Final year MBBS Send up 2021

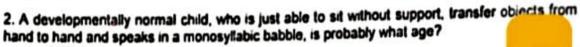
Paediatric Medicine (Theory) MCQs

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
- b. Abdominal ultrasonography
- Voiding cystourethrogram
- d. IVU
- e. DTPA



- a. 3 Months
- b. # Months
- o 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 lest performed for hypothyroidism?

- a. Thyroid ultrasound
- b. Tecnicium scan
- c. Only T3
- T4, TSH
- e. T3. TSH



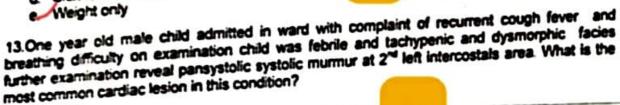
4.A 5years old boy comes to emergency with history fever for 4 days, followed by fits and loss of sensorium for 1 day. On clinical examination patient is pale and comatose. There are positive signs of raised intracranial pressure and hypoglycemia. Which one of the following is most likely diagnosis?

- a. Encephalitis
- b. Cerebral malaria
- c. Brain tumor
- d. Epilepsy
- e. Stroke



5. Contraindication of lumbar puncture include all of the following except a. Raised intracranial pressure b. Cardiopulmonary compromise c. Bleeding diathesis d/Imitable child e. Infection at the site of skin 6.A 4 years 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 b. 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 - Meningitisc. Hypocalcemia d. Intracranial bleed 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. 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 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.
 - c. Only Pneumococcal vaccine is 100% effective.
 - d. Only Measles vaccine provides 100% protection.
 - 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
 - b. Measurement of leg length
 - c. Mid upper arm circumference
 - d. Skin fold thickness
 - e Weight only



- 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

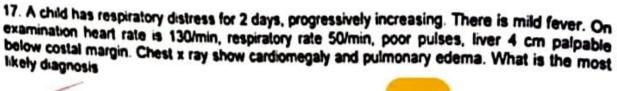
15. A 5years old girl presents in OPD with high grade fever and rash for the last 3days. On clinical examination she has congested throat, a generalized erythematous sand paper like rash and red congested strawberry tongue. Which one of the following is most likely possibility?

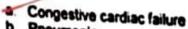
- a. Measles
- Scarlet fever
- c. Chicken pox
- d. Utricaria
- e. Rubella



16. All of the followings are true about poliomyelitis except?

- a) Polio can be prevented by vaccine
- b) There is complete cure of polio
- c) Deformities of the spine (such as scoliosis) can occur in poliomyelitis
- d) Injectable vaccine is more effective than oral vaccine
- e) No specific treatment is available of pollomyelitis





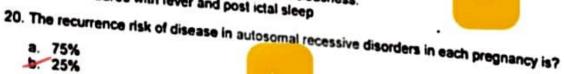
- b. Pneumonia
- c. Dilated cardiomyopathy
- d. Pericarditia
- e. Suraventricular tachycardia



- a. Club foot
- b. Congenital heart disease
- c. Dysplasia of hip joint
- d. Hydrocephalus
- Absent radius



- a. Seizures without fever
- Seizures with fever lasting less than 15 minutes
- c. Seizures with fever lasting more than 15 minutes
- d. Seizures with fever and loss of consciousness.
- e. Seizures with fever and post ictal sleep



- c. 50%
- d. 100%
- 0. 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

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





- 22 A 2 years old child presented with delayed walking. On examination there is scientific posture of lower limbs and child walks on toes. There are brisk tendon referen and anite clarus is positive. What is most likely diagnosis
 - a Spastic quadriplegia
 - b. Spastic hemiplegia
 - c Dystonic cerebral palsy
 - d Atonic cerebral palsy
 - Spastic diplegia.
- 23. A six week old infant has repeated non billious vomiting, the is thurgary alterwards and dinks eagerly and losing weight. Labs show hypochloremic metabolic alkalosis. What is the most likely diagnosis
 - a Duccieral atresia
 - b. Maintation of gut
 - Gastroesophageal reflux disease
 - 4 Pytoric stenosis
- 24. A 4years old child comes to you with complaint of delayed speech. According to mathemise is not able to speak a single meaningful word but his hearing is much the situit friendly 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 eye contact. Among which of the following is the most likely diagnosis?
 - a) Attention deficit hyperactive disorder

 - c) Dyslexia
 - d) Encouresis
- 25. An 5 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) Iv Arabiotics
 - b) IV steroids
 - c) IV Aminophyline
 - d) Mechanical ventilation
 - e) Inhaled bronchodilators
- 26.A three years old child is diagnosed as a case of tron deficiency aremia. Which of the following Lab abnormality is expected:
 - a)Increased Retic Count
 - b)Increased MCV
 - c)Decreased platelets
 - d)Decreased RDW
 - eyincreased RDW





- 27. Among which of the following vaccine is not a live attenuated one?
 - a BCG
 - b MMR
 - c OPV
 - TOPT
 - Varicella vaccine
- 28 A 9years old girl came to you with complaints of body swelling and passage of dark cola color unne for three days. Your diagnosis is Acute Poststreptococcal Glomerulonephras 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 Duresis 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?
 - 2 At least 3 months
 - b At least 6 months
 - c 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
 - e) Ceftnaxone and vancomycin
 - d) cefuroxime and ceftriaxone
 - e) Ciprofloxacin and ceftriaxone





- you are evaluating a 2 year old child with beta thalassemia major, He is on chronic ransfusion therapy since 1 year of age. You suspect transfusion induced hemosiderosis. Of the following, the organ that is most likely to be aff
 - 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
 - d) Rose spots

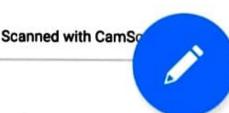
34.A Medical Officer found a baby having yellowish discoloration of Skin & Sciera on Day 4 of life, while having round of Obstetric ward. On investigation, his mother's blood Group was found to be B +Ve. Most likely cause of Jaundice is;

- 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
- b. Bleeding time
- 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







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37 . Two years old female child presented in OPD with pallor. Investigations show HB 7.5 g/d. serum fernitin 1.4 ng/df and TIBC 595 pg/ftr. Her liver is 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 vormiting. On examination he is toxic, febrile having building anterior fortanele. The best diagnostic test will be.

- a) CT Brain
- b) MRI Brain
- CSF Analysis
- d) Blood C/S
- 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)

- Vaccinate the baby at birth
- b. Hepatitis B immunoglobulins at birth
 c. Preventive measures effective even after 4 days of life
- d. Vaccinate the mother just before delivery
- Start Lamivudine in beby

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)
- Ketonemia (serum ketones > 3 mmoVL)
- 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 bronchogram and ground glass appearance. Septic screen is normal. What is the diagnosis.

- a. Transient tachypnea of newtorn
 b. Respiratory distress syndrome
- c Pneumothorax
- d. Peumonia
- e. Heart failure



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