsy. A provisional diagnosis of Menigitis is made. Which would be the most effective antibiotic therapy
 - a) Benzyl penicillin and gentamycin
 - b) Azithromycin and vancomycin
 - c) Ceftriaxone and vancomycin
 - d) cefuroxime and ceftriaxone
 - e) Ciprofloxacin and ceftriaxone

- 22 A 2 years old child presented with delayed walking. On examination there is sciesofing posture of lower limbs and child walks on toes. There are brisk tendon reflexes and ankle clorus is positive. What is most likely diagnosis
 - Spastic quadriplegia
 - Spastic hemiplegia
 - Dystonic cerebral palsy
 - d. Atonic cerebral palsy
 - e. Spastic diplegia.
- 23. A six week old infant has repeated non billious vomiting. He is Hungary afterwards and chinks eagerly and losing weight. Labs show hypochloremic metabolic alkalosis. What is the most likely diagnosis
 - Duodenal atresia
 - Maintation of gut
 - Gastroesophageal reflux disease
 - d. Pylonic stenosis
- 24. A 4years old child comes to you with complaint of delayed speech. According to mother he is not able to speak a single meaningful word but his hearing is intact. He is not triangly with others and prefers to play alone with his favorite toy. On clinical examination his growth parameters are normal with normal motor skills but he does not give proper bye contact. Among which of the following is the most likely diagnosis?
 - a) Attention deficit hyperactive disorder
 - b) Aufism
 - c) Dyslexia
 - d) Encopresis
- 25. An 8 years old boy presented in emergency having respiratory distress with audible wheeze. There is H/O similar episodes for last 3 years. The first step in management is
- a) ly Antibiotics
 - b) IV steroids
 - c) IV Aminophyline
 - d) Mechanical ventilation
 - e) Inhaled bronchodilators
- 26.A three years old child is diagnosed as a case of iron deficiency anemia. Which of the following Lab abnormality is expected:
 - a)Increased Retic Count
 - b)Increased MCV
 - c)Decreased platelets
 - d)Decreased RDW
 - e)Increased RDW

- 32. You are evaluating a 2 year old child with beta thalassemia major, He is on chronic transfusion therapy since 1 year of age. You suspect transfusion induced hemosiderosis. Of the following, the organ that is most likely to be affected by iron deposition is
 - a. Liver
 - b. Pancrease
 - c. Heart
 - d. Pituatary gland
 - e. Thyroid gland
- 33. A three years old girl presented with h/o high fever and coryza for 5 days. O/E she is toxic looking with generalized maculopapular rash. Her elder brother had same complaints two weeks back. Which of the following signs is characteristic of the disease
 - a) Sand paper rash
 - b) Strawberry tongue
 - c) kopliks spot
- 34.A Medical Officer found a baby having yellowish discoloration of Skin & Sclera on Day 4 of life, while having round of Obstetric ward. On investigation, his mother's blood Group was found to be B +Ve. Most likely cause of Jaundice is;
 - a. ABO incompatibility
 - b. Rh Incompatibility
 - c. Criggler-Najar Syndrome
 - d. Physiological Jaundice
- 35. 8 years old boy presented with fever and bruises for last 2 weeks. On examination he is pale however there is no lymphadenopathy or hepatosplenomegaly. His Hb is 6 gram/dl, TLC 2700 and platelets count is 90000. The next most appropriate investigation to reach the diagnosis is:
 - a. Bone marrow aspiration
 - Bleeding time
 - c. Bone marrow aspiration and Biopsy
 - d. PT and APTT
- 36. Thirteen years old male child presents in emergency with c/o polyuria for one week. Vomiting and abdominal pain for two days, drowsiness for two hours. O/E temp 101 0F, R/R 38/min, H/R 90/min. Systemic examination is normal . Random blood sugar is 590 mg/dl .which of the following is first immediate treatment option in this patient.
 - a) Correction of metabolic acidosis
 - b) Intravenous fluids normal saline only
 - c) Intravenous fluids normal saline and insulin
 - d) Antibiotics
 - e) Correction of electrolytes imbalance

- 42. Indications of dialysis in acute kidney injury include all of the followings except
 - a. Anuria/oliguria
 - b. Persistent hypercalcemia
 - c. Severe metabolic acidosis
 - d. Volume overload
 - e. Blood urea nitrogen >100-150 mg/dl
- 43. A previously healthy 8-year-old boy has a 3-week history of low-grad fever of unknown source, fatigue, weight loss, mylagia and headache. On examinations during this time, he have heart murmur, petechiae, and mild splenomegaly. The most likely diagnosis is
 - Universal immunization Rheumatic fever
 - b. Kawasaki disease
 - c. Scarlet fever
 - d. Endocarditis
 - e. Tuberculosis
- 44. Four Months Old Infant is having Respiratory Distress & Sweating during Feeding. What is most likely Diagnosis?
 - a. ASD
 - b. Aortic Stenosis
 - c. PDA-
 - d. Cardiomyopathy
 - e. Patent Forman Oval
- 45.A 1 month old male has had noisy breathing since birth. He is worse when supine. The physical examination reveals retractions and inspiratory stridor. The most likely diagnosis is
 - a. Diaphragmatic Hemia
 - b. Tracheoesophageal fistula
 - c. Laryngomalacia
 - d. Choanal Atresia
 - e. Vocal Cord Paralysis

- 37 .Two years old female child presented in OPD with pallor. Investigations show HB 7.6 g/dl, serum femitin 1.4 ng/dl and TIBC 595 pg/ltr. Her liver is palpable 2cm below costal margin, which of the the following would be best treatment
 - a) Transfuse whole blood
 - b) Transfuse Packed cells
 - c) Platelets transfusion
 - d) Oral iron supplements
 - e) Intravenous furosemide
- 38. 32 A 7 months old child presented with high grade fever for 4 days and multiple episodes of vomiting. On examination he is toxic, febrile having bulging anterior fontanele. The best diagnostic test will be.
 - a) CT Brain
 - b) MRI Brain
 - c) CSF Analysis
 - d) Blood C/S
 - e) Cranial Ultrasound
- 39. A baby is born to a mother who is a patient of Hepatitis B. The parents are concerned about the baby getting the disease. What preventive measures are likely to be helpful? (which statement is true)
 - a. Vaccinate the baby at birth
 - b. Hepatitis B Immunoglobulins at birth
 - Preventive measures effective even after 4 days of life
 - d. Vaccinate the mother just before delivery
 - e. Start Lamivudine in baby
- 40. Ten years old girl with 2 days history of vomiting fever and abdominal pain. She is severely dehydrated and comatosed. Diagnosed as diabetic ketoacidosis. The following are main features of diabetic ketoacidosis except
 - a. Hyperglycemia (glucose usually > 300 mg/DL)
 - b. Ketonemia (serum ketones > 3 mmol/L)
 - c. Ketonuria
 - d. Venous pH > 7.2 (true)
 - e. Serum bicarbonate < 15 mEq/L
- 41.A premature neonate presented with cyanosis and respiratory distress. CXR showed air brenchogram and ground glass appearance. Septic screen is normal. What is the diagnosis.
 - Transient tachypnea of newborn
 - b. Respiratory distress syndrome
 - c. Pneumothorax
 - d. Peumonia
 - e. Heart failure

Final year MBBS Send up 2021

Paediatric Medicine (Theory) MCQs

Max. Marks 45

Time Allowed 45minuts

1.A 6years old girl comes to you in Opd with history of recurrent UTI. You want to evaluate her for presence of vesicoureteric reflex. Which one of the following imaging studies is used to confirm it?

- a. DMSA scan
- Abdominal ultrasonography
- c. Voiding cystourethrogram
- d. IVU
- e. DTPA
- 2. A developmentally normal child, who is just able to sit without support, transfer objects from hand to hand and speaks in a monosyllabic babble, is probably what age?
 - a. 3 Months
 - b. 4 Months
 - c. 9 Months
 - d. 6 Months
 - e. 11 Months
- 3. One month old baby was brought in OPD with complaint of prolonged jaundice, more sleepy and constipation on examination dry coarse skin and coarse facial features, your clinical suspicion is hypothyroidism, which of the following is screening test performed for hypothyroidism?
 - a. Thyroid ultrasound
 - b. Tecnicium scan
 - c. Only T3
 - d. T4, TSH
 - e. T3, TSH
- 4.A 5years old boy comes to emergency with history fever for 4 days, followed by fits and loss of sensorium for 1 day. On clinical examination patient is pale and comatose. There are positive signs of raised intracranial pressure and hypoglycemia. Which one of the following is most likely diagnosis?
 - a. Encephalitis
 - b. Cerebral malaria
 - c. Brain tumor
 - d. Epilepsy
 - e. Stroke