# 1. The following congenital infection is associated with diabetes (type 1) in later life:

#

1. Coxsackie B 3
2. Coxsackie B 4
3. CMV
4. **Rubella \***
5. Mumps

#

2. A 4-year-old boy appears with history of purulent discharge from the left ear for the last 5 days. Past medical history reveals that a tympanostomy tube was placed in his left ear 12 months ago due to recurrent purulent left otitis media. The child is afebrile. He denies any history of headache, dizziness, and vomiting. Physical examination reveals purulent yellowish discharge from the left ear through tympanostomy tube. The most common organism responsible for discharge through tympanostomy tube is: #

1. Staphylococcus aurius
2. **Streptococcus pneumonia \***
3. Staphylococcus epidermidis
4. Pseudomonas aeruginosa
5. Candida albican

#

3. A pregnant mother wanted to know about the contraindications of breast feeding. She is diagnosed with active tuberculosis (TB). Breast-feeding is contraindicated in all of the following maternal conditions except: #

1. Severe neuroses or psychoses
2. AIDS
3. **Mastitis \***
4. Active TB
5. Substance abuse

#

4. A newborn baby girl weights 3.5 kg and her height is 50 cm. Her height will be 100cm at: #

1. 1 year
2. 2 years
3. 3 years
4. **4 years \***
5. 5 years

#

5. Premature babies achieve catch-up growth (weight) about:

#

* 1. 6 months
  2. 12 months
  3. 18 months
  4. **24 months \***
  5. 36 months

#

6. Management of a patient older than 1 year of age with a foreign body aspiration. All of the following statements are true except:

#

* 1. **First, a blind sweep of mouth should be performed \***
  2. Place them on their back
  3. Rescuer kneels next to patient
  4. Perform 6 to 10 abdominal thrust using heel of one hand, pushing upward and inward from midabdomen, midway between umbilicus and rib cage. If this fails, victim’s mouth should be opened by using tongue jaw lift and a visualized foreign body should be removed.
  5. Rescue breathing should be repeated before next abdominal thrust.

#

7. Normal caloric contents in each gram of protein, carbohydrate, and fat:

#

* 1. 4 Kcal protein, 4 Kcal carbohydrate, 4 Kcal fat
  2. 6 Kcal protein, 6 Kcal carbohydrate, 9 Kcal fat
  3. 4 Kcal protein, 5 Kcal carbohydrate, 8 Kcal fat
  4. 4 Kcal protein, 4 Kcal carbohydrate, 12 Kcal fat
  5. **4 Kcal protein, 3.5 Kcal carbohydrate, 9 Kcal fat \***

#

8. A 1-month-old full-term infant is receiving breast milk only. The infant should receive supplementation of:

#

* 1. Iron
  2. **Vitamin D \***
  3. Protein
  4. Vitamin B12
  5. Vitamin E

#

9. Most common organism of acute bronchiolitis:

#

* 1. Influenza virus
  2. **RSV \***
  3. Parainfluenza virus
  4. Rhinovirus
  5. Coxsackievirus

#

10. All of the following conditions result in an increased anion gap except:

#

* 1. **Lithium ingestion \***
  2. Methanol ingestion
  3. Renal failure
  4. Diabetic ketoacidosis
  5. Salicylate poisoning

#

11. A full-term boy with Down syndrome appears with bilious vomiting. Physical examination reveals non-tender, soft abdomen. Abdominal X-ray reveals double-bubble sign. Most likely diagnosis:

#

* 1. Pyloric stenosis
  2. Jejunal atresia
  3. Hirschsprung disease
  4. **Duodenal atresia \***
  5. Gastroesophageal reflux

#

12. The time of eruption of the first teeth in an infant (month):

#

* 1. 3 – 4
  2. 4 – 5
  3. **5 – 7 \*\***
  4. 7 – 8
  5. 8 –9

#

13) Which of the following advice is helpful to a mother who wishes to breast-feed?

#

a. Place the baby on the breast immediately after delivery \*\*\*

b. Feed the baby every 4 hours to establish a schedule

c. Have the father give a bottle overnight so the mother can rest and build up her strength

d. If mastitis seems to be developing, give the breast a rest from sucking

e. If the baby seems hungry after a feed give a bottle of formula to make sure the breast fills up for the next feed

#14) Immunizations can be given in the following circumstance: #

a. MMR vaccine to severely immunocompromised children

b. If the child is older than the age indicated on the schedule\*\*\*

c. OPV to premature baby in neonatal ICU

d. A history of persistent crying for 4 hrs following previous DTP vaccination

#$

15) A normal child of 15 months should have achieved the following milestones:

#

a. Copies a circle

b. Builds a tower of two blocks\*\*\*

c. Can recognize three different colors

d. Runs

e. Plays interactively with other children of the same age

#

16) A 2-year-old child presents with high fever and cough, a runny nose and conjunctivitis. Which sign would suggest pneumonia?

#

a. Stridor

b. Tachypnoea \*\*\*

c. Anorexia

d. Sleepiness

e. Exanthema

# $

17) Which one of the following is true regarding coeliac disease?

#

a. Usually starts in infants less than 3 months

b. Diarrhea can be provoked by rice and potatoes

c. Crypt atrophy is seen in jejunal biopsy

d. Requires adherence to a gluten free diet for 6 months

e. When untreated is often accompanied by anemia\*\*\*

#

18) A 3-month-old infant presents with attacks of cyanosis and irritability. On examination he has a right parasternal heave and a pan-systolic murmur. What is the most likely diagnosis?

#

a. Transposition of the great vessels

b. Anomalous drainage of pulmonary veins

c. Patent ductus arteriosus

d. Fallot tetralogy\*\*\*

e. Pulmonary stenosis

#

$19) Which of the following is a likely cause of severe conductive hearing impairment?

#

a. Very high levels of unconjugated bilirubin

b. Secretory otitis media\*\*\*

c. Meningitis

d. Head injury

e. Exposure to excessive noise levels

# 20) A 12-year-old girl is brought into hospital unconscious. She has a fever of 40 °C and a purpuric rash to the trunk. She withdraws from pain; groans and her eyes remain shut. Her glucose is 3.5 mmol/L (63 mg/dL). Her heart rate is 180, respiratory rate 30, capillary refill time 4 seconds peripherally and her blood pressure 100/55.

Which is the first steps in management? #

a. Give a cephalosporin antibiotic

b. Secure airway and consider intubation

c. Give 20mL/kg 0.9% sodium chloride fluid bolus\*\*\*

d. Give 2mL/kg 10% glucose bolus

e. Obtain further history

#$21) Which is correct relating to ventricular septal defect? #

a. Cardiac failure does not occur at birth \*\*\*

b. Commonly causes central cyanosis

c. Typically has a marked diastolic murmur

d. Surgery is required in most cases

e. Ventricular fibrillation is common

#22) What would be a typical indication of congestive heart failure in an infant? #

a. Bradycardia

b. Splenomegaly

c. Pulmonary crepitations \*\*\*

d. Peripheral oedema

e. Polydipsia

#23) Which of the following is the commonest complication of obesity in childhood? #

a. Non-alcoholic fatty liver disease\*\*\*

b. Poor self-esteem

c. Type 2 diabetes

d. Dyslipidemia

e. Hypertension

#24) A Mongolian blue spot is: #

a. Usually located in the sacral area \*\*\*

b. More common in Down syndrome (‘mongolism’)

c. A large bruise

d. Tends to darken with age

e. Is best treated with emollient creams

#25) Surfactant is mainly produced in: #

a. Bronchial epithelium

b. Lung macrophages

c. Alveolar Type I cells

d. Alveolar Type II cells\*\*

e. Pulmonary fibroblasts

#26) Which one of the following is a feature of pyloric stenosis? #

a. Anemia due to blood in the vomitus

b. Bile in the vomitus

c. Presents on the first day of life

d. Projectile vomiting\*\*\*

e. Typically causes hyperchloremic acidosis

#27) A full-term infant born to mother with diabetes developed convulsion. His lab showed WBC 19 HCT of 62, glucose of 55 mg/dl, Ca level was 6.5 the most likely cause of his convulsion is #

* 1. Hypoglycemia
  2. Polycythemia
  3. Hypocalcemia \*\*
  4. Cerebral infarct
  5. Meningitis

#

The most likely diagnosis of a 2 years old toddler with stridor and barking cough is: #

* 1. Croup\*\*
  2. Epiglottitis
  3. Foreign body aspiration
  4. Vocal coed paralysis
  5. Laryngomalacia

#

1. When do you suspect a 5 years old child to have sustained a child abuse: #
   1. Had minimal bleeding
   2. Trivial injury has got laceration over the leg
   3. Scald burns over the thigh
   4. History of fall down accident sustained swelling over frontal head
   5. Multiple fractures with different ages.\*\*

#

1. A thirteen-year-old boy develops fever 38.8 c, headache and bilateral swelling of his parotid glands. What is the most likely complication of the illness? #
   1. Orchitis**\***
   2. Acute airway obstruction
   3. Myocarditis
   4. Sensorineural hearing loss
   5. Arthritis

#

1. 2-year-old boy is brought to the office by his parents due to severe diarrhea since yesterday. He has had approximately 20 episodes of non-bloody, non-mucoid stool passage in the last twenty hours, and one episode of bilious vomiting. He is also feeding less than usual. He is febrile, tachcardic and moderately dehydrated. What is the most likely cause of his presentation? #
   1. Norwalk virus
   2. E.coli
   3. Campylobacter jejuni
   4. Shigella
   5. Rotavirus \*\*\*

#

32) A 3-year-old girl is known to have severe allergy to peanuts. Which is the most important step in management? #

a. Supply the family with an adrenaline auto-injector syringe \*\*\*

b. Advise on the need to keep antihistamines at near reach

c. Instruct the family how to give inhaled steroids

d. Forbid the child to participate in activities like parties

e. Give graded injections of peanut extract

#

1. An infant was born through difficult vacuum delivery. His heart rate was 80 at one minute, with weak cry and has some flexion of muscles and no response to suction of the pharynx. He was blue white color his Apgar score would be

#

a. 2

b. 3 \*\*\*

c. 4

d. 5

e. 6

#

1. **A 14-year-old boy is admitted to the PICU (Pediatric intensive care unit) with DKA (diabetic Ketoacidosis). He takes both regular and NPH insulin twice daily. He was admitted with DKA 3 weeks ago. The most likely cause for DKA in this patient: S**

#

1. Eats excessive candy
2. Drinks less fluid
3. Takes increased dose of insulin
4. Forgets to take insulin\*\*

#

**35) A 15-month-old male presents for a well-child check. He has met all his developmental milestones. Physical examination is remarkable for leukocoria along with strabismus. What is the most appropriate next step in the management of this patient?**

#

1. Prescribe antibiotics
2. Refer to an ophthalmologist \*\*\*
3. Cover the affected eye
4. Cover the normal eye
5. Prescribe eye ointment