

Question paper 6th semester

Department of pediatrics, AIIMS, BBSR

Full marks: 50 Duration: 1 hr

(ANSWER ALL) Each question carries 5 marks

- ✓ 1. What are causes of hyponatremia? Outline the management of hyponatremia?
- ✓ 2. Mention the developmental milestones for a child of 3 years age?
- ✓ 3. Short notes on growth charts and its utility in Indian children.
- ✓ 4. Management of febrile convulsion
- ✓ 5. Classification of malnutrition: a) WHO classification b) IAP classification
- ✓ 6. Outline management of severe acute malnutrition
- ✓ 7. Short on Rota virus
- ✓ 8. Management plan for a child of 10 kg presented with acute diarrhea with some dehydration
9. Write down WHO classification of pneumonia and management of severe pneumonia in 2 yrs old child
10. Outline causes of microcytic hypochromic anemia. Management of iron deficiency anemia in 2 yrs old child.

End semester theory examination – 6th semester
PEDIATRICS
12.6.2015

Instructions:

1. Maximum marks : 15, distribution as mentioned in each question
2. Maximum time allowed : 90 minutes
3. All questions are compulsory
4. Mention the question number correctly
5. Answer to the point

1. Mention 4 clinical features of vitamin A deficiency and management.
(0.4 + 0.6 = 1)
2. Mention any 2 clinical and 2 radiological features of rickets. (0.25 X 4=1)
3. Mention any 4 clinical features of zinc deficiency. (0.25 X 4=1)
4. Mention any 4 developmental milestones attained at 1 year of age. (0.25 X 4=1)
5. Mention any 4 causes of wheezing in children. (0.25 X 4=1)
6. WHO Classification of community acquired pneumonia in a child aged > 2 months to 5 years – categories with clinical features. (0.25 X 4=1)
7. WHO management plan for a 1 year old child (weight = 7 kg) with acute diarrhea and no dehydration.
8. Mention any 4 important physical findings of acute diarrhea with some dehydration. (0.25 X 4=1)
9. Mention any 2 ^{clinical} parameters used to assess degree of dehydration in a malnourished child. (0.5 X 2 = 1).
10. Mention 4 ^{or} classes of drugs used as “controller medications” used in childhood asthma. (0.25 X 4 = 1)
11. A 1 ½ year old boy is brought to you. Other than BCG and OPV received at birth, he is unimmunized. Name any 2 mandatory and 2 optional vaccines that should be offered to him. (0.25 X 4 = 1)

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12. Name 4 systemic diseases that can be associated with severe short stature.
 (0.25 X 4 = 1)
13. A 3 years old girl presents with cough, running nose and noisy breathing for 3 days. On examination, you find that she is irritable, has suprasternal retractions, a 'barking' cough and inspiratory stridor at rest. She is alert, accepting oral feeds and has a saturation is 99% in room air. *I don't know for sure.*
- What is the likely clinical diagnosis? *- tracheobronchitis*
 - What is the commonest organism causing this disease? *Streptococcus?*
 - What are the 2 therapeutic measures that can help her? (0.25+0.25+0.5) *Antibiotics, Lev, feed, SABA*
14. A 4 years old boy presents with cyanosis noted from early infancy, clubbing and failure to thrive. There is **no** history of recurrent chest infections. On examination, you note a precordial bulge, systolic murmur and soft, single second heart sound. After admission, he develops sudden onset of severe cyanosis, restlessness and gasping respiration.
- What is the likely underlying diagnosis?
 - What is the reason for the acute complication?
 - Name any 2 therapeutic measures that are used to manage this acute complication.
 (0.25+0.25+0.5)
15. A 6 months old infant, previously well, developed running nose and cough 5 days back. 2 days later he developed mild fever, irritability and rapid breathing. On examination, you find tachypnea, tachycardia, intercostal retractions, hyperinflated chest and bilateral wheeze. Chest X ray shows bilateral hyperinflation and patchy atelectasis.
- What is the likely diagnosis?
 - What is the most likely organism causing this disease?
 - What are the therapeutic measures you would like to undertake in this child which are known to work?
 - Which drug could be considered in this situation if this child was immunocompromised?
 (0.25 X 4 = 1)

Question paper 8th semester
Department of pediatrics, AIIMS, BBSR
Full marks: 50 Duration: 1 hr 30 mins 13.6.2016
(ANSWER ALL) Each question carries 5 marks

1. Enumerate causes of cyanotic heart disease with decreased pulmonary blood flow? What are management of cyanotic spell in child on 2yrs age?
2. Classify neonatal sepsis? Outline the investigation in newborn with sepsis.
3. What is Jone's criterion? Mention the management of acute rheumatic fever.
- ✓ 4. Short notes on Vaccination for adolescent girl
- ✓ 5. Evaluation of a child with short stature.
- ✓ 6. Enumerate the causes of delayed puberty in girl child.
- ✓ 7. Mention the clinical features of Down syndrome? How to evaluate a child with Down syndrome in OPD follow up?
8. Approach to fresh petechie in child presented to OPD
9. What is persistent diarrhea? How to evaluate a child with persistent diarrhea?
10. Management of status epilepticus.

TT HPV
Hep B
TORCH
Syphilis
Rubella

Rho.

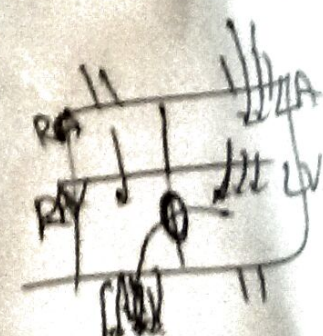
Pediatrics Question paper Pre Prof 3rd MBBS
Full marks: 50 Duration: 3hr 30.9.2016
(ANSWER ALL) Each question carries 5 marks

Section A

1. What are the principles or laws of growth & development?
2. Short note on Kangaroo Mother Care (KMC)
3. Jamani Sisu Surekhya Karyakrama (JSSK) *HBNC, FBNC, NBC, FIMNCI, I-MNCP*
4. Outline the Management of steroid dependent Nephrotic syndrome.
5. A five year child presented with convulsion of one hour duration. Outline the management of this child. *doives*

Section B

1. Outline the management of severe Protein energy malnutrition who is hospitalized.
2. Short note on Idiopathic thrombocytopenic purpura.
3. Describe briefly pathophysiology of Hypoxic ischemic encephalopathy.
4. Classification of Acyanotic congenital heart disease and management of Ventricular Septal defect (VSD).
5. Causes, clinical picture and management of hypocalcemia.





All India Institute of Medical Sciences, Bhubaneswar
3rd Professional MBBS Final Examination 2016

Time: 3 Hrs

Paediatrics

Max. Marks: 50

Instructions

Answer all the questions. Draw diagram wherever necessary. Use separate answer sheets for both Section-A & B.

Section – A

1. Mission Indradhanush. (5)
2. Clinical feature and management of nutritional rickets. (5)
3. Enumerate the causes of respiratory distress in a term neonate. Discuss the clinico-radiological picture and management of transient tachypnea of newborn. (5)
4. Classify the severity of childhood asthma. Discuss the management of acute severe asthma. (5)
5. Enumerate the causes of cholestatic jaundice in an infant. Briefly discuss the management of the same. (5)

Section – B

6. Revised Jone's criteria for the diagnosis of acute rheumatic fever. (5)
7. Approach to a child with anemia. (5)
8. Importance of communication in pediatric practice. (5)
9. WHO classification of severe acute malnutrition under the age of 5 years. (5)
10. Approach to a case with suspected metabolic disorder. (5)