

Question bank

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3rd Edition

الطب والجراحة
لجنة

Pediatrics





الفريق الأكاديمي



** آخر تعديل على هذا الملف تم بتاريخ 20\8\2022 عن طريق محمد ربيعي .

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لطلبة السنة السادسة و طلبة السنة الخامسة

وتعديل بعض الإجابات السابقة ..

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2022 – 6th year final MCQ Exam

1-Which of the following don't cause early neonatal heart failure?

1-ASD

2-PDA

3-VSD

4-COA

5-TOF

2- A 3 years old boy complain of functional constipation (pass stool 2 times /week with large diameter stool) and his height & weight was 50% which statement would be correct?

1-do T3/TSH level

2-start ttx. with osmotic laxative

3-do endoscopy and biopsy

4- functional constipation rarely would be the cause

3-most common cause of central precocious puberty in female?

1-brain tumor

2-interventricular hemorrhage

3-idiopathic

4-pituitary adenoma

4-All cause delay closure of anterior fontanel except :

1-congenital Hyperthyroidism

2-rickets

3-osteogenesis imperfect

4-hydrocephalus

5-down syndrome

5-in type 1 Vit.D dependent rickets all are correct except :

1-Decreased alkaline phosphatase

2-hypocalcemia

3-hypophosphatemia

4-low 1,25 vid

6-all the following are normal except :

1- new born with palpated liver edge 1cm below costal margin

2- 4 year old boy with 3.5 cm anterior cervical lymphadenopathy

3- double size spleen in new born infant

7-There are 3 patient , pt 1 with high anion gap metabolic acidosis , pt number 2 with 100 Na & 50 K in urine & normal anion gap , pt number 3 with normal anion gap but Na 20 & k 10 in urine , what is the underlying cause of each patient :

1-fanconi syndrome /DKA/diarrhea

2-DKA/fanconi syndrome/diarrhea

3-diarrhea/fanconi syndrome/DKA

4-fanconi syndrome/DKA/diarhea

8-Child 4 years present with fever for more than 1 month with limping and fatigue with hepatosplenomegaly with low platelet and RBCs count what is the best investigation you should do

1-bone marrow biopsy

2-abdominal us

3-ct of the chest

4-monospot test

9-which of the following is wrongly matched :

1-Adem = less than 10 years

2-Adem = CSF with lymphocytic pleocytosis

3-MS = recurrent attack

4-Multiple sclerosis = bilateral optic neuritis

10-Premature baby born with apnea, resuscitated with recurrent apnea episodes what is next step

1-cpap

2-face mask

3-Give caffeine

4-intubation & mechanical ventilation

11-Several weeks old boy, his mom said that his color is always has been yellow, completely normal history and P/E with normal growth parameters ,, his labs showed unconjugated hyperbilirubinemia (it was 270 mmol/L),, what to do?

1-Live U/S

2-LFT

3-stop breast milk till jaundice is gone

4-Continue breast milk

5-Start him on phototherapy

12-Most important cause of first day jaundice?

1-Hemolysis

2-sepsis

3-physiological

4-biliary atresia

13-All of the following is suspicious for child abuse except :

1-Toddler with multiple bruises of different ages

2-the rest of answers associated with signs of child abuse

14-One of the following is the most suspicious for child abuse ?

1- 6 month with perianal warts

2- child with multiple bruises of different age

3- 6 month baby of identical twin with multiple bone fracture of different age

15-Hx of recurrent chest, ear, Gi infections and oral thrush with failure to thrive ?

1-neutropenia

2-hyper IGM syndrome

3-Severe combined immunodeficiency

16-One is correct about tuberculin skin test :

1-Given subcutaneous

2-steroid will not affect the size of reaction

3-Result are interpreted after 24-48 h

4-Interpretation is done for both induration and Erythema

5-in TB meningitis the test may be negative

17-Child have hypernatremia and they mentioned S/S of moderate to Severe dehydration, in the ER was given 20mg/dl bonuses till vitals improved, now what's the fluid that you want to continue the child on?

1-D10W + 1/2 NS for 24 h duration

2-D5W + 1/4 NS for 48 h duration

3-D5W + 1/2 NS for 48 duration

18-Child with asthma exacerbation was given SABA several times at home with no responses, came to the ER, you will give him all of the following except?

1-Another dose of the same medication

2-Theophylline

3-o2

4-Ipratropium

5-subcutaneous adrenaline

19-11 year old child has chronic diarrhea, with short status , have DM1 his brother complain of Hashimoto thyroiditis ,What's the most probable cause of his diarrhea ?

1-Lactose intolerance

2-malnutrition

3-celiac disease

4-inflammatory bowel disease

20-Baby with thick stain meconium , nurse stated sectioning of nose and mouth then the baby starts breathing and crying and was vigorous, what to do ?

1-discontinue suctioning and see

2-Deep oral suction

3-See If there is meconium under the cords by direct laryngoscopy , if yes intubate and suction

21-all infections cause microcephaly except

1: CMV

2: HSV

3: syphilis

4:hepatitis B

22-One of the following is wrong:-

Tzank smear is a gold standard for herpes simplex

23-All are true about neuro-blastoma except :

Associated with WAGR

24-Case of CF with pneumonia , which group of these antibiotics completely cover the pt. :

Vancomycin / piperacillin

25-Case of HIE (hypertonia , hyper reflexia , mydriasis) :

Stage 1 HIE

26-All are Risk factors for cerebral edema in DKA except :

Initial high pco₂

27-infant of +ve HBs Ag & -ve HBe :

Give IVIG and HBV vaccine within 24 Hour

28-Wrong about polio vaccine :

IPV decrease transmission in community (the true is OPV)

29-Preceded by sever gastroenteritis then develop bilateral symmetrical weakness in leg and sensory affection ..

Guillain-Barre syndrome

30-Myelomeningocele one is wrong :

normal deep tendon reflex

31-Not associated with hydrocephalus :

Chiari 1 malformation

32-About PDA one is wrong :

Indomethacin giver for both premature and term

33-About DKA one is wrong :

Add KCl only if patient is hypokalemic

34-Wrong about neonates :

High HbA

35-One is true about EHEC with Shiga toxin :

Don't give antibiotics & Closely observe renal failure and plt. count

36-Wrong about cerebral palsy :

Hyper-billurbinema cause spastic type

37-Wrong about PDA :

Narrow pulse pressure

38-One is true about congenital hypo-thyrodism :

Mostly asymptomatic at birth

39- 3 year old child with 3 episodes of pyelonephritis what is the next step :

DMSA

40-One is wrong about hemophilia A :

Prolonged PT

41-2 month fever , recurrent and spiking then develop pink rash and arthritis and hepatosplenomegaly ?

Systemic juvenile arthritis

42-Brassy cough no drooling high fever TX?

Vancomycin and Cephalo-

43- child present with cholinergic toxicity (tachycardia, hotness, agitation) what is the antidote :

Physostigmine

44- risk factor for recurrent febrile seizure :

Age less than 1 year old

2021 – 5th year final MCQ Exam

1- One of the following is correct about IgA nephropathy :

- a. Gross hematuria 2 weeks following an upper respiratory tract infection
- b. An elevated Ig A level is required for the diagnosis
- c. 75 % of the patients progress to ESRD requiring dialysis
- d. increased crescent on Kidney biopsy carries a poor prognosis
- e. C3 Level is very low in the first 4 weeks of presentation

2- All of the following may be investigated for cystic fibrosis, except :

- a. Nasal polyps in a child younger than 12 years old
- b. Newborn with a positive screening radioactive trypsinogen test
- c. Male with unexplained infertility
- d. Newborn diagnosed with meconium ileus
- e. A child with diabetes mellitus

3- Which one of the followings statements is not matching :

- a. Ash-leaf spots, intracranial calcifications >> Tuberous sclerosis
- b. Gower's sign >> proximal muscle weakness
- c. Café au lait spots, cutaneous tumors >> Neurofibromatosis
- d. strawberry hemangioma >> Sturge-weber
- e. retinitis pigmentosa >> visual field defect

4- A 3 year old girl is seen in the emergency room for seizures. She has history of profuse diarrhea and vomiting for two days. She looks sick , difficult to arouse and dehydrated with BP 95/50. Her investigations revealed a normal CBC , Creatinine 0.45mg/dl , urea 40 mEq/L , Sodium 113 mEq/L , potassium 3.4mEq/L and glucose 89 mg/dl and calcium 8.9 mg/dl. Which of the following is the most important next step in her management :

- a. Give a bolus of IV 3% hypertonic saline
- b. Give a bolus of IV 0.45% NS
- c. Give her IV D10W infusion
- d. Give her IV calcium gluconate 10%
- e. Give her I ceftriaxone

5- A 3-month-old boy product of normal vaginal delivery at full term presents with recurrent Spitting up after feeding , No history of irritability, recurrent cough or hospital admissions. He is on regular infant formula . His weight is 5.5 kg . Which of the following is the most appropriate intervention :

- a. Start Ranitidine
- b. Surgical fundoplication
- c. Start on proton pump inhibitor (PPI)
- d. Start anti-regurgitation (AR) formula
- e. Start on metoclopramide

6- All the following are matched, except :

- a. Short stature: celiac disease
- b. Microcephaly: Lysosomal storage disease
- c. Macrocephaly: congenital aqueductal stenosis
- d. Tall stature : 47 XXY karyotyping
- e. Failure to thrive type 1: decreased caloric intake

7- The recommended daily dose of Vit.D to exclusively breastfed baby to avoid the risk of rickets is :

- a. 200 IU
- b. 400 IU
- c. 600 IU
- d. 800 IU
- e. 1000 IU

8- Following your request for a plain radiograph of the neck of a 2 year old child, the radiologist calls you to reported steple sign. The most likely etiologic agent is :

- a. Influenza virus
- b. Parainfluenza virus
- c. Respiratory syncytial virus
- d. Adenovirus
- e. Chlamydia trachomatis

9- ALL of the following are true regarding juvenile idiopathic arthritis , EXCEPT:

- a. Oligo-articular type is highly associated with uveitis
- b. Macrophage activating syndrome can be either the first presentation of the disease or result of non-compliance to treatment
- c. limb length discrepancy is well known chronic complication
- d. poly-articular is the best prognostic type
- e. arthritis can be absent initially in systemic onset type

10- Regarding congenital adrenal hyperplasia, in comparison between 21-alpha hydroxylase deficiency , one of the following is common in between of them :

- a. Virilization in female
- b. Metabolic acidosis
- c. Hypokalemia
- d. Hypertension
- e. hyponatremia

11- A previously healthy 7-month-old child develops paroxysmal colicky abdominal pain. The infant has occasional vomiting. Over next 12 hours the infant passes stool containing blood and becomes progressively lethargic. After fluid resuscitation, the most appropriate next step in management :

- a. Colonoscopy
- b. Stool culture
- c. Meckel scan
- d. Air-contrast enema
- e. Abdominal X-RAY

12- A 6 year old boy is admitted with gross hematuria. His BP is 130/90, he has normal electrolytes but his creatinine elevated and has face edema and his mother indicates his weight is 2 kg above his baseline. Which of the following is correct in the fluid therapy for this patient ?

- a. Give him bolus 20cc / kg of IV 0.9% normal saline
- b. Restrict his IV fluids to 400ml/day (NOTE: as in lecture I restrict the pt. just to insensible losses)
- c. Restrict his IV fluids to half of the maintenance
- d. Give him his full required daily maintenance fluids
- e. Give only urine output replacement

13- A 5 year old female patient presented with jaundice of 3 days duration after history of fava beans ingestion and has pale conjunctiva and yellowish sclera. All of the following lab results are expected except :

- a. low haptoglobin
- b. hemoglobinuria
- c. low Hb
- d. low reticulocytes
- e. high LDH

14- Regarding term infant feeding, one is true :

- a. Hind milk is less concentration in fat than Foremilk
- b. The younger infant needs less frequent more volume milk
- c. Colostrum is lower in Immunoglobulin than mature milk
- d. early administration of high allergic food decreases the risk of some food allergy
- e. Vitamin D should be supplemented after 4 months

15-Which statement is not true regarding (COVID-19) vaccine :

- a. Inactivated virus Vaccine >> Sino pharm
- b. live attenuated virus vaccine >> (Sputnik V)
- c. Encapsulated mRNA Vaccine >> BioNTech/Pfizer
- d. Virus like Particle Vaccine >> Novavax
- e. Viral vector Vaccine >> Oxford/AstraZeneca

16- Regarding infantile spasm (West syndrome) all are true except :

- a. onset peak between 4 and 7 months
- b. associated to developmental delay
- c. characteristic pattern in EEG (hypsarrythmia)
- d. Vigabatrin and ACTH are the main treatment
- e. Seizures are complex partial in type

17- All the following are indication for surgical closure of ventricular septal defect (VSD) except :

- a. Heart failure not responding to medical therapy
- b. Small muscular VSD
- c. Eisenmenger syndrome
- d. Failure to thrive
- e. 2:1 Qp: Qa

18- The differential diagnosis of Kawasaki disease includes all of the following EXCEPT :

- a. chicken pox
- b. Toxic shock syndrome
- c. Scarlet fever
- d. Stevens-Johnson syndrome
- e. Measles

19- Risk factors for persistent wheezing include all the following EXCEPT :

- a. parental history of asthma
- b. paternal smoking
- c. persistent rhinitis (apart from acute upper respiratory tract infections)
- d. eczema at <1 yr of age
- e. wheezy episodes triggered by cold

20- 6 years old female patient presented with breast enlargement and pubic hair development
Otherwise she is Asymptomatic , serum LH is elevated, the most likely diagnosis is :

- a. Hypothyroidism
- b. Exposure to exogenous estrogen
- c. Estrogen secreting tumor
- d. Adrenal tumor
- e. Central precocious puberty

21- All of the following statements regarding puberty are true, except :

- a. Breast bud is the 1st sign of puberty in female
- b. Growth spurt occur 2 years later in male than female
- c. Central precocious puberty is heterosexual in most cases
- d. Congenital adrenal hyperplasia is an example of combined central and peripheral precocious puberty
- e. Bone age is advanced in patient with precocious puberty

22- Which statement is not matching ?

- a. Ethosuximide (Zarontin) >> Absence Epilepsy
- b. topiramate (Topamax) >> Migraine Prophylaxes
- c. Acetazolamide (Diamox) >> Pseudo tumor cerebri
- d. Baclofen (Iioresal) >> Spastic cerebral palsy
- e. Methylphenidate (Ritalin) >> Oppositional defiant disorder

23- Regarding IDA (IRON DEFICIENCY ANEMIA) all of the following are true except:

- a. it may be related to extra-hematological conditions like febrile convulsion
- b. failure of treatment may indicate underlying malabsorption
- c. it is highly expected in exclusively breastfed infants at 4-6 months of age
- d. screening for IDA done at the age of 10 month -1 year in Jordan
- e. it's one of the differential diagnosis of aplastic anemia

24- A 2 months old baby with gram positive cocci in his cerebral spinal fluid (CSF). The best antibiotic in this case :

- a. ampicillin + ceftriaxone
- b. ampicillin + vancomycin
- c. vancomycin + ceftriaxone
- d. ceftriaxone alone
- e. cefuroxime + ampicillin (Note : cefuroxime is 2nd generation C.S not 3rd generation)

25- A 3 week old term baby , noticed to be jaundiced, started one week ago, all of the following investigation are needed , Except :

- a. thyroid function test
- b. urine analysis and culture
- c. reducing substance in urine
- d. liver function test
- e. Hb electrophoresis

26- A 1 yr.-old-boy was exposed to a child with measles. You will give him.

- a. Vaccine alone within 72 hrs
- b. Immunoglobulin alone within 72 hrs
- c. Reassure mother and arrange appointment within incubation period
- d. Vaccine & immunoglobulin within 72 hrs
- e. Vaccine & immunoglobulin within 5 days

27- All of the following about Acute Kidney Injury (AKI) are correct except:

- a. In developing countries most cases are prerenal and caused by decreased renal perfusion
- b. In neonates, and in some tubulopathies , AKI can be non oliguric .

C. Angiotensin converting enzymes (ACE) inhibitors precipitate AKI by inhibiting the intrarenal generation of vasodilator prostaglandin .

- d. AKI is classified into different stages according to the decrease in creatinine clearance (ECCL) and drop in the urine out put .
- e. When needed, RRT (Renal replacement therapy) by both hemodialysis and peritoneal dialysis is equally effective .

28- Chest x ray may be used to differentiate between the different types of CHD , increased pulmonary flow is seen in which of the following:

- a. Pulmonary atresia
- b. Truncus arteriosus**
- C. Tetralogy of fallot
- d. Tricuspid atresia
- e. Pulmonary stenosis

29-The recommended agent for treatment of pneumonia caused by Mycoplasma Pneum. ?

- a. Amoxicillin or ampicillin
- b. Ceftriaxone or Cefotaxime
- c. Clarithromycin or azithromycin**
- d. Gentamicin or kanamycin
- e. Trimethoprim-sulfamethoxazole

30- All of the following are causes of (albuminuria) except:

- a. Cystinosis
- b. Ig A nephropathy
- c. HSP (henoch Schonlein purpura)
- d. lupus nephritis
- e. Amoidosis

31- G6PD DELICIENCY is inherited as :

- a. AUTOSOMAL RECESSIVE
- B. AUTOSOMAL DOMINANT
- C. X-LINKED DOMINANT
- d. X-LINKED RECESSIVE
- e. MITOCHONDRIAL INHERITANCE

32- A 3 year old male patient presented with high grade fever, lethargy with wbc count = 2 and differential of neutrophil /lymphocytes: 5/80 , which of the following is true :

- a. gram positive organism coverage is the only needed in the mentioned case
- b. they do not need admission, and home observation is sufficient
- c. it cannot be a case of Blackfan diamond anemia. (NOTE : as WBC's Line affected so it's not pure RBC's aplasia)
- d. platelet and Hb are not of importance in this case
- e. bone marrow aspiration and biopsy is not needed in prolonged recurrent cases

33- Differential diagnosis between Kawasaki and Multisystem inflammatory syndrome in children (MIS-C) includes all of the following , except :

- a. (MIS-C) onset is in older age children than Kawasaki.
- b. Coronary artery aneurism more common in Kawasaki disease
- c. The risk of ICU admission is higher in (MIS-C)
- d. COVID-19 positive in 75.5% of children with Kawasaki
- e. (MIS-C) present more frequently with gastrointestinal and respiratory involvement

34- Regarding pediatric genitourinary exam, all the following are true , EXCEPT :

- a. Orchidometer is a tool used to measure testicular length and volume
- b. Testicular volume of 4 ml and long axis of 2.5 are pubertal
- c. Hypospadias is a sign of ambiguous genitalia
- d. Mild vaginal bleeding in a newborn female is benign and reflects hormonal withdrawal
- e. Microphallus is a stretched penile length less than 2.5 cm in a full term newborn male

35- Regarding febrile seizures, which statement is not true?

- a. it is the most common seizure disorder in infants and young children
- b. the most common cause of fever is usually URTI
- C. Symptomatic febrile seizures, the child has a preexisting neurologic abnormality
- d. It is the main morbidity of roseola infantum
- e. developmental delay is association

36- Regarding rickets, all of the following are true except :

- a. The most common cause worldwide is Vit D deficiency
- b. X linked hypophosphatemic rickets is associated with high parathyroid hormone level
- c. Vitamin d dependent rickets type 1 is caused by deficiency in 1-alpha-hydroxylase enzyme
- d. Alopecia is associated with VDDR type 2
- e. Patients with Fanconi syndrome has rickets due to phosphaturia

37- Regarding hemophilia which of the following is wrong:

- a. First attack of bleeding in a joint will make it a target for further bleeding
- b. non responsive bleeding in hemophilias is related to inhibitor formation for the factors
- c. hemophilia is rarely associated with intracranial bleeding in neonate.
- d. it can be screened for by doing PTT.
- e. somatic hemophilia is common in type 3 WWF (von Willebrand disease) disease

38-Antibiotics are indicated in all the following cases of acute gastroenteritis , Except :

- a. Shigellosis
- b. Acute amebic gastroenteritis
- c. A baby whose age less than 1 month
- d. Salmonella enteritis in a patient with sickle cell anemia
- e. Patient with food poisoning due to staph aureus

39-One of the following is correct about nephrotic syndrome in children :

- a. A newly diagnosed 4-year old boy needs to receive a booster dose of OPV vaccine
- b. patients with confirmed gene mutation have good response to prednisolone
- c. MCD (minimal change disease) constitutes 25 % of nephrotic Syndrome
- d. The diagnosis is confirmed by urine protein of 40 mg /m2/hr
- e. A positive ASO titer more than 200 IU/ml is required for the diagnosis

40- Which statement is not true regarding Attention Deficit Hyperactivity Disorder (ADHD) :

- a. ADHD Prevalence in Jordan >> 6.24%
- b. Often talks excessively >> autism
- c. Often fidgets with hands or feet or squirms in seat >> Hyperactive subtype
- d. Often answers before questions have been completed >> impulsivity
- e. Often has difficulty organizing tasks or activities >> Attentive subtype

41- All the following are indications for intrapartum prophylaxis to decrease the risk of neonatal sepsis , except :

- a. Gestational age less than 37 weeks
- b. Rupture of membrane of more than 18 hours
- c. Maternal temperature more than 38c
- d. GBS bacteruria during previous pregnancy
- e. Positive GBS colonization documented by anogenital surveillance at 35-37 weeks gestation

42-All are expected for a full term 12-month-old infant, whose birth weight was 3 Kg , EXCEPT :

- a. Weight: 10 kg
- b. Heart rate: 110/ min
- C. Respiratory rate: 30/ min
- d. Says a few words besides "mama", "dada"
- e. Positive Moro reflex

43- Regarding megaloblastic anemia which is wrong:

- a. it is characterized by macrocytosis
- b. it's associated with features of developmental delay and hypotonia
- c. it's associated with thrombocytopenia
- d. it may be caused by methotrexate
- e. giant Metamyelocytes is prominent finding in the blood film

44- A 3 year old male patient presents with purpuric skin rash that appeared on both calves , he also has limping due to knee pain followed by abdominal pain . Which of the following regarding this clinical condition is wrong ?

- a. recurrence of skin rash is highly expected in acute phase of the disease and and later upon any stressful event .
- b. renal complication is the second most common criteria for the diagnosis and renal biopsy is always required .
- c. corticosteroid is needed in gastrointestinal and CNS complication
- d. gastrointestinal presentation is variable from abdominal pain to intestinal ischemia
- e. it's not a recurrent condition in children

45- A 10 months old normal infant can perform all the following skills except :

- a. wave bye-bye
- b. stand with support
- c. can say 3-4 single words
- d. mature pincer grip
- e. plays "peek-a-boo"

46- Recognized problems of infants born at term small for gestational age include all Except :

- a. Hypothermia
- b. Sepsis ?
- c. Polycythemia
- d. Hypoglycemia
- e. Retinopathy of prematurity

47- All of the following are true regarding coarctation of the aorta Except :

- a. Lower blood pressure in the lower limb compared to the upper limb
- b. Diminished or delayed femoral pulse
- c. More common in male than female
- d. Notching of the posterior thoracic ribs early during infancy
- e. Heart failure occur beyond the neonatal period

48- All of the following are true regarding acute rheumatic fever , Except :

- a. An autoimmune inflammatory process that develops as a sequel of streptococcal pharyngitis
- b. The joint involvement is usually migratory deforming arthritis
- c. Rheumatic carditis is characterized by pancarditis , with active inflammation of myocardium, pericardium , endocardium .
- d. Sydenham chorea occurs in approximately 10-15% of patients with acute rheumatic fever
- e. Erythema Marginatum occurs primarily on the trunk and extremities

49- All the followings are correctly matched , Except :

- a. Down syndrome : ventricular septal defect
- b. Alagille syndrome : pulmonary stenosis
- c. Turner syndrome : cortication of aorta
- d. William syndrome : subvalvular aortic stenosis
- e. Noonan syndrome: pulmonary stenosis

50- All of the following are side effects of phototherapy , Except :

- a. skin rash
- b. constipation
- C. retinal damage
- d. bronze baby syndrome
- e. dry skin

51-One of the following statements about fluid therapy in children is correct:

- a. in hypernatremic dehydration, correction should be over at least 36-48 hr.
- b. G5W 0.18% N/S is the fluid of choice for maintenance therapy in children
- C. sodium bicarbonate should be given early in the resuscitation of a child with severe dehydration
- d. in septic hypotensive patient, colloids is the ideal fluid choice for resuscitation
- e. 20ml /kg bolus of G5W 0.45 N/S should be given in managing a child with severe hypotension

52- All the following are at increased risk of respiratory distress syndrome (RDS) , Except:

- a. Infant of diabetic mother
- b. Premature baby
- c. Low birth weight
- d. Second-born twins
- e. Maternal Preeclampsia

53- A 5-yr-old girl is evaluated for severe mental retardation, microcephaly, hand-wringing movements ,poor growth and weight gain ,and seizures. Those findings indicate that she has which of the following disorders :

- a. Juvenile Huntington disease
- b. Rett syndrome**
- c. Metachromatic leukodystrophy
- d. Adrenoleukodystrophy
- e. Menkes disease

54-Neonatal seizures include all these seizures types except

- a. Subtle
- b. Clonic
- c. Tonic-clonic**
- d. Myoclonic
- e. Tonic

55- What is the most common cause of late onset sepsis in neonates?

- a. Streptococcus agalactiae (GBS)
- b. Klebsiella
- c. E. coli
- d. Staph epidermis**
- e. Listeria monocytogen

56- All the following are indications for neuroimaging in seizure disorders Except :

- a. partial onset seizure
- b. Complex febrile seizures**
- c. neonatal seizures
- d. persistent altered mental status
- e. focal or new focal deficit

57- Which statement is not true regarding national Jordanian immunization program?

- a. it protect against 11 serious infantile infections
- b. it contain 12 vaccines
- c. Rota vaccine Started on 1/3/2015
- d. conjugated pneumococcal vaccine (Prevenar 13) is last vaccine introduced
- e. Hepatitis A vaccine is a killed virus vaccines

58- 4 year old male patient presented with history of gum bleeding of 3 days duration, mother implied that there is history of upper respiratory tract infection 2 weeks ago. His vital signs were normal , no lymph node enlargement , no organomegaly , his platelet count 10×10^9 , all are true EXCEPT :

- a. platelet transfusion is the first line of treatment
- b. weekly platelet should be done after discharge to ensure recovery
- C. Anti-D therapy is a known line of treatment in those who are D-positive
- d. if these finding persist beyond 6 months then EBV titer should be done
- e. if bone marrow aspiration and biopsy is done it may shows hyperplasia of the megakaryocytes

59- A 10 months old child develops recurrent episodes of cry-apnea-cyanosis-loss of consciousness happens only when he is upset , The most likely diagnosis is :

- a. breath holding spells
- b. infantile myoclonic epilepsy
- c. atypical absence
- d. prolonged QT syndrome
- e. partial complex seizures

60- Which statement is not matching?

- a. Hyperbilirubinemia >> Athetoid cerebral palsy
- b. Congenital cerebellar malformation >> Ataxic cerebral palsy
- c. Normal development >> Exclude cerebral palsy
- d. Shaken baby syndrome >> Not cause cerebral palsy
- e. Gastro esophageal reflux >> Sandifer syndrome in cerebral palsy patient

61- A 3-month-old infant is admitted to the hospital with respiratory distress. He has had cough and congestion for the last 2 days and is now breathing too fast to eat effectively. You suspect bronchiolitis and respiratory syncytial virus (RSV) antigen testing is positive, Which of the following CXR findings is most commonly seen in infants with bronchiolitis caused by RSV ?

- a. hyperinflation
- b. hilar adenopathy
- c. multi-lobar infiltrate
- d. lower lobe infiltrates
- e. pleural effusion

62- A 4-year-old child presents to your office with fever, and increased work of breathing manifested by tachypnea and retraction. chest x-ray confirms lobar pneumonia. What is the most likely etiology of pneumonia in this child ?

- a. Mycoplasma pneumoniae
- b. Streptococcus pyogenes
- c. Chlamydia pneumoniae
- d. Streptococcus pneumoniae
- e. Staphylococcus epidermidis

63- All of the following are correctly matched except:

- a. blueberry muffin >> NEUROBLASTOMA
- b. aniridia >> Wilms tumor
- c. beckwith-wiedemann syndrome >> Hepatoblastoma
- d. Opsoclonus -myoclonus syndrome >> lymphoblastic leukemia
- e. Rasburicase >> g6pd crisis

64- Which statement is not matching?

- a. Duchene muscular dystrophy >> mental retardation universal.
- b. Becker muscular dystrophy >> Cramps are common symptoms.
- c. Myotonic muscular dystrophy >> Gower sign
- d. Emery-Dreifus muscular dystrophy >> death because of ventricular Fibrillation
- e. limb-girdle muscular dystrophy >> no calf muscle hypertrophy

65- A 7-year-old child who presents to your office with 2-day history of fever, diarrhea, and tenesmus . Stool examination reveals blood and leukocytes. You suspect infection with Salmonella typhi as the cause of her symptoms. What additional signs/symptoms are typically found with this infection?

- a. rectal prolapse
- b. hepatosplenomegaly and abdominal pain
- c. intensely pruritic skin rash
- d. cough and lymphadenopathy
- e. toxic mega colon and perforation

66- You are awakened in the night by a 2-year-old child, who has developed noisy breathing on inspiration , marked retractions of chest wall , flaring of the nostrils , and a barking cough. He has had a mild upper respiratory infection (URI) for 2 days .

Which of the following therapies is indicated?

- a. Short-acting bronchodilators and a 5-day course of steroids
- b. Intubation and antibiotics
- c. Observation for hypoxia and dehydration alone
- d. Inhaled epinephrine and a dose of steroids**
- e. Rigid bronchoscopy

67- A 1-kg female is born at 27 weeks' gestation because of preterm labor. She is vigorous at birth but shows signs of significant respiratory distress evidenced by oxygen saturation 70% , subcostal retractions, nasal flaring, and audible expiratory grunting . The best management for her respiratory status is :

- a. Elective intubation and administration of surfactant.
- b. Put on C-PAP and observe her respiratory status
- c. Pus on nasal cannula and observe her respiratory status
- d. Administration of surfactant and put her on C-PAP**
- e. Elective intubation without surfactant

68- Which statement is not true about vaccines ?

- a. eradication is worldwide meanwhile elimination is in definite area
- b. poliomyelitis eradication is medically possible
- c. Small pox is the only human disease eradicated so far
- d. no need for vaccination for eliminated disease**
- e. diarrhea is controlled in Jordan

69- Regarding vaccines one is not matching :

- a. Pure polysaccharide >> pneumovax-23.
- b. Killed >> hepatitis A.
- c. Toxoid >> diphtheria
- d. Live attenuated >> BCG.
- e. Conjugated polysaccharide >> a cellular pertussis vaccine

70- A 12-year-old child with confirmed cystic fibrosis has experienced cramping intermittent abdominal pain in the right lower quadrant for the past 4 days. The pain is associated with abdominal distension, and bilious vomiting . Last bowel motions were 5 days ago ..

The most likely cause of the abdominal pain is :

- a. Intussusception
- b. Hepatitis
- c. Appendicitis
- d. Distal intestinal obstruction syndrome (DIOS)
- e. Cholecystitis

71- Which of the following is correct about Post streptococcal glomerulonephritis (PSGN)?

- a. Heavy proteinuria more than 1.0 gm /24hr is universal
- b. It is a glomerulonephritis with normal complements (C3 and C4) levels
- c. Biopsy is required if the patient requires antihypertensive treatment
- d. Patients with low C3 level require pulse methyl prednisolone therapy
- e. It has very good prognosis with 95% having complete recovery

72- A 7 year old girl is seen in the emergency room for abdominal pain. She is afebrile and looks well . on examination she has suprapubic mild tenderness. Her urine analysis is positive for nitrite and leukocyte esterase and her renal US is normal . Which of the following is the best management choice for her?

- a. Admit her for IV Cefotaxime
- b. Admit her for IV Amikacin
- c. Send her home on oral ciprofloxacin
- d. Send her home on oral cotrimexazole
- e. Send her home on oral metronidazole

73- All of the following are known complications of nephrotic syndrome and its treatment , Except :

- a. growth retardation
- b. susceptibility to streptococcus pneumoniae infection
- c. hemolytic anemia
- d. renal vein thrombosis
- e. hypertension

74- The late clinical features of retinitis pigmentosa, may include all of the following Except:

- a. Sheathing of retinal blood vessels .
- b. Waxy pale optic disc.
- c. Posterior subcapsular cataract .
- d. Normal visual acuity.
- e. Cystoid macular edema .

75- A 13-year-old male presents to your office because of fever, nausea, vomiting, mild abdominal pain, and jaundice of two days. No family history of liver or gastrointestinal disease. Physical exam shows jaundice and a tender hepatomegaly. His CBC and electrolytes are unremarkable, AST: 3500, ALT: 5400, Total bilirubin: 8.2. Conjugated bilirubin: 5.4, Alkaline phosphatase: 420, GGT: 60, Albumin: 3.8 PT: 12.7 (INR 1.0). The following are true, except:

- a. The lab tests show hepatocellular injury and normal liver synthetic function
- b. The vaccine of this disease is available in Jordanian national programme of vaccination
- c. This patient should be isolated for 1 week after jaundice
- d. Vaccine is recommended for a 7-month-old household contact younger brother
- e. The excretion of viral particles in stool started earlier, when this patient is a symptomatic

76- A 4 year old Jordanian girl came to the clinic because she was found to have a hilar lymphadenopathy on chest -x-ray, she was visiting her grandfather 1 month ago who was complaining from weight loss, fever and hemoptysis. Your next step in management is :

- a. Do Gastric lavage for AFB
- b. Do interferon gamma releasing assay
- c. give antibiotics for 2 weeks and follow up after that
- d. Treat with Isoniazid, rifampin, pyrazinamide, and ethambutol for 2 months and then isoniazid and rifampin for another 4 months.
- e. do PPD skin test

77- A 5 year old boy is seen in clinic for enuresis. His mother states that he was never dry at night, he has no constipation and no recurrent urinary tract infection. He has an older sibling who is 14 years old that had the same problem when younger. His physical exam was unremarkable, his BP is normal and his height and weight are at the 50% for age. Which is the best approach for him?

- a. reassures the family as this is a self-limited condition
- b. send the patient for urodynamic study
- c. start the patient on amitriptyline
- d. send the patient for DMSA scan
- e. the patient requires urgent cystoscopy

78- A 6 month old male patient presented with fever and bruises of 3 day duration, you did a complete blood count and found WBC count to be $3.0 /\text{mm}^3$, 25 % neutrophils and Hb: 5 mg/dl. all are true except?

- a. it's a hematological emergency that needs to be investigated and treated
- b. you may find musculoskeletal finding on physical examination
- c. they need droplet and contact isolation
- d. antibiotic is not needed
- e. in older ages it's related to some viral infection.

79-All of the following regarding type 1 DM are true , except :

- a. Screening for diabetic retinopathy start after 2years in pre pubertal children
- b. Somogyi phenomenon occur due to high level of insulin in the blood during night
- c. Glycosylated hemoglobin is falsely low in pure red cell aplasia
- d. Patient presented with DKA require higher doses of insulin than who did not present with DKA
- e. Congenital rubella increase the risk of developing DM type 1

80- All of the following are causes of hypocalcemia except :

- a. Hypoalbuminemia
- b. Hypermagnesaemia
- c. Hyperphosphatemia
- d. hypoparathyroidism
- e. 25 (OH) Vit D deficiency

81- A 1 day old infant is cyanotic, hyperoxia test showed PaO₂ of 250 mmhg on 100% O₂, of the following, which diagnosis is most likely?

- a. Tetralogy of fallot
- b. Truncus arteriosus
- c. Transposition of great arteries**
- d. Meconium aspiration
- e. Tricuspid atresia

82- Which of the following physical findings would be least likely on examination of a child with moderate to severe asthma ?

- a. Tachypnea
- b. Wheezing
- c. Clubbing**
- d. Decreased air exchange over the right middle lobe
- e. An increased anterior-posterior diameter of the chest

83- 1 year old male patient presented with fever of 6 days duration associated with bilateral conjunctival injection and cracked lips , ESR and CRP were markedly elevated, which of the following is true ?

- a. the acute phase of this disease carries the highest risk for thrombosis
- b. steroid is the medication of choice in these cases
- c. some cases of this disease can be presented without fever
- d. inflammatory markers are supportive for diagnosis and is prognostic**
- e. live attenuated vaccines can be given immediately after the last echo at 6-8th week of disease

84- A 1.3-kg, 32-week gestation infant is delivered to a mother who has chorioamnionitis and had a positive group B streptococcal urinary tract infection . The infant requires admission to the intensive care nursery because of respiratory distress . Physical examination reveals a heart rate of 160 beats/min, respiratory rate of 80 breaths/min, and pulse oximetry of 82% on room air . The infant audibly grunts, has flaring of the ala nasi and intercostal and subcostal chest wall retractions, and is poorly perfused, with a capillary refill time of 2 seconds. There is no heart murmur. Of the following , the MOST likely radiographic findings expected for this infant are ?

- a. Air bronchograms, diffusely hazy lung fields, and low lung volume
- b. Cardiomegaly, hazy lung fields, and pulmonary vascular engorgement
- c. Fluid density in the horizontal fissure, hazy lung fields with central vascular prominence, and normal lung volume
- d. Gas-filled loops of bowel in the left hemi thorax and opacification of the right lung field
- e. Patchy areas of diffuse atelectasis, focal areas of air-trapping, and increased lung volumes

85- All of the following are correct about hematuria in children except :

- a. Hematuria associated with anemia is characteristic of urological causes of hematuria
- b. Glomerular hematuria is frequently associated with hypertension.
- c. Hematuria originating from lower urinary tract has a bright red color.
- d. Hematuria associated with proteinuria greater than 1000 mg/dl indicates glomerular disease
- e. Passage of clots suggests a bleeding /coagulopathy cause of hematuria.

86- Which of the following is the most important step in managing a patient with potassium level of 7.8 mEq/L :

- a. Start Sodium polystyrene Sulfonate (kayexalate)
- b. Start sodium bicarbonate infusion
- c. Start labetalol
- d. Start IV calcium gluconate
- e. Start Glucose 10 % infusion

87- Which of the following is a wrong statement ?

- a. factor 11 deficiency is of somatic inheritance and need a provocation to be manifested clinically
- b. mixing study is a method of screening in hemophilia
- c. when hemarthroses happens, septic joint should be excluded
- d. bleeding time will be prolonged in hemophilia**
- e. factor 7 can be given when antibodies formed against the factor concentrate

88- Regarding headache which statement is not matching ?

- a. early morning headache and vomiting >> posterior fossa tumor
- b. cyclic vomiting >> complicated migraine**
- c. papilledema with normal brain CT >> pseudo tumor cerebri
- d. daily frontal headach >> tension headache
- e. recurrent with free intervals >> migraine

89 - A 10-month-old infant has poor weight gain, a persistent cough, and a history of several bouts of pneumonia . The mother describes the child as having very large, foul-smelling stools for months. Which of the following diagnostic test is likely to result in the correct diagnosis of this child?

- a. CT of the chest
- b. Serum immunoglobulins
- C. PPD skin test
- d. Inspiratory and expiratory chest x-ray
- e. Sweat chloride test**

90- Regarding Infants of the diabetic mother, all of the following is true, except :

- a. Usually develop hypoglycemia on the first day of life
- b. Are large for gestational age if maternal diabetes is uncontrolled
- c. Sacral agenesis is one of the congenital anomalies seen
- d. Are at increased risk of developing diabetes mellitus in future
- e. Have lowered risk of respiratory distress syndrome

91- All of the following is associated with ambiguous genitalia in a female Except :

- a. 21 alpha hydroxylase deficiency
- b. 11 beta hydroxylase deficiency
- c. 17 alpha hydroxylase deficiency
- d. 3 beta Hydroxysteroid dehydrogenase
- e. Aldosterone synthetase deficiency

92- Complications of intravenous immunoglobulin (IVIG) therapy include all of the following Except:

- a. Anaphylaxis
- b. flushing
- c. Transmission of HIV
- d. Aseptic meningitis
- e. Systemic reactions

93- A 20 day old male baby found to have asymmetrical right and left limbs with large umbilical mass and hypoglycemia , all of the following are needed Except :

- a. renal ultrasound
- b. abdominal ultrasound
- C. alfa fetoprotein
- d. eye exam
- e. hearing exam

94- Children with down syndrome are at increased risk for all of the following Except:

- a. Celiac disease
- b. Hypothyroidism
- c. Short stature
- d. Hypertonia
- e. Leukemia

95- At 43 weeks gestation, a long, thin infant is delivered. The infant is apneic, limp, pale, and covered with "pea soup" amniotic fluid. The first step in the resuscitation of this infant at delivery should be :

- a. Suction of the trachea under direct vision
- b. Artificial ventilation with bag and mask
- c. Artificial ventilation with endotracheal tube
- d. Administration of 100% oxygen by mask
- e. Catheterization of the umbilical vein

96- All these matches are true except :

- a. Croup --- mostly caused by influenza virus
- b. Acute epiglottitis --- thumb sign on lateral x-ray of the neck
- c. Bacterial Tracheitis --- staph aureus is the most common organism
- d. Acute otitis media --- conductive hearing loss
- e. Peritonsillar abscess --- deviation of the uvula

97- Regarding congenital hypothyroidism, all the following are true Except :

- a. More common in female than male
- b. The most common cause is thyroid dysgenesis
- c. Most infant are symptomatic at birth
- d. 10% of patient with congenital hypothyroidism have associated congenital anomalies
- e. The dose of thyroxin given in infancy is higher than what is given later in adulthood

98- One of the following practices is recommended :

- a. exclusive goat milk consumption under the age of one year
- b. consumption of one liter of cow milk formula at 1 to 2 year of age
- c. vitamin D Supplements to exclusive breast fed baby
- d. introduction of 3 types of food upon the start of weaning
- e. discontinuation of iron therapy once the HB level increased

99- Regarding prenatal history and maternal condition during pregnancy, all the following are matched , except :

- a. Gestational diabetes: Large for gestational age baby (LGA)
- b. Maternal preeclampsia: Premature delivery and Intrauterine growth restriction (IUGR)
- c. Oligo-hydramnios: Duodenal atresia
- d. Maternal Blood group: Neonatal hemolytic disease
- e. Maternal Hepatitis B: Early administration of Hepatitis B vaccine and IG to the baby

100- Testing for celiac disease in children and adults recommended with one of the following:

- a. Oral ulcer
- b. Atopic dermatitis
- c. Dermatitis herpetiformis
- d. Erythema nodosum
- e. Seborrheic dermatitis

101(Unknown order) - A 7-week-old male infant presents to your clinic because of blood in the stool. He is currently having 5-6 loose stools per day with blood mixed in with the stool. The patient has not had any fever, abdominal distension, irritability, vomiting, or change in appetite .On physical exam he found to have itchy erythematous skin rash on face and trunk. All the following are true, except:

- a. Baby who are exclusively breast-fed are protected
- b. This condition is either IgE or non IgE mediated
- c. IgE mediated is more to have skin manifestation
- d. Challenge elimination test is diagnostic
- e. This condition may cause iron deficiency anemia

6th year Final exam – 2021

1-Which statement is not true regarding auto immune encephalitis?

Select one:

- a. autoantibodies: are present in blood as well as cerebrospinal fluid (CSF).
- b. the most common presenting symptoms is alteration of consciousness.**
- c. most frequently associated tumor is ovarian teratoma.
- d. Electroencephalogram (EEG) may be abnormal, (extreme delta brush) may support the diagnosis.
- e. Anti-N-Methyl-D-aspartic acid is the most frequent and best characterized antibody receptor.

2- All of the following are correct about post streptococcal glomerulonephritis (PSGN) except: Select one:

- a. about 10% of the cases might present with nephrotic range proteinuria
- b. positive anti DNAase B is supportive of the diagnosis
- c. a low C3 level at presentation is required for diagnosis
- d. is preceded by an URTI in most cases
- e. blood pressure is expected to remain elevated in the first 6 months of illness**

3- A 2 year old child presented to emergency department with history of ingestion of 6 tabs of aspirin (100mg/tab) 2 hours ago, the best step in management after stabilization : Select one:

- a. gastric lavage
- b. activated charcoal
- c. urinary alkalinization**
- d. hemodialysis
- e. bowel lavage

4- A 3 year old male patient presented with recurrent pneumonia. You suspected cystic fibrosis as the underlying cause. All of the following points will support your diagnosis except: Select one:

- a. Delayed passage of meconium
- b. Hyponatremic hypochloremic metabolic alkalosis
- c. Presence of steatorrhea and Failure to thrive FTT.
- d. Unilateral digital clubbing**
- e. Bronchiectasis

5- 3 year old male patient, known case of SCD (sickle cell disease), presented with history of fever and difficult breathing following 3-day history of painful crisis, all of the following are true except: Select one:

- a. O₂ supplement and intravenous fluid are helpful in reversal of sickling
- b. detailed musculoskeletal exam should be performed
- c. pain killers such as NSAID are recommended more than opioids as it may worsen the acute chest symptoms**
- d. macrolides should be added to the antibiotic regimen
- e. acute chest syndrome cannot be diagnosed if chest x-ray findings are absent

6- 2 years old boy presented with fever, T=39 for 2 days, hypoactivity and vomiting and when he arrive to ER he start to have seizure, after you stabilize the patient you did for him CT scan found to have a focal lesion in the left temporal lobe, the management of this patient should include :

- a. Phénobarbital
- b. Carbamazepine
- c. erythromycin
- d. Acyclovir
- e. Phenytoin

7- A 12-hour-old full term male infant, who has been feeding poorly, becomes hypoactive, tachypnic with grunting. Which of the following initial tests has the lowest diagnostic yield?

Select one:

- a. Chest radiograph
- b. Complete blood count
- c. Urine culture
- d. Blood culture
- e. Glucose level

8- A 6-year-old presented with a persistent rhinorrhea. He had a cold about 2 weeks ago but continues to have a blocked nose and a constant cough, which is worse at night. He has no fever but his mother says that he appears more tired than usual. On examination, the child has a purulent nasal discharge, nasal mucosal erythema, and allergic shiners, he otherwise appears healthy. Your best next step in management is:

Select one:

- a. give the 2 weeks of oral amoxicillin-clavulanate
- b. give nasal decongestant and antihistamine for 5 days
- c. give the patient oral amoxicillin-clavulanate and nasal corticosteroids
- d. do sinus x-ray
- e. do sinus aspirate culture

9- Which statement is not true regarding sutures and anterior fontanel closures?

Select one

- a. early closure of coronal suture leads to Dracheocephaly
- b. early closure of sagittal suture lead to schaphocephay
- c. Congenital hypothyroidisms lead to late closure of anterior fontanel
- d. Cranium bifidum is presented with early closure of. Fontanel
- e. delayed closure anterior fontanel is considered after 18 months ago

10- All of the following are true regarding evaluation of a child with constipation, except: Select one:

- a. Anal fissure is a common complication of functional constipation
- b. Diagnosis of functional constipation doesn't need abdominal XRAY to be established
- c. Lower back and lower limb neurological exam are important steps in evaluation
- d. Digital rectal exam (DRE) is mandatory to confirm the diagnosis of functional constipation
- e. Osmotic laxatives are first line in medication treatment of functional constipation

11- All are true about hypertension in children except

Select one:

- a. the blood pressure drop should target below < 90th % in patients with renal disease
- b. Children suspected of white coat hypertension are best diagnosed with ambulatory blood pressure monitoring.
- c. obese patients with stage 1 hypertension are best treated with combined therapy
- d. patient with elevated blood pressure are encouraged to follow lifestyle modification
- e. regular blood pressure testing should be part of physical examination after the age 3 years

12- You are advised by the obstetrician that the mother of a baby he has delivered is a carrier of hepatitis B surface antigen (HBsAg-positive). The most appropriate action in managing this infant would be to:

Select one:

- a. Screen the infant for HBsAg.
- b. Isolate the infant for enteric transmission.
- c. Screen the mother for hepatitis B "e" antigen (HBeAg).
- d. Administer hepatitis B immune globulin and hepatitis B vaccine to the infant.
- e. Do nothing because transplacentally acquired antibody will prevent infection in the infant

13- All of the following are true about cyclosporine adverse effects except:

Select one:

- a. Hypertension
- b. Hemorrhagic cystitis
- c. Gingival hypertrophy
- d. Hyperkalemia
- e. Hirsutism

14- Jitteriness is characterized by all the following except

Select one:

- a. not associated with ocular deviation
- b. It is stimulus sensitive
- c. easily stopped with passive movement of the limb
- d. no autonomic changes are associated with it
- e. There is alteration of consciousness

15- 4 days old male baby is brought to the ER by his parents because he has abdominal distension and he is still not passing stool till now, he had no vomiting. On examination he has epicanthal folds, depressed nasal bridge and large protruding tongue and flat occiput, the abdomen is distended without palpable masses. The most likely diagnosis in this patient is: Select one:

- a. duodenal atresia
- b. volvulus
- c. annular pancreas
- d. Hirschsprung's disease
- e. Cystic fibrosis

16- 6 years old male patient with polyuria and polydipsia of 2 weeks, all of the following is suggestive of nephrogenic DI except:

Select one:

- a. High serum sodium
- b. Low urine osmolality
- c. Low urine specific gravity
- d. Increase in urine osmolality after desmopressin administration
- e. High serum osmolality

17- Which statement is not true regarding transverse myelitis?

Select one:

- a. nerve conduction study is diagnostic
- b. there is permanent sphincters dysfunction
- c. in CSF there is pleocytosis.
- d. pain temperature and fine touch are affected
- e. there is sensory level

18- Which statement is not matching?

Select one:

- a. Ethosuximide (Zarontin) — Absence Epilepsy
- b. tomoxetine (Strattera) — —attention deficit hyperactive disorder
- c. Acetazolamide (Diamox) - ■ -Pseudo tumor cerebr
- d. Botulium toxin (Botox) — Spastic cerebral palsy
- e. methyl phenidate (Ritalin)-complicated migraine.

19- 2 year old female child presented to you with history of 100 ml Paracetamol ingestion of 250mg/5ml all of the following are true except:

Select one:

- a. NAPQI is the accumulated toxic material
- b. urinary alkalinazation is the best method for elimination
- c. liver function test, Prothrombin time and kidney function test are essential first line labs
- d. previous liver disease makes the toxicity more severe
- e. if the time of ingestion is unknown and the patient is clinically deteriorated and abnormal liver function found, antidote should be given

20- Regarding brucellosis all the following are true except:

Select one:

- a. is caused by a Gram positive bacillus
- b. causes spondylitis
- c. combination therapy is recommended to decrease risk of relapse
- d. headache, mental inattention, and depression can occur
- e. is contracted from unpasteurized milk

21- Regarding immunization; which statement is not true Select one:

- a. eradication is worldwide meanwhile elimination is in definite area
- b. myelitis eradication is medically possible
- c. Small pox is the only human disease eradicated so far O
- d. measles is eliminated in Jordan
- e. diarrhea is not controlled yet in Jordan

22- A 6 month old baby presented with tachycardia, tachypnic, poor feeding of 3 months duration, his Physical Exam revealed continuous machinery murmur and wide pulse pressure, the most likely diagnosis is:

Select one:

- a. Pulmonary stenosis
- b. Aortic stenosis
- c. Ventricular septal defect
- d. Patent ductus arteriosus
- e. Atrial septal defect

23- A 6 year old male asthmatic patient presented to the ER department with increase coughing, wheezes and respiratory distress. On exam he was distressed with pulse oximetry of 88 % on room air, and bilateral diffuse biphasic wheezes on auscultation, he was managed with short acting beta agonist and systemic corticosteroids and received oxygen by 3 L nasal cannula, he was reassessed after that .The patient was conscious, alert but still distressed and pulse oximetry is 88 % ,his Venous blood gas (VBG) shows PH :7.32/pC02:55/HC03 :19. Your next step in management is:

Select one:

- a. Increase the flow of the nasal cannula to 4 L/minute
- b. Change to face mask with flow of 5 L/minute
- c. Give high flow nasal cannula with flow adjusted according to the patient weight
- d. Intubate the patient and start on mechanical ventilation
- e. Continue to give nebulized short acting beta agonist and repeat VBG after 1 hour

24- One of the following is a wrong match:

Select one:

- a. opioids ...naloxone.
- b. iron ...deferoxamine
- c. benzodiazepines....flumazenil
- d. aspirin glucagon
- e. CO 02

25- Regarding sub-acute sclerosing pan encephalitis (SSPE) one is not matching; Select one:

- a. history of measles or measles vaccine 2-12 years before illness
- b. behavior changes first manifestation
- c. outcome variable
- d. seizures myoclonic type

26- A 12-year-old female presents to your clinic with jaundice. The mom reports that this is the third time that she has been jaundiced in the past 2 years. She denies abdominal pain, anorexia, weight loss, fevers, light colored stools, or dark urine. Mother reported a poor school performance of her child in the last few months especially in hand writing skills. Family history is negative for any gastrointestinal or liver disease. What is the most likely cause of this presentation?

Select one:

- a. Gilbert's syndrome
- b. attention defect hyperactivity disorder (ADHD)
- c. A1-antitrypsin deficiency
- d. Wilson Disease
- e. Hemochromatosis

27- A 13-year-old boy is brought to the clinic because he has been experiencing an itchy skin rash for the past 3 weeks involving his arms and legs. His past medical history is notable for type 1 diabetes, and his blood sugars are well controlled with insulin. The patient has lost 5 kg since his last checkup about 4 months ago. A physical exam reveals conjunctival pallor, and an erythematous vesicular rash that is distributed symmetrically over the extensor surfaces of the elbows and knees. Lab results are collected and shown below: Hemoglobin: 9.8 g/dL, Mean corpuscular volume: 70 fL. Fecal occult blood testing is negative. What is the initial diagnostic test that might help explain the presentation in this patient?

Select one:

- a. Skin prick test
- b. Glycosylated hemoglobin (HbA1C)
- c. Thyroid antibodies
- d. Blood film and iron studies
- e. Anti- tissue transglutaminase antibodies

28- One of the following is the most common cause of recurrent gross hematuria in children: Select one:

- a. Wilms tumor
- b. Goodpasture syndrome
- c. Mesangioproliferative GN
- d. IgA Nephropathy
- e. sickle cell disease

29- All of the following are true statements except

Select one:

- a. premature infants are particularly susceptible for iron deficiency anemia
- b. iron should not be mixed with milk to improve the absorption
- c. constipation is not usual side effect of iron treatment in children
- d. teeth staining is permanent and cannot be avoided
- e. cautious correction of chronic iron deficiency with transfusion should be done in thermodynamically unstable patients

30- All of the following are correct about managing chronic kidney disease (CKD) except: Select one:

- a. Patients with anemia should receive Iron supplement and erythropoietin
- b. patients should receive one alpha to control secondary hyperparathyroidism
- c. The best antihypertensive shown to slow progress to ESRD is ACE and ARBs inhibitors
- d. Children with CKD benefit from using Growth Hormone therapy
- e. Dialysis is to be initiated when patient reaches a GFR of 25 ml/min

31- All are true regarding bronchiolitis except:
Select one:

- a. Bronchiolitis is a seasonal disease, dominating winter months.
- b. majority of cases have risk factors for the development of this condition
- c. most commonly caused by RSV virus
- d. palivizumab a monoclonal antibody which reduces hospital admission in high-risk infants
- e. Spreading of RSV can be prevented with respiratory droplet and contact precautions

32- Regarding cerebrospinal fluids (CSF); all are true; except
Select one:

- a. pleocytosis lymphatic viral meningitis
- b. low protein low sugar TB meningitis
- c. normal findings Pseudotumor cerebri
- d. negative culture partially treated bacterial meningitis
- e. high protein only Guillian Barre Syndrome

33- You are seeing a 2-month-old girl for follow-up after a hospitalization for acute gastroenteritis caused by rotavirus two week before. The girl has an increased number of very watery stools since her illness began till now. She appears well hydrated. She is on regular infant formula. Of the following, the MOST appropriate approach to managing this infant's diarrhea is to Select one:

- a. Change to a lactose-free formula for the next few weeks
- b. Change to casein hydrolyzed formula
- c. Give her only oral rehydration solution (ORS) until the diarrhea resolves
- d. Readmit her to the hospital for administration of intravenous fluids
- e. Repeat her stool studies to confirm the diagnosis of rotavirus infection

34- All of the following is an indication for urgent endoscopy in cases of foreign body ingestion except Select one:

- a. disc battery ingestion impacted in the oesophagus
- b. sharp objects
- c. an object with more than 4*2 cm in diameter
- d. rounded (ball like toy)
- e. history of drooling post corrosive material ingestion

35- A 6 days old breast fed baby had poor feeding and vomiting since birth , on exam he is jaundiced , has hepatomegaly and show excessive bruising, his labs show elevated AST/ALT prolonged bleeding time and aminoaciduria .Galactosaemia is suspected , however urine reducing substance was negative , what is the most appropriate next step :

Select one:

- a. Oral Galactose tolerance test
- b. Challenge with lactose containing formula
- c. Blood analysis to measure Galactose 1 phosphate uridyl transferase enzyme activity
- d. Liver biopsy
- e. Kidney biopsy

36- A 6 year old boy with nephrotic syndrome has a relapse 2 days ago, he presents to the Emergency Room with fever, diarrhea and abdominal pain. On examination he looks sick, is in pain. His BP is 100/60, temp 40c and his pulse 160/min and respiratory rate 30 /min; he has massive ascites and rigid abdomen on exam. His labs showed: CBC: WBC 28, Platelet 250, Hb 13g/dl, Creatinine, Urea and electrolytes are normal. What is the best next step in the management?

Select one:

- a. Do doppler renal US
- b. Do peritoneal tap
- c. Do chest x-ray
- d. Do CT abdomen
- e. Do urine analysis

37- A 1 year old male patient presented with history of pallor since 2 months, his physical examination is normal except for pallor , his Hb reading was 10 g/dl, mcv :55 fL,RDW:12 f ferritin :150 (20-250ng/ml), and Hb electrophoresis is normal, which of the following is a possible diagnosis:

Select one:

- a. iron deficiency anaemia
- b. HB H disease
- c. B-thalassemia intermediate
- d. B -thalassemia major
- e. alpha thalassemia trait

38- The following Hb electrophoresis HB F :70% HBS: 20% HBA:10%

Select one:

- a. sickle cell anemia
- b. sickle B-intermediate (B+)
- c. B-thalassemia major
- d. alpha thalassemia intermediate
- e. normal testing

39- All the following can lead to secondary microcephaly except

Select one:

- a. Congenital Infections
- b. fetal alcohol syndrome
- c. Radiation
- d. hypoxemic ischemic encephalopathy (HIE)
- e. familial microcephaly

40- A 4 month old girl known to have severe pelvi-ureteric junction obstruction is seen in clinic for diarrhea and fever 39c of one day. Her urine analysis showed numerous WBC, 4-6 RBC, +1 protein. CBC: WBC 23, Hb 10.2, platelet 245. Which of the following is the best option for her antibiotic treatment?

Select one:

- a. Ampicillin and gentamicin IV
- b. Cefuroxime IV
- c. Cefixime oral
- d. Nitrofurantoin oral
- e. vancomycin and ceftriaxone IV

41- Regarding pediatric parameters, all the following are normal or benign, except:

Select one:

- a. a palpable liver 2 cm below costal margin in a 6-year-old child
- b. Erythema toxicum in a 2-day-old newborn
- c. Heart rate 120/min in a 6-month old infant
- d. A grade 2 diastolic murmur in a 2-month- old infant
- e. Potassium level 5.7 mmol/L in a 1-week-old newborn

42- A 4 year old male patient presented with high grade fever and wet cough of 1 week duration. He has good oral intake .He was previously healthy and not on any chronic medication, and no personal or family history of atopy. On physical examination he was febrile with respiratory rate of 50 breath / minute, and right sided middle lobe crepitation. He received amoxicillin for 3 days without improvement .Your next step in management is:

Select one:

- a. Do chest CT scan
- b. Start short acting beta agonist nebulizer and oral steroid for 5 days
- c. Admission and start ceftriaxone iv
- d. Add on clarithromycin orally and reassess after 48-72 hours
- e. Reassurance since this is viral pneumonia and no need for treatment.

43- Regarding Iron deficiency anemia (IDA) one of the following is true :

- a. only small fraction of iron in the diet is absorbed for erythropoiesis so the diet is not important in pathogenesis
- b. chronic blood loss is the leading cause
- c. formulation of iron treatment will differ in the concentration of iron but not the side effect
- d. Hb electrophoresis is not needed in the unresponsive cases of IDA
- e. menzer index means (mcv/rbc) and will be more than 11 in iron deficiency anemia.

44- All of the following inborn error of metabolism is autosomal recessive in inheritance except: Select one:

- a. Galactosaemia
- b. Tyrosenemia
- c. Glycogen storage disease type 3
- d. Glutaric aciduria type 1
- e. **Ornithine transcarbamylase deficiency (OTC)**

45- A 2-month-old baby referred to clinic due to shortness of breath, on physical exam he was found to have heart rate of 165/minute, hepatomegaly, chest retractions, gallop rhythm and pansystolic murmur. His current weight is 3.9 kg. He was born as a product of normal vaginal delivery at full term with a birth weight 3.6 kg. He is on breast feeding 7 times/day and occasionally taking formula. The most likely explanation of his growth delay is:

Select one:

- a. Insensible water loss, and he will gain weight later
- b. Decreased caloric intake
- c. **Increased metabolic demands**
- d. His growth pattern is normal as other children
- e. This baby is suspected to have underlying malabsorptive disease

46- An XY 46 new born is noted to have hyperpigmentation of his skin and genitalia, perineal hypospadias with bifid scrotum, presented with severe dehydration, acidosis and hyperkalaemia at the age of 2 weeks, the most likely diagnosis is :

Select one:

- a. 21 alpha hydroxylase deficiency
- b. **3 B hydroxy steroid dehydrogenase deficiency**
- c. 11 B hydroxylase deficiency
- d. 17 alpha hydroxylase deficiency
- e. Lipoid adrenal hyperplasia

47- The MOST important bed side tests done during initial resuscitation of ill infants are O₂ saturation measurement and acutely measure which of the following:

Select one:

- a. serum calcium.
- b. blood glucose.
- c. **blood gases.**
- d. blood urea.
- e. serum sodium.

48- An infant has been diagnosed with phenylketonuria after neonatal screening, ONE IS CORRECT Select one:

- a. It is caused by inability to produce phenylalanine
- b. **Seizures can occur**
- c. The infant will be severely affected at birth
- d. The urine is odourless
- e. Untreated individuals have normal IQ

49- 5 year old male patient presented with jaundice and sudden pallor, all of the following are true except:

Select one:

- a. extravascular hemolysis usually associated with splenic enlargement
- b. intravascular hemolysis can be related to enzyme content of the RBCs
- c. spherocytosis is a typical example on autosomal dominant inherited disorder
- d. blood film, bilirubin ,LDH and haptoglobin are the investigations of choice
- e. **indirect coombs test is the diagnostic investigation for autoimmune hemolytic anemia**

50- Modalities of treatment for epilepsy include all the following except;

Select one:

- a. **intrathecal baclofen**
- b. Ketogenic diet
- c. vagal nerve stimulation
- d. surgery
- e. Pharmacological treatment

51- The father of a 4 year old Jordanian girl is recently diagnosed with pulmonary tuberculosis and started on treatment; she is known to have reactive airway disease on Inhaled corticosteroid. She developed dry cough since 2 weeks and she has right sided wheezes on auscultation. Her PPD skin test was 18 cm. your next step in management is:

Select one:

- a. **Do Gastric lavage for AFB (acid fast bacilli) and CT chest**
- b. Do interferon gamma releasing assay
- c. Reassurance and follow up after 2 months
- d. Treat with Isoniazid, rifampin, pyrazinamide, and ethambutol for 2 months and then isoniazid and rifampin for another 4 months
- e. Give short acting beta agonist for 3 days

52- One statement is not true in regarding encopresis

Select one:

- a. encopresis means fecal incontinence without organic cause
- b. considered in children 4 years age or older
- c. **it is 3 to 4 times more in females than males**
- d. 30% to 40% of these children have relevant behavioral disorders
- e. per rectum (PR) examination differentiate constipation from non-constipation

53- A 5 YEAR old female patient presented with history of skin spots and gum bleeding all of the following is true except Select one:

- a. the skin spots must be non blanchable on examination
- b. CBC and pt/ptt are the primary screening testing
- c. if bleeding time is mainly affected vWF (von Willebrand factor) activity and function should be studied
- d. **factor deficiency should be checked by doing the mixing study**
- e. bone marrow and biopsy is essential if the diagnosis is uncertain

54- An 11-year-old girl was referred for evaluation of a heart murmur. She has right knee pain and swelling that was preceded by right ankle pain and swelling. Three weeks prior to the presentation she had a fever and sore throat. Carditis in this condition is characterized by all of the following except:

Select one:

- a. Carditis occurs in approximately 50-60% of all cases of acute rheumatic fever
- b. Most rheumatic heart disease is isolated aortic valvular disease or combined mitral and mitral valvular disease.**
- c. Subcutaneous Nodules are associated with repeated episodes and severe carditis
- d. Approximately 50-70% of patients with carditis during the initial episode of acute rheumatic fever recover with no residual heart disease
- e. endocarditis (valvulitis) is a universal finding in rheumatic carditis

55- Polycythemia in the neonatal period is associated with all of the following, except: Select one:

- a. Trisomy 21.
- b. Sepsis.**
- c. Maternal diabetes.
- d. Intrauterine growth restriction.
- e. Cyanotic congenital heart disease.

56- A 1-week-old baby presented to the ER with seizure, his glucocheck reading was low, so was given dextrose water 10% (D10W) and seizure stopped, He is exclusively on breast feeding and his perinatal profile is insignificant. On physical exam he was lethargic, jaundiced, and has bilateral leukocoria. All the following are true except:

Select one:

- a. His presentation is due to galactokinase enzyme deficiency**
- b. Soya formula is a good choice for management
- c. Proximal renal tubular acidosis is a complication
- d. Galactomal recessive disease

57- Examination of infant with Meningocele shows all the following except; Select one:

- a. flaccid paralysis of the lower extremities,
- b. lack of response to touch and pain in lower extremities
- c. increase of deep tendon reflexes**
- d. Constant urinary dribbling and a relaxed anal sphincter may be evident.
- e. Abnormalities of the lower extremities (including clubfeet)

58- All of the following is true regarding aplastic anemia except:

Select one:

- a. organomegaly and adenopathy is rarely present
- b. the cells are usually microcytic and pancytopenia is a consistent feature**
- c. those patients may have features like microcephaly, short stature, cardiac and renal anomaly
- d. it is considered a premalignant condition
- e. corticosteroid and blood transfusion are of the main lines of management

59- All of the following are causes of Prerenal AKI (Acute kidney injury) in children except:
Select one:

- a. gastroenteritis
- b. heart failure
- c. Severe burn
- d. Indomethacin**
- e. infective endocarditis

60- Regarding Respiratory Distress Syndrome (Hyaline Membrane Disease), all of the following factors decrease the risk of RDS, except :

- a. Use of antenatal steroids
- b. chronic maternal hypertension
- c. Prolonged rupture of membranes
- d. Maternal narcotic addiction
- e. Cesarean delivery without preceding labor**

61- All of the following is a correct statement regarding craniosynostosis except Select one:

- a. craniosynostosis means early closure of the sutures
- b. surgical intervention is needed for cosmetic causes
- c. it may be related to certain syndromes
- d. optic nerve entrapment and affection is a rare complication**
- e. it is one of the causes of microcephaly

62- Which statement is not true regarding (COVID-19) vaccines?

Select one:

- a. Inactivated virus Vaccine (Sino pharm)
- b. Viral vector Vaccine (Oxford/AstraZeneca)
- c. Encapsulated mRNA Vaccine (BioNTech/Pfizer)
- d. Virus like Particle Vaccine (Novavax)
- e. Live attenuated virus vaccine (Johnson and Johnson vaccine)**

63- Regarding management of DKA, all the following is true, except:

Select one:

- a. Normal saline is used in the 1 st 4-6 hour then switched to half saline
Buse
- b. Potassium chloride is added to the fluid only when the patient is hypokalemic**
- c. Sodium bicarbonate is not recommended as it may increase the risk of developing cerebral edema
- d. Insulin infusion should be continued if the patient still in acidosis even if his sugar reading was normalized.
- e. Blood sugar should be monitored hourly
- f. Mannitol 0.5-1 mg /kg or hypertonic saline 3% are used in the treatment of cerebral edema

64- Regarding rickets, all of the biochemical changes are true except:

Select one:

- a. Phosphate is increased in patients with renal rickets
- b. PTH(parathyroid hormone)is normal in patients with x linked Hypophosphatémie rickets
- c. $1.25(\text{OH})_2 \text{ Vit d}$ is low in patients with renal rickets
- d. **25 OH Vit d is low in patients with Vitamin D dependant rickets type 1**
- e. PTH increased in patients with nutritional rickets

65- On evaluating a 3 year old boy with recurrent febrile UTI since the age of 1 year. You find he has high blood pressure. His Physical exam is unremarkable and his investigation CBC and KFT are normal. Which is the best next step in his evaluation

Select one:

- a. **DMSA scan (NOTE : Normal KFT in the ques. is due to healthy kidney/nephrons compensation)**
- b. Urine Culture
- c. Renal CT scan
- d. Renal MRI
- e. DTPA

66- Which of the following scenarios is most suggestive of abuse?

Select one:

- a. Differenractures in 7 months old non identical twint age f
- b. A tibial fracture in toddler with blue sclera
- c. Perianal warts in baby of 6 months
- d. 3 circular blisters with raised crusty borders occurring on the face and hand of a toddler
- e. **Multiple bruises of different ages in a toddler**

67- A 15-year-old girl is admitted to the hospital with severe malnutrition due to anorexia nervosa. She weighs 30 kg and is 160 cm tall. She has bradycardia and orthostatic hypotension. You plan to stabilize her medically and begin nasogastric tube feeding. Of the following, the electrolyte abnormality that is MOST likely to occur during the first week of her treatment is Select one:

- a. Hypercalcemia
- b. Hyperphosphatemia
- c. Hypocalcemia
- d. Hyponatremia
- e. **Hypophosphatemia**

68- A 5 year old male patient presented with history of purpuric skin rash on the buttocks and ankle pain of 3 day duration, which of the following is wrong

Select one:

- a. if urine analysis revealed RBCS then steroid treatment should not be initiated immediately
- b. abdominal or gastrointestinal manifestations should be considered and need surgical intervention in some cases
- c. **as the patient has a purpuric skin rash then platelet count should be checked and it's expected to be low**
- d. IV immunoglobulin is not needed in most types of these type of cases
- e. the skin rash can be recurrent in the acute period and later on if any stress happened

69- All of the following are correct combinations about RTA (renal tubular acidosis) except Select one:

- a. Fanconi disease severe Rickets
- b. proximal RTA normal anion gap metabolic acidosis
- c. proximal RTA urine with pH more than 6.0
- d. distal RTA Nephrocalcinosis
- e. RTA (type 4) Hyperkalemia

70- 9 months old with TOF is admitted to hospital with increased hypercyanotic spells, all the following are used in management except:

Select one:

- a. 100% O₂
- b. B-blocker
- c. Knee chest position
- d. Morphine
- e. Dopamine infusion (this)

71- 7 year old male patient presented with swelling of the left knee, limping and pallor, on examination he has HR: 140 and pale, with decreased range of motion on the knee joint, his Hb: 7 g/dl, PTT: 65 seconds. One of the following is true:

Select one:

- a. factor transfusion should be done before aspiration
- b. platelet transfusion is essential in these cases
- c. hepatitis b titer is not of value in the follow up of the above case.
- d. the mode of inheritance of the above condition is autosomal recessive
- e. there is no increased risk of bleeding in the same joint in subsequent times

72- All of the following are correct about Hemolytic Uremic Syndrome (HUS) except: Select one:

- a. About 50% of children with typical (D+ HUS) will require urgent dialysis
- b. Early antibiotic use after the onset of bloody diarrhea decreases the risk of renal failure
- c. Both hemodialysis and peritoneal dialysis can be used with similar efficacy
- d. atypical HUS (aHUS) accounts for about 10% of the cases
- e. atypical HUS due to inherited complement deficiency has a recurrent course

73- Which statement is not true regarding NUSINERSINE as treatment for spinal muscular atrophy Select one:

- a. it is the first treatment approved for spinal muscular atrophy
- b. it is antisense oligonucleotide
- c. it makes SMN2 gene copy work as SMN1
- d. it is indicated to treat patients less than 2 years old
- e. it is given intrathecal

74- A 7-year-old boy is brought to the ER by his parents because he woke up from sleep with acute onset of coughing, increased work of breathing. There is no history of fever or upper respiratory tract infection symptoms. Family history is positive for allergic rhinitis in the mother. On examination the child is alert and awake and in moderate respiratory distress. His pulse oximetry is 89% on room air. Lung examination shows decreased air entry diffusely with scattered wheezes bilaterally. He was given 3 albuterol aerosols, resulting in significant improvement. His chest radiograph is normal except for hyperinflation. Which of the following is the most appropriate test to confirm the diagnosis in this patient?

Select one:

- a. Fractional excretion of nitric oxide.
- b. Elevated serum IgE
- c. Methacholine challenge test.
- d. Response to bronchodilators on pulmonary function testing.
- e. Skin testing

75- A 7-year-old presented with recurrent episodic abdominal pain in the last 5 months. All of the following are true, except:

Select one:

- a. Functional abdominal pain syndrome (FAPS) is the most likely cause
- b. Patients with FAPS are more likely to have psychological disturbances in adulthood
- c. Pain in right upper quadrant is more likely to be functional
- d. Behavioral and bio-psychosocial-modifying therapies are the preferred lines of therapy for FAPS
- e. Decreased threshold for pain in response to stimuli that are normally not uncomfortable in FAPS

76- All the following are risk factors for cerebral oedema in DKA except: Select one:

- a. New onset DM
- b. Age less than 5 years
- c. Higher initial Pco₂
- d. Insulin given as a bolus
- e. Higher initial BUN

77- A 7 month old male child presented with pallor and jaundice, his examination revealed hepatomegaly, pale conjunctiva and yellow sclera ,his HB :5 g/dl ,mcv:52, and predominant HB F on electrophoresis, which of the following is wrong :

Select one:

- a. monthly blood transfusion is needed to suppress ineffective erythropoiesis
- b. monthly ferritin level is the best to monitor iron toxicity
- c. splenectomy is needed in cases where hypersplenism occur and the need of transfusion increased
- d. follow up calcium, phosphor, PTH, and cardiac MRI is necessary
- e. bone marrow transplant is the definitive treatment

78- All these matches are true except:

Select one:

- a. Familial short stature —delayed puberty
- b. growth hormone deficiency — neonatal hypoglycemia
- c. Constitutional growth delay — proportionate short stature
- d. osteogenesis imperfecta— Blue sclera
- e. malnutrition —short stature with abnormal growth velocity

79- A 5 years old presented with headache of one month duration. This headache is worse in the early morning and during coughing, and associated with increase vomiting. This morning mother noted that his gait is unsteady, the most likely diagnosis in this patient is : Select one:

- a. pseudo motor cerebri
- b. cerebellar tumor.
- c. tension headache.
- d. migraine.
- e. aseptic meningitis

80- A 3-year-old child known to have biliary atresia and history of failed Kasai procedures presents with vomiting of blood. She was noted to be pale, and she complained of being light-headed. She then vomited a large amount of bright red blood, and she was taken to the ER. She has not had any fever, diarrhea, blood in her stool, or other episodes of vomiting. Her heart rate is 130 b/min, blood pressure 90/60, respiratory rate 28 /min . Her management may include all the following except: Select one:

- a. Acid suppression and octreotide
- b. Transfusion of RBCs, fresh frozen plasma (FFP) and platelets
- c. Gastric lavage should be performed
- d. Meckel's scan
- e. Emergent endoscopy if bleeding doesn't stop

81- Which of the following statements regarding tetralogy of fallot is correct?

Select one:

- a. Atrial septal defect is one of the 4 components of Tetralogy of fallot.
- b. Hyper cyanotic spells are common around 2-4 month of age.
- c. Finger clubbing usually develop within the 1 st few months of life.
- d. Most patient with TOF have left to right shunt across VSD
- e. The murmur heard in patient with TOF become louder during "TET spells".

82- All of the following is recommended, as initial investigation, in a patient presented with history of abdominal mass on the left side of the abdomen and hypertension, Except :

- a. urine collection for VMA
- b. eye examination
- c. abdominal CT scan
- d. examination of genitalia
- e. chromosomal count study

83- All the following are true in Multisystem inflammatory syndrome in children (MIS-C).
Except Select one:

- a. It is linked to coronavirus disease 2019 (COVID-19)
- b. The risk of ICU admission was higher patients with Kawasaki disease than (MIS-C) children
- c. Cardiac involvement was more common in patients with (MIS-C).than Kawasaki disease
- d. COVID-19 positivity 75.5% of children (MIS-C)and 20% in Kawasaki disease
- e. An inflammatory syndrome that resemble Kawasaki disease.

84- A 4-month-old baby, fully vaccinated, presents to the emergency room (ER) with a history of two days watery diarrhea up to 10 times/day, without blood or mucus and low grade fever. He developed vomiting many times and refused breast feeding.

His temperature is 38.7 C, heart rate 160/minute. On physical exam, he looks lethargic, capillary refill 3 seconds, anterior fontanel is sunken, and his mucus membrane is dry. One is true:

Select one:

- a. This patient can be treated with oral rehydration solution (ORS)
- b. Seizure in this patient is likely suggestive of Shigella
- c. This patient is considered to have moderate dehydration
- d. Stool culture is likely to show a growth
- e. Although vaccinated, Rota infection is still considered a cause of his diarrheal illness

85- Which statement is not true regarding myelitis vaccine?

Select one:

- a. OPV (Sabin vaccine) is live attenuated virus vaccine
- b. IPV (Salk vaccine) is killed virus vaccine
- c. OPV contain strains 1,2 and 3 of virus
- d. OPV can cut the community transmission of the wild virus
- e. IPV cannot cause vaccine associated paralysis (VAPP).

86- All the following are matched except:

Select one:

- a. T cell immunodeficiency: Low CD4, CD8
- b. B cell immunodeficiency: Recurrent infections starting after the age of 6 months
- c. Phagocytic defect: Recurrent skin abscesses
- d. Leukocyte adhesion defect: Neutropenia
- e. Terminal complement deficiency: Recurrent meningococemia

87- Which statement regarding historical Corona virus epidemics is not true? Select one:

- a. MERS 2012 (Middle East Respiratory Syndrome) has the highest mortality and the least prevalence
- b. COVID-19 has the least mortality and the highest prevalence
- c. SARS COV1 2002 (Severe Acute Respiratory Syndrome) has highest (about 34%) mortality rate
- d. CORONA virus undergo major shift every 8 years
- e. Bats are natural hosts for most subtypes of corona viruses

88- A 4-year-old boy complains of rectal bleeding on stool surface. He appears well and denies nausea or vomiting or abdominal pain. Heart rate and blood pressure are normal, Digital rectal exam is also normal. The best way to establish diagnosis:

Select one:

- a. Colonoscopy
- b. Meckles scan
- c. Abdominal US
- d. Barium enema
- e. Ad nominal XRAY

89- All these matches are true except:

Select one:

- a. Croup mostly caused by Parainfluenza virus
- b. Acute epiglottitis— thumb sign on lateral x-ray of the neck
- c. Bacterial Tracheitis staph aureus is the most common causative organism
- d. Acute otitis media — conductive hearing loss
- e. Lateral pharyngeal abscess medial deviation of the uvula

90- A 1 -week- old baby presented to the ER with seizure, his glucocheck reading was low, so was given dextrose water 10% (D10W) and seizure stopped, He is exclusively on breast feeding and his perinatal profile is insignificant. On physical exam he was lethargic, jaundiced, and has bilateral leukocoria, All the following are true except:

Select one:

- a. His presentation is due to galactokinase enzyme deficiency
- b. Soya formula is a good choice for management
- c. Proximal renal tubular acidosis is a complication
- d. Galactose level is high
- e. Autosomal recessive disease

91- Regarding acid base balance all of the following combinations are correct except Select one:

- a. Pyloric stenosis Metabolic alkalosis
- b. Chronic use of loop diuretics metabolic alkalosis
- c. Carbonic anhydrase inhibitor Wide anion gap acidosis
- d. Galactosaemia Fanconi syndrome
- e. Salicylate poisoning wide anion gap acidosis

92- Which of the following support the diagnosis of prematurity in physical exam? Select one:

- a. Ear with instant recoil.
- b. Gelatinous red translucent skin.**
- c. Crease over whole sole of the foot.
- d. Areola measures 10 mm bud.
- e. Both testes are descended into scrotum.

93- All of the following are correct about nephrotic syndrome in children except: Select one:

- a. 85 % of the children with Focal segmental sclerosis FSGS respond to steroid**
- b. Children with congenital nephrotic syndrome are very likely to have mutations
- c. Patients who relapse while are on taper prednisone are Steroid dependant
- d. Only 10 % of nephrotic syndrome cases are secondary
- e. The initial prednisolone treatment dose is 60 mg/m² /day for 4-6 weeks.

94- A 1-year- old boy presented with repeated infections in the last 4 months, including pneumonia, otitis media and sinusitis, he has persistent diarrhea and recent stool analysis shows giardia lamblia. Lymph nodes couldn't be palpated during exam. His CBC is normal but immunoglobul level is low for all immunoglobulin types. The most likely diagnosis is:

Select one:

- a. Cystic fibrosis
- b. X-linked hypogammaglobulinemia**
- c. Severe combined immunodeficiency (SCID)
- d. Hyper IgM syndrome
- e. Chronic granulomatous disease (CGD)

95- A 14-year-old boy has cystic fibrosis. He now complains of shaky hands. Neurologic examination demonstrates hyporeflexia and tremor with hands outstretched. Of the following, the patient's symptoms are MOST consistent with deficiency of

Select one:

- a. Vitamin A
- b. Vitamin B1 (thiamine)
- c. Vitamin C
- d. Vitamin D
- e. Vitamin E**

96- All of the following electrolytes are matched correctly except Select one:

- a. Hyponatremia —furosemide treatment
- b. Hypokalemia —pyloric stenosis
- c. Hypernatremia —21 hydroxylase deficiency**
- d. Hyperphosphatemia — primary hypoparathyroidism
- e. Hypocalcemia — hypoalbuminemia

97- All the following fractures are associated with child abuse, except:

Select one:

- a. Posterior rib fractures
- b. Classic metaphyseal fractures
- c. Supracondylar fractures of the humerus
- d. Long bone fractures in premobile child
- e. Simple linear parietal skull fracture

98- An infant is born at term, via prolonged spontaneously vaginal delivery requiring vacuum assisted device. He is noted to be jaundiced at 24 hours of life. Serum bilirubin is measured and shows indirect hyperbilirubinemia. All of the following should be obtained to evaluate the patient except: Select one:

- a. Blood typing.
- b. Coombs test.
- c. Complete blood count (CBC) with reticulocyte count.
- d. Peripheral smear.
- e. Liver ultrasound imaging.

99- A 4 hour old baby girl was admitted with increasing cyanosis, on examination her spo2 was 78% and she was alert and not distressed, which is the most likely diagnosis?

Select one:

- a. Diaphragmatic hernia
- b. Large VSD
- c. Transposition of great arteries
- d. Tricuspid atresia
- e. Atrial septal defect

100- One of the following is the best drug therapy for a 5 year old child with BP 140/90 and has Wilms tumor

Select one:

- a. Hydrochlorothiazide
- b. Propranolol
- c. Spironolactone
- d. Hydralazine
- e. Captopril

Pediatric final exam – 6th year – 2020

Dr. Omar Nafe'

- 1. 5 Years old with twitching of the left Hemi face and jerking of the lateral left hemi body and mild alteration of the consciousness, which occurred only during sleep. The diagnosis is?**
 - night terrors
 - **complex partial seizures (ronaldic Epilepsy) ✓**
 - Absence epilepsy
 - myoclonic epilepsy
 - atonic epilepsy
- 2. Regarding Transverse myelitis which statement is not true:**
 - There is sensory level
 - paresthesia of the lower limbs is the prominent feature
 - low back pain presenting feature
 - information is across the thickness of the spinal cord
 - **nerve conduction study is Diagnostic ✓**
- 3. A child who is aged three years and developmentally normal, is expected to perform which one of the following skills:**
 - count up to 20
 - Copy Square
 - **pedal tricycle ✓**
 - balance on one feet
 - brush teeth
- 4. regarding microcephaly all are true except:**
 - **it is defined as circumference that measures less than three is SD Below the mean of age and gender ****
 - Familial form is the most common form
 - congenital intrauterine infections are important to consider in differential diagnosis
 - normal development differentiate familiar from genetic microcephaly
 - **fetal alcohol syndrome is not Association****
 - **BOTH A AND E are right**
- 5. 4 years old boy is seen because he began to have trouble walking 3 months ago, motor development was normal until then, also he has walked with his toes a little, now he cannot climb stairs with his mother at home. On examination he's normal except for 4 \ 5 power in his hip extensor. the true statement about his condition is:**
 - **Has high CPK ✓**
 - amputation by age 25 years
 - muscles of the hands are affected
 - this disease is not associated with cardiac involvement
 - this disease is not associated with cognitive impairment

6. regarding Subacute sclerosingpanencephalitis (SSPE) what is not matching: select one:

- history of measles or measles vaccine --- 2 to 12 years before illness
- Behavior changes--- first manifestation
- **elevated Anti measles ab IgG --- AC on but not in CSF ✓**
- seizures --- myoclonic type
- electroencephalography EEG --- Diagnostic

7. regarding headache which statement is not matching:

- **Not associated with aura --- classical migraine ✓**
- early morning headache and vomiting --- posterior fossa tumor
- recurrent with three intervals --- migraine
- daily frontal headache --- tension headache
- papilledema brain CT --- pseudotumorcerebri

8. regarding hydrocephalus all are true except:

- **normal child with use of a 20 ml\hour of CSF ✓**
- total volume of CSF approximates 50 ml in an infant and 150 ml in an adult
- headache is common symptom in older children
- neonatal meningitis leads to a non-communicating type
- wide anterior fontanels. increased head circumference, sun sitting eyes are manifestations.

9. 3 years old boy comes to Clinic with speech delay weather report that he cannot say a single word but his hearing is good, noted during interview that the child is very hyperactive and produces continuous wash like movements with his hands. is most likely diagnosis is:

- Attention Deficit Hyperactive Disorder ADHD
- classic autism
- **high functioning autism (autism and ADHD) ✓**
- Asperger syndrome
- mental retardation

10. regarding Poilomyelitis one is not matching:

- incubation period is --- 8 to 12 days
- asymptomatic infection --- 90 to 95% of cases
- **Polio virus --- is killed at temperature -20 Celsius ✓**
- Polio virus --- picornaviridea family , Enterovirus genus
- diagnosis --- Isolation and identification of virus from stool

11. while you're examining a two month old male baby you expect to find the following except:

- fistling of both hands
- **unilateral clonus ✓**
- bilateral positive Babinski sign
- head Lag
- open posterior fontanelle

12. regarding myelomeningocele all are true except:

- represents the most severe form of neural tube defects
- **regions in the high lumbar region causes bowel and bladder incontinence ✓**
- at least 75% of the cases are located in lumbosacral region
- hydrocephalus in association with type 2 Chiari defect develops in at least 80% of patients with meningocele.
- if there is CSF fluid leak surgical repair must be immediate

13. 3 years old boy came to emergency room with complaints of weakness in both lower legs and inability to walk, he had history of upper respiratory tract infection 2 weeks before, on examination there is symmetrical bilateral loss of deep tendon reflexes, Marked flaccidity, muscles power was grade 3, and sudden onset squint. your most likely diagnosis is:

- Poliomyelitis
- **Miller Fisher Syndrome ✓**
- transverse myelitis
- polymyositis
- cerebral palsy

14. regarding neural tube defects and (NTDs) all are true except

- **results from failure of the neural tube to close spontaneously between the 21 to 27 weeks of conception ✓**
- can be run through genetic effect of valproic acid (depakine) treatment in pregnant lady.
- folic acid prevents up to 50 to 70% of (NTD cases
- prenatal screening includes alpha-fetoprotein AFP in maternal serum, amniotic fluid and ultrasound
- The Inheritance is multifactorial

15. regarding prevention of Poliomyelitis, comparing the two available vaccines ipv and opv. one statement is not true:

- Associated to VAPP (vaccine associated polio paralysis) --- OPV only
- safe and effective --- both
- IGA antibodies --- OPV only
- **contain 3 serotypes of poliovirus --- both ✓**
- can be given to pregnant lady --- IPV only

16. regarding Guillain-Barre syndrome which one is not true:

- it is post infectious "autoimmune" mechanism
- paralysis is symmetrical and ascending
- **fever and constitutional symptoms are prominent ✓**
- treatment is with IVIG
- CSF examination is important item for the diagnosis

17. regarding autoimmune Encephalitis which statement is not true:

- it's Associated to autoimmune response and paraneoplastic syndrome
- there's antibodies to CNS proteins
- diagnosis by clinical course and serological evidence
- **the N methyl glutamic acid receptor is the most common effective receptor ✓**
- Neuropsychiatric symptoms are very prominent as most patients are seen by Psychiatrists.

18. A 2 months old boy product of normal vagina delivery with a birth weight of 4.2 kg with poor feet and weak cry. An examination he was found to have protruding tongue, jaundice and dry skin. The most important diagnostic test is:

- **T4 and TSH ✓**
- thyroid scan
- thyroglobulin level
- thyroid ultrasound
- prolactin level

Dr. Haytham

1. 3 years old child is seen in the ER with a history passage of large amount of blood per rectum. There's no history of vomiting, diarrhea, fever or abdominal pain. Physical examination baby looks pale, but not Jaundiced. his heart rate is 120/minute blood pressure is 80/ 60 mmhg, temperature is 37 C, no hepatomegaly or splenomegaly. HB 9 / DL, platelets 180* 109 / L. Prothrombin time 12 seconds, partial thromboplastin time 32 second. ALT 30 U / L. all the following are true except:

- IV route should be established , 0.9 NS is given , packed RBCS also considered .
- nasogastric tube should be inserted for gastric lavage
- meckel's scan is diagnostic
- **juvenile polyp are suspected ✓**
- tachycardia indicates a significant blood loss

2. 4 months old boy is admitted to the hospital with severe bronchopneumonia, he had to stay with me distress and perioral cyanosis, just x-ray shows bilateral interstitial opacities, he has a history of recurrent pneumonia, chronic diarrhea and oral thrush. His current weight is 2.5 kg. on a mission he underwent Bronchoscopy and the analysis of bronchoalveolar lavage fluid shows pneumocystisjiroveci (carini). which is the most likely diagnosis:

- IGA deficiency
- chronic granulomatous disease
- cystic fibrosis
- **severe combined immunodeficiency ✓**
- X-linked hypogammaglobulinemia

3. regarding gastroesophageal reflux GER and gastroesophageal reflux disease GERD, all of the following are true except:

- both are not associated with bilious vomiting
- babies having GER are generally happy spitters, while irritability is prominent in GERD
- anti-regurgitation (AR) formula is considered in both
- **if more frequent regurgitation, GERD is likely. ✓**

- Positive scintigraphy is positive for GERD
4. **The following are seen in refeeding syndrome except:**
- hypophosphatemia
 - hypokalemia
 - hypocalcemia
 - hypomagnesemia
 - **hypoglycemia ✓**
5. **all the following are normal findings except:**
- Heart rate 130 per minute in a 7-Day old newborn
 - Respiratory rate 32\minute in 8-month old infant
 - serum potassium 6 mmol\L in a two-day-old newborn
 - WBC count 16000\microliters in a one month old newborn
 - **head circumference of 46 cm and a three-month-old infant ✓**
6. **13 year old child who is known to have cystic fibrosis, admitted as a case of bronchopneumonia, sputum Gram stain grew Gram-negative bacilli. The following antibiotics have good coverage for her infection except:**
- Meropenim
 - Gentamycin
 - Ceftazidime
 - Piperacillin\Tazobactam
 - **Azithromycin ✓**
7. **The recommended initial testing for suspected celiac disease is:**
- **Anti tissue transglutaminase antibody igA And serum IgA level ✓**
 - Anti tissue transglutaminase antibody IgA alone
 - Antiendomysial antibody IgG alone
 - HLA testing for DQ2 to And DQ8
 - Endoscopy and biopsy
8. **all the following are matched except:**
- fecal elastase: pancreatic insufficiency
 - fecal alpha-1 antitrypsin: protein losing enteropathy
 - **acrodermatitisenteropathica: Cooper malabsorption ✓**
 - stool WBC: cow's milk protein allergy
 - chloride losing diarrhea: metabolic alkalosis
9. **3 months old baby presents with diarrhea of 2 months ago, that was Bloody in some occasions. physical examination was insignificant except for facial eczema. what statement is false:**
- Elimination Challenge test for diagnosis
 - cow's milk protein allergy may develop in exclusively breastfed infants
 - iron deficiency may be the only presentation
 - **Eosinophilia and increase IgE level are Universal ✓**
 - Amino acid-based formula is the gold standard treatment

10. Regarding functional abdominal pain all the following are alarming sign except:

- occult GI blood loss
- joint symptoms
- **periumbilical abdominal pain ✓**
- nocturnal symptoms
- high ESR and CRP

11. A 6 years old boy presented with four months history of crying and straining while passing motion, he passed large caliber stool, bowel motion once a week, he have noticed small amounts of bright red blood on the toilet paper intermittently after he is passing a bowel movement. he has negative family history of constipation or GI diseases and no intake. physical exam and growth parameters were normal except for anal fissure. which is true:

- underlying Organic disease for constipation is expected
- **anal fissure is not an alarming sign ✓**
- stimulant laxatives are the first line for management
- abdominal x-ray is diagnostic
- barium study is needed for suspected Hirschsprung's disease

12. regarding infectious hepatitis markers, all the following are matching except:

- a window period: anti-HBc IgM
- effective hepatitis B vaccine : anti- HBs IgG
- chronic: HBs antigen for more than 6 months
- hepatitis A: anti-HAV IgM
- **remote infection: anti-HBs IgG ✓**

13. A five month old baby presented with a history of loose watery diarrhea of 20 days. At the beginning of illness baby was admitted to the hospital and a diagnosed to have Rota infection, when he was discharged on oral rehydration solution (ORS), when oral intake improved laboratory studies sent again for evaluation. All the following lab results are expected except:

- stool culture is negative
- stool Ph 4.5
- stool positive for reducing substance
- routine stool analysis is negative for WBC and RBC
- **Rota immunoassay test is still positive ✓**

14. 5 years old girl noted a blood on the toilet tissue and a small amount of blood on stool....., Abdominal pain, nausea, anorexia or lightheadedness. she has not had any fever or weight loss. digital rectal exam is normal. The most likely diagnosis is:

- intussusception
- **Juvenile polyps ✓**
- meckel's diverticulum
- anal fissure
- ulcerative colitis

Dr. Lina

1. all are true regarding bronchiolitis except:

- bronchiolitis is the most common respiratory tract infection in children
- bronchiolitis is a seasonal disease, dominating winter months
- majority of causes occur in children above one year of age ✓
- mostly caused by RSV respiratory syncytial virus
- prematurity is a well-known risk factor

2. 10 years old male patient presented with a 5-day history of fever, sore throat and fatigue physical examination reveals an exudative tonsillitis and bilateral enlarged and slightly tender posterior cervical lymph nodes. The spleen is palpable 3 centimeters below the rib cage. which agent is most likely responsible for the patient's illness?

- Group A beta hemolytic streptococcus
- adenovirus
- Toxoplasma Gondii
- Epstein-Barr virus ✓
- corynebacterium diphtheria

3. Parents of an 8 years old boy are concerned about their son's short stature. what should be the most important Next Step ?

- a measurement of body mass index
- Determination of genital maturation state
- Boone age measurement
- determination of height velocity ✓
- donation of weight / height ratio

4. A 12 year-old boy has migratory arthritis with red, warm and swollen joints. He has serology evidence of a recent group A streptococcal infection. arthritis in this condition is characterized by which of the following?

- usually not painful
- heels without deformity ✓
- appears after the fever subsides
- Seen only in patients with concurrent carditis
- involves large and small joints equally

5. the major concern regarding chronic otitis media with effusion is the development of which of the following:

- meningitis
- mastoiditis
- permanent nerve deafness
- perforation of the tympanic membrane
- impaired speech and language development ✓

6. the mother of a child repeated that she has three days history of fever, hoarseness, and a bad barking cough. Which of the following is true?
- temperature greater than 38.9 Celsius
 - expiratory stridor
 - infection with parainfluenza virus ✓
 - hyperinflation on chest x-ray
 - child between 6 and 8 years of age
7. 6 years old male presented with acute onset of fever and productive cough of 2 days duration. There was antecedent upper respiratory tract infection few days ago. The patient was afebrile, tachypnic, there was right sided crepitations. the patient was diagnosed as a case of pneumonia and started an oral antibiotics. 2 Days Later the patient deteriorated and he had right-sided chest pain and became more Distressed with left-sided deviation of the trachea, right sided decrease air entry and dullness to percussion. Most likely explanation of patients condition is:
- right sided atelectasis
 - left-sided lung abscess
 - right sided pleural effusion ✓
 - right sided pneumothorax
 - right sided necrotizing pneumonia
8. years old boy is admitted to the hospital with a one-day history of left-sided hemiparesis add a 2-week history of fever intermittent cough. His father had persistent cough. a chest radiograph shows a right lower lobe infiltrate and hilar adenopathy. IGRA (interferon-gamma release assay) results are positive. cerebrospinal fluid mycobacterium polymerase Chain Reaction positive, and AFB (acid-fast bacilli) culture is pending. gastric aspirate AFP cultures are also pending. which of the following is the most appropriate initial treatment?
- Amikacin, Pyrazinamide, and ethambutol.
 - Amikacin, Pyrazinamide, ethambutol , rifapentine and rifampin
 - Ethambutol and linezolid.
 - Isoniazid, Rifampin, Pyrazinamide and Ethambutol ✓
 - Rifampin and Isoniazid
9. A child with mental retardation is also noted to have severe myopia, subluxation of the lens is found (Ectopialentis). this generally occurs after three years of age in children with which of the following?
- Hawkinsinuria
 - tyrosinemia
 - phenylketonuria
 - isovalericacidemia
 - homocysteineurea ✓
10. all the following are true regarding epiglottitis except:
- it is potentially lethal condition
 - is characterized by high fever, sore throat, dyspnea and drooling
 - it is now rare since the introduction of haemophilusinfluenzae vaccine
 - stridoris an early finding and suggests narrowing of the airway ✓
 - most patients have concomitant bacteremia

11. 1 year old male patient presents with recurrent attack of Wheezy chest(more than three) last one was two days ago, he has history of atopic dermatitis and food allergy and his mother mentioned that she is on regular ICS (inhaled corticosteroids) the next step in management is:

- Continue on short-acting B Agonist for one week only
- **continue on short-acting B Agonist as needed and start ics for 2 months ✓**
- start ICS and leukotrienes receptor antagonist agent for 3 months
- start ics for 3 months
- give short-acting beta-agonist and anticholinergic for one week

12. 2 years old girl presents to the clinic complaining of diffuse wheezing for the last 3 months. she was previously healthy and she was admitted as case of severe lower respiratory tract infection to ICU 3 months ago after which the patient started to have her complaints. Receive inhaled corticosteroids and short-acting beta-agonist but with no improvement. The most likely diagnosis:

- Cystic fibrosis
- non atopic reactive airway disease
- foreign body aspiration
- **bronchiolitis obliterans ✓**
- post-viral Airway hyperresponsiveness

13. what is the most important test to obtain diagnosis in a 14 years old girl with primary amenorrhea, and short stature, who also has a history of repaired coarctation of the aorta in infancy?

- sweat chloride testing
- **karyotyping ✓**
- fluorescence in situ hybridization (FISH) of chromosome 22q11
- pelvic Ultra sonography
- lymphocyte subset analysis

14. a child with polyosteotic fibrous dysplasia of the bone and abnormal skin pigmentation is diagnosed McCune Albright syndrome. what other problem is this patient most likely to develop?

- anemia
- dismiss
- **precocious puberty ✓**
- multiple neurofibromas
- chronic glomerulonephritis

15. all these matches are true except:

- **community-acquired pneumonia: streptococcus pneumonia is the most causative agent ✓**
- hematogenous spread: s aureus
- recurrent pneumonia: primary ciliary dyskinesia
- patient with O2 saturation 91%: needs admission
- lung abscesses: sreptococcuspyogens

16. a preterm 28 weaker who was starting on feeding from day one, only has abdominal distention and intolerance to feed with gastric residual more than 50%, you did abdominal X-ray and you found single dilated Loop, put the patient NPO and insert ngt (nasogastric tube) can you cover him with antibiotic and you sent your investigation, 4 hours later you repeat the X-ray Builders fixed single dilated Loop, what is the next step in management?

- broad your coverage of antibiotics
- Start Continuous positive airway pressure (CPAP)
- observe only
- give gastrograffine
- **consults surgery for possible exploratory laparotomy ✓**

Dr. Amjad

1. All the following are correct regarding hypoxic-ischemic encephalopathy except:

- brain edema develops within a few hours of the insult
- most deaths occur in the first week of Life due to multiple organ failure
- during mudgestation (26 to 36 weeks) predominantly damaged white matter, leading to periventricular leukomalacia
- **choreoathetoid cerebral palsy is the most common major sequel to hypoxic ischemic insult at term ✓**
- during the early phases of brain injury, brain temperature drops

2. At 43 weeks gestation male infant is delivered. the infant is apneic, limp, pale And covered with “pea soup” amniotic fluid . the first step in the resuscitation of the infant at delivery should be:

- artificial ventilation with bag and mask
- artificial ventilation with endotracheal tube
- administration of 100% Oxygen by mask
- catheterization of the umbilical vein
- **suction of the trachea under direct Vision with endotracheal tube ✓**

3. concerning treatment of neonatal seizures all the following are true except:

- phenobarbital can be given im or IV
- phenobarbital enters the CSF rapidly with high efficiency
- **phenobarbital treatment should be continuing for two year in neonatal seizures ✓**
- the blood level of phenobarbital is largely predictable from the dose administrated.

4. 37 weeks gestation boy is born after uncomplicated pregnancy to a 33 years old mother. at birth he was the leathergic and had a heart rate of 40. when was administrated via bag and mask, and he was intubate, his heart rate remained at 40. which of the following is the most appropriate Next Step?

- administer IV bicarbonate
- administer IV atropine
- administer IV epinephrine
- administer IV calcium chloride
- **begin chest compressions ✓**
-

5. **concerning infants of the diabetic mother, all the following are true except:**
- are of increase risk of developing diabetes mellitus in future
 - usually develop hypoglycemia in the first day of life
 - **hypercalcemia is a common complication in the first day of life ✓**
 - sacral agenesis is one of the congenital abnormality is seen
 - have increased risk of respiratory distress syndrome
6. **you are advised by the obstetrician that the mother of a baby is a carrier of hepatitis B surface antigen (HBsAg-positive), the most Appropriate action in managing this infant would be:**
- screen the infant for HBs Ag
 - isolate the infant for enteric transmission
 - screen the mother for Hepatitis B “e” antigen (HBeAg)
 - **administer hepatitis B immune globulin and hepatitis B vaccine to the infant ✓**
 - do nothing because transplacentally acquired antibody will prevent infection in the infant
7. **regarding side effects of animal-derived surfactant as treatment of respiratory distress syndrome, all the following are true except:**
- cause bradycardia
 - **increase the risk of bronchiopulmonary dysplasia ✓**
 - cause acute Airway obstruction
 - cause transient fall in blood pressure and cerebral blood flow
8. **Most important bed side test done during initial resuscitation of an infant are O2 saturation measurement and to acutely measure which of the following?**
- serum calcium
 - blood glucose
 - **blood gases ✓**
 - blood urea
 - serum sodium
9. **polycythemia in the neonatal period is associated with all of the following except:**
- trisomy 21
 - **the donor twin in a twin twin transfusion ✓**
 - maternal diabetes
 - intrauterine growth restriction
 - cyanotic congenital heart disease
10. **regarding herpes simplex virus (HSV) in neonatal sepsis, all of the following are true except:**
- in Tzanck smear, positive slides will show multinucleated giant cells
 - **spinal fluid shows elevated white blood cells mostly neutrophils ✓**
 - large envelope DNA virus, transmission on the neonate occurs via the birth canal or by ascending infection
 - disseminated disease without antiviral therapy most survivors would have permanent neurological sequel
 - neonatal HSV should be treated with parenteral acyclovir rather than oral therapy.

- 11. Concerning treatment of symptomatic neonatal with the group b beta hemolytic streptococcus sepsis all the following are true except:**
- may use penicillin G alone when GBS isolated.
 - full sepsis workup should be done in symptomatic neonate regardless of risk factors
 - ampicillin plus aminoglycoside can be used initially pending cultures results
 - **in GBS meningitis treat for 10 days ✓**
 - in GBS osteomyelitis treat for 6 weeks
- 12. 7 weeks old male presents to the clinic with poor feeding and inability to complete feeding, diaphoresis, pallor, heart rate 160, RR 60, BP 75/48, sat 95% similar in all limbs. physical examination he has retractions, and a pan systolic murmur 2/6 all over pericardium, liver 2 centimeters below costal margin. The most likely cause of heart rate is:**
- atrial septal defect
 - **Ventricular septal defect ✓**
 - transposition of great vessels
 - patent ductus arteriosus
 - tetralogy of fallot
- 13. infant is born at term, via prolonged spontaneous vaginal delivery requiring vacuum assisted device. he's noted to be jaundiced at 24 hours of life. Serum bilirubin is measured and shows indirect hyperbilirubinemia. All of the following should be obtained to evaluate the patient except:**
- blood typing
 - Coombs test
 - complete blood count CBC with reticulocyte count
 - peripheral smear
 - **liver ultrasound imaging ✓**
- 14. 3 Days full term male baby product of C/S due to fetal distress, birth weight is 3.5 kg. Apgar score 7/8. he started to have extreme cyanosis at third day of life with O2 saturation =50% despite oxygen therapy. Physical exam to have loud single S2 but no murmur. ECG showed right ventricular hypertrophy with upright T wave in V1. cxr finding: "egg on a string" Appearance with cardiomegaly. the most probable diagnosis is:**
- truncus arteriosus
 - Coarctation of aorta
 - total anomalous pulmonary venous return (TAPVR)
 - **transposition of the great arteries (TGA) ✓**
 - tetralogy of fallot
- 15. 12 hours old full-term infant has facial and just donuts. Is breastfeeding well and has otherwise normal examination at his direct Coombs test is negative. Is indirect bilirubin level is 14 mg/dL. mother blood group is O+, baby blood group is A+, which of the following is the most appropriate course of action?**
- recommend cessation of breastfeeding for 48 hours and supplement with formula
 - **start phototherapy ✓**
 - give intravenous immunoglobulin IVIG
 - Give phenobarbital

- no actions needed

16. full term male baby, delivered by cesarean section due to contracted pelvis, developed respiratory distress 2 hours after delivery, cxr Show hyperinflation and fluids in fissure, the most probable diagnosis is:

- meconium aspiration syndrome
- bacterial pneumonia
- respiratory distress syndrome
- **transient tachypnea of the newborn ✓**
- transposition of great arteries TGA

17. 3 days old baby, who was born at 29 weeks gestation and weighed 1.2 kg has experience expiratory distress syndrome and received surfactant. this morning you noticed a continuous Machinery murmur, Hyperdynamic pericardium and wide pulse pressure, all the following are true except:

- decrease IV fluid input
- confirm the diagnosis by echocardiography
- start indomethacin/ ibuprofen
- **pge2 is indicated ✓**
- bounding collapsing femoral pulses

18. A 12 hours old full term male infant, who has been feeding poorly, becomes hypoactive, tachypnic and grunting. which of the following initial testing has the lowest diagnosis yield:

- chest radiograph
- complete blood count
- **urine culture ✓**
- blood culture
- glucose level

19. 4 months old boy, has recurrent cyanotic spells with a crying at early morning, according to this x-ray what is the most likely diagnosis? في صورة

- transposition of the great arteries TGA
- tricuspid atresia
- **tetralogy of fallot TOF ✓**
- Truncus arteriosus TA
- Total anomalous pulmonary venous drainage TAPVR

20. A newborn male baby, born at gestational age 30 weeks, birth weight was 1.2 kg, had severe RDS, has been connected to mechanical ventilation and given one dose of surfactant. his O2 saturation has being significantly improved after surfactant therapy. 2 hours later the baby has sudden onset duration with tachycardia, hypotension, severe cyanosis, decrease rt side air entry. according to his x-ray treatment of choice is: في صورة

- start IV prostaglandin PGE1
- start IV indomethacin
- start IV bolus of normal saline
- **immediate chest tube insertion on the right side of the chest ✓**
- another dose of surfactant is mandatory for this situation

Dr.Salma

- 1. 4 years old girl with nephrotic syndrome presents to the emergency room with severe abdominal pain. on examination she looks sick, BP is 100/60, temperature 40 Celsius, and her pulse 160/ minute, She is tachypnic and in pain. she has rigid abdomen on exam . Her Labs showed: CBC WBC 28, platelet 250, HB 13g/dl, creatinine urea and electrolytes are normal, what is the best next step in her Management?**
 - Doppler Renal US
 - **peritoneal fluid culture ✓**
 - cxr
 - CT abdomen
 - do renal biopsy
- 2. which of the following is not supportive of a diagnosis of distal renal tubular acidosis type 1?**
 - nephrocalcinosis
 - positive urine anion gap
 - urine pH of 5.5
 - **hydronephrosis on renal ultrasound ✓**
 - serum K level of 2.9 mEq/L
- 3. one of the following is the most common cause of recurrent gross hematuria in children:**
 - renal Stone
 - Wegener granulomatosis
 - mesangial proliferative GN
 - Alport disease
 - **IGA nephropathy ✓**
- 4. all of the following are correct about post streptococcal GN except:**
 - low complement levels are back to normal in 8 to 12 weeks
 - the edema is due to loss of glomerular filtration resulting in water and solute retention
 - **proteinuria is expected to persist up to one year after presentation ✓**
 - about 10% of the cases may present with nephrotic syndrome
 - the acute phase of nephritis usually resolves in 2 months

****NOT sure**
- 5. all of the following glomerulonephritis are associated with low complement levels except:**
 - post streptococcal GN
 - membranoproliferative GN

- shunt nephritis
- **henochschonlein purpura ✓**
- lupus nephritis

6. 4 day old male boy admitted to NICU, as creatinine of 2.5 mg/dl, renal US showed bilateral hydronephrosis, which of the following is the best next step to help diagnose because of his renal failure?

- **voiding cystourethrogram ✓**
- CT scan
- blood culture
- DTPA
- urine culture

7. which of the following is suggestive of chronic kidney disease?

- bicarbonate level of 12
- potassium level 5.8
- **phosphate level of 9.4 ✓**
- urine output 0.3 ml/kg/hr
- urea level of 148 mg/dl

8. The following is the best treatment for hypercalciuria:

- **hydrochlorothiazide ✓**
- sodium bicarbonate
- pyridoxine vitamin B6
- Furosemide
- Allopurinol

9. which of the following is consistent with acute kidney injury due to hypovolemia?

- urine protein of 3000 mg/l
- urine eosinophils and cellular cast
- urine specific gravity 230 mOsmol/kg
- urine FENa more than two
- **urine sodium 15meq/l ✓**

10. all of the following are true about treatment of nephrotic syndrome in children except:

- children with severe edema should be hospitalized and should have water and salt restriction
- **children who fail to go into remission after first three weeks of steroid treatment need biopsy ✓**
- children with age of onset between 2 to 8 years are usually steroid responsive
- children presenting with a gross hematuria might require renal biopsy
- children with congenital nephrotic syndrome usually progress to end stage renal disease

11. which of the following is not correlated with poor prognosis in hemolytic uremic syndrome?

- prolonged anuria
- non Shiga toxin HUS
- WBC count > 30,000
- **Hb level less than 6g/dl ✓**
- age older than 5

12. Patient with wilm's tumor, drug of choice for his HTN ?

- **Captopril**

13. Values are as follows: glucose 563mg/dl, sodium 136meq/L, potassium 4.3, BUN 18 mg/dL, creatinine .6 mg/dl, calcium 9.7 mg/dL. she receives a 10cc/kg bolus of normal saline followed by IV fluids consisting of half normal saline, as well as IV insulin, 8 hours into therapy, she develops muscle weakness. in addition, electrocardiogram shows a flat T waves as well as U waves. what is the most likely cause of her symptoms?

- cerebral edema
- hyponatremia
- hypoglycemia
- **hypokalemia ✓**
- Hypocalcemia

Dr. Randa

1. All of the following is recommended in a case of ALL (acute lymphoblastic leukemia) except:

- chest x-ray
- echocardiography
- **brain MRI ✓**
- G6PD level
- lumbar puncture

2. 10 years old female patient known case of sickle cell disease was doing relatively well, suddenly she developed pallor, her mother reported that there is history of a flu like symptoms and low-grade fever of 3 days duration, she found her Hb 2mg/dl, reticulocyte (corrected) 2%, which of the following is not true:

- blood transfusion is the first line of therapy
- reticulocyte count is very essential in diagnosis of this type of crisis
- Fever in sickle cell disease should not be ignored and should be investigated
- Vancomycin, cefitrixone and macrolide are needed in cases of fever not explained by a focus
- **parvovirus b19 titer is not indicated in this case ✓**

3. a 5 years old female patient presented with skin spots and gum bleeding. All the following are true except:

- **family history of congenital coagulopathy is evident as x-linked inheritance ✓**
- CBC and Prothrombin time is the primary screening testing
- if bleeding time is mainly affected, Von Willebrand factor activity and function should be studied
- platelet transfusion is the Mainstay of therapy if the platelet count is the only affected line
- bone marrow biopsy is essential for the diagnosis in certain circumstances

4. 4 years old female patient with a history of limping of one week duration associated with non blanchable skin rash over the buttocks and calf muscle with low grade fever, Her exam revealed features of arthritis and knee joint. Which of the following is true?

- initiation of steroid is essential
- synovial fluid aspiration is necessary
- **urine analysis is important for diagnosis and prognosis ✓**
- it is a highly recurrent condition
- antinuclear antibody ANA, rheumatoid factor RF, And Compliments are first-line investigations.

5. regarding diabetes mellitus in children all are correct except:

- a drug history is essential to be taken and those patients
- history of congenital rubella syndrome rather than rubella infection is associated with type 1
- 20 to 40% of these cases are presented with diabetic ketoacidosis
- **strict glucose monitoring is required with smaller age groups ✓**
- MDI multiple dose injections Regimen is associated with good long-term control.

6. When is the following is a wrong match:

- opioid: naloxone
- iron: deferoxamine
- **benzodiazepine : fompizole ✓**
- **aspirin: glucagon ✓**
- Co : oxygen

****SOME students say the answer is D and the other say C AND D are right answers.**

7. all the following are indications of urgent endoscopy within 12 to 24 hours in cases of foreign body or caustic material ingestion except:

- **small object Passing beyond the duodenum ✓**
- sharp object causing odynophagia
- disc battery ungestion
- coin ingestion causing drooling
- caustic material ingestion with Associated gastric and respiratory symptoms

8. all of the following are consistent with NAI (non accidental injury) except:

- bruises at ear pinna
- bilateral humeral fracture in Well followed child with cerebral palsy
- Femur fracture in 6 month old male baby
- multiple well-defined burn like skin lesions of the same size
- **retinal Hemorrhage and rapidly increasing circumference in 4 months old baby ✓**

9. while you are examining an 11 months old male child in the well-baby Clinic you find him pale with HR 130m and normal capillary refill. Hbr was 8 mg/dl, which of the following is wrong regarding investigation and management?

- MCV in the second to be checked to determine the type of anemia
- direct Coombs test, haptoglobin and G6PD Are needed to be done if you find the corrected reticulocyte count of 6%
- vitamin B12 level should be requested if the child has features of developmental delay and hypotonia
- source of blood loss can be the cause for his presentation

- blood transfusion should be started immediately ✓

10. 2 years old male patient with abdominal Mass discovered accidentally, which of the following is not suggestive of neuroblastoma?

- ataxic gait
- periocular bluish skin discoloration
- hypertension
- absence of calcification on CT scan ✓
- Horner syndrome

11. 3 years old male patient, known case of SCD sickle cell disease, presented with history of fever and difficulty breathing following 3-day history of painful crisis. all the following are true except:

- oxygen supplement and IV fluid are essential
- detailed musculoskeletal exam should be performed
- painkillers such as non-steroidal anti-inflammatory drugs are better than opioids as it may worsen chest symptoms ✓
- Broad Spectrum antibiotics coverage is required
- chest x-ray is important part of the evaluation

12. 2 years old male presented with a history of 100ml paracetamol syrup ingestion, 250 mg/5ml. all of the following true except:

- antidote therapy can be given either oral or intravenous
- Urinary alkalization is the best method for elimination ✓
- liver function test Prothrombin time and kidney function tests are essential first line labs
- previous liver disease makes the toxicity more severe
- The time of ingestion is unknown and elevated liver enzymes is found, antidote should be given

5th year – 2020

1 - All the following are characteristic of infantile physiological reflux (GER), except:

- a. GER is due to transient lower esophageal sphincter relaxation
- b. GER is always non-bilious
- c. GER is Familial
- d. GER is not associated with recurrent aspiration
- e. Most infants outgrow GER with when get older

2 - Regarding IDA(IRON DEFICIENCY ANEMIA) which is true:

- a. the most common cause worldwide is blood loss
- b. it is not related to consumption of large amount of cow milk formula
- c. it is more common in female infants
- d. screening for IDA is done at the age of 10 month -1 year in Jordan
- e. it is one of the differential diagnosis of folate deficiency

3 - Regarding prognosis of congenital hypothyroidism all are true except:

- a. If treatment initiated within the first month of life prognosis is excellent.
- b. After 6 months prognosis is bad for intellectual development.
- c. Growth improves even in late cases.
- d. Onset after 2 years outlook for normal development is much better
- e. In newborn thyroxin dose per kg body weight is much smaller than in children.

4 - Regarding cystic fibrosis (CF), one statement is true:

- a. The most common mutation delta F508 is class III mutation
- b. Normal genetic study for CF excludes the disease
- c. Pancreatic insufficiency is found in all patients
- d. Affected females are generally infertile, while affected males have decreased fertility
- e. Potentiators and correctors are new lines of therapy targeting specific genetic mutations

5 - A 12-year-old boy presents with fever, fatigue and sore throat. Examination reveals exudative pharyngitis, generalized lymphadenopathy and mild splenomegaly. Laboratory studies show elevated WBC count with presence of atypical lymphocytes. What is the best action?

- a. no participation in contact sports for next 2–4 weeks
- b. 2-week treatment with oral prednisone
- c. 2-week treatment with oral acyclovir and prednisone
- d. 10 days of oral penicillin
- e. strict bed rest

6 - Post natal causes of cerebral palsy include all the following except

- a. Hyperbilirubinemia
- b. Bacterial meningitis
- c. Rubella infection
- d. Shaken baby syndrome
- e. Viral encephalitis

7 - All of these growth parameters are true, except:

- a. A 2-year-old boy, with head circumference 53 cm is normal
- b. A 3-kg newborn gains his birth weight after 2 weeks
- c. A 13-year-old boy with a height of 130 cm
- d. Delayed tooth eruption is classified by the absence of any teeth by 13 months of age
- e. Upper/lower segment ratio is 1 at 7 years old

8 - Regarding vaccines one is not matching

- a. Pure polysaccharide----- pneumovax-23.
- b. recombinant ----- hepatitis B
- c. Toxoid -----diphtheria.
- d. Live attenuated virus-----BCG.
- e. Killed ----- IPV.

9 - A 3 years old child with gram positive diplococci in his cerebral spinal fluid(CSF) the best antibiotics selection for him is

- a. ampicillin +ceftriaxone
- b. ampicillin +vancomycin
- c. vancomycin+ceftriaxone
- d. ceftriaxone alone
- e. cefuroxime +ampicillin

10 - Regarding headache which statement is not matching?

- a. early morning headache and vomiting-----posterior fossa tumor
- b. recurrent with free intervals -----migraine
- c. daily frontal headache-----tension headache
- d. papilledema with normal brain CT-----Pseudotumor cerebri
- e. associated with aura----- common migraine

11 - Regarding Rota vaccine, all the following are true except:

- a. It is a live attenuated vaccine
- b. It is an oral vaccine
- c. It is contraindicated for a child had a history of intussusception
- d. Either RotaTeq (three doses) or Rotarix (two doses)
- e. Full course vaccination will eliminate the risk of Rota infection

12 - All of the following are matched findings of stool analysis, except:

- a. Shigllosis: WBC and RBCs
- b. Amobiasis : cysts and trophooites
- c. Rota enteritis: Normal stool analysis
- d. Secondary Lactose intolerance: acidic stool
- e. Adeno enteritis : Positive stool culture ??

13 - A 5 months old male patient who was delivered at 32 weeks of gestation started to have low grade fever and rhinorrhea , 3 days later he started to have cough , noisy breathing . on exam the patient is distressed , with diffuse wheezes on auscultation , the most likely diagnosis is

- a. Respiratory distress syndrome
- b. Bronchiolitis
- c. GERD
- d. Laryngomalacia
- e. Asthma

14 - weight gain , hair loss , hepatic toxicity , teratogenic effect are associated with which of the following antiepileptic drugs:

- a. phenytoin (epanatin, Dilantin)
- b. Phenobarbitone. (luminal)
- c. Valproic acid.(depakine)
- d. carbamazepine.(tegretol)
- e. Lamotrigin.(Lamictal)

15 - A 4-year-old boy has failed to grow and has evidence of exocrine pancreatic insufficiency. What is the most likely cause for this?

- a. acute pancreatitis
- b. biliary atresia
- c. Swachman-Diamond syndrome
- d. congenital absence of the pancreas
- e. cystic fibrosis

16 - The father of a 4 year old Jordanian girl was recently diagnosed as a case of pulmonary tuberculosis and started on treatment , the girl doesn't have any complaints, and has normal examination. Her PPD skin test was 18 cm , chest CT scan was done and it was normal .Your next step in management is :

- a. Gastric lavage for AFB (acid fast bacilli)
- b. Do interferon gamma releasing assay
- c. Reassurance and follow up after 2 months
- d. Give isoniazid daily for 6 months
- e. Treat with Isoniazid, rifampin, pyrazinamide, and ethambutol for 2 months and then isoniazid and rifampin for another 4 months

17 - A 6 year old male patient presented with low grade fever and dry cough of three days duration with good oral intake .He was previously healthy and not on any chronic medication, and no personal or family history of atopy .On physical examination he was febrile with respiratory rate of 50 breath / minute, and diffuse wheezes on auscultation. Your next step in management is:

- a. Start amoxicillin for 10 days and follow after 2 weeks
- b. Start short acting b agonist nebulizer and oral steroid for 5 days
- c. Admission and start ceftriaxone iv
- d. Start amoxicillin and clarithromycin orally and reassess after 48-72 hours
- e. Reassurance since this is viral pneumonia and no need for treatment.

18 - All of the following regarding sinusitis in children are true except:

- a. It can occur at any age
- b. It should be suspected with patient with common cold who had persistence of nasal congestion, rhinorrhea (of any quality) and daytime cough ≥ 10 days without improvement.
- c. Sinus film x-ray is mandatory for the diagnosis
- d. Most common cause of acute bacteria sinusitis is Streptococcus pneumoniae.
- e. Recurrent sinusitis should raise the suspicion of underlying cause like cystic fibrosis

19 - regarding muscular dystrophies one is not matching

- a. Duchene -----ambulation lose before 12years , death before18 years age.
- b. myotonic dystrophy ----- autosomal dominant
- c. Becker muscular dystrophy -----cognitive impairment is universal
- d. facioscapulohumeral dystrophy -----round mouth protruded lips, not close eyes during sleep
- e. Emery- Dreifus muscular dystrophy ----death from conductive defect

20 - All the following are clinical of congestive heart failure (CHF) of a 4-month-old baby who has ventricular septal defect (VSD), except:

- a. Tachypnea and tackycardia
- b. Poor feeding and diaphoresis during feeding
- c. Failure to thrive
- d. Lower limb edema**
- e. Hepatomegaly

21 - 10 months old child who develops episodes of crying-apnea-cyanosis-loss of consciousness -myoclonic jerks in fingers. This happens only when he is upset .The most likely diagnosis is

- a. prolonged QT syndrome
- b. myoclonic epilepsy
- c. Absence epilepsy
- d. breath holding spells**
- e. atonic seizures

22 - A 6-year-old girl has short stature and webbing of the neck, also has a low posterior hairline, a broad chest, and cubitus valgus. Which organ is affected most frequently in patients with this syndrome?

- a. heart
- b. kidneys
- c. ovaries**
- d. thyroid
- e. intestine

23 - Regarding Jordanian national immunization program, one is not true

- a. First vaccine to be given is BCG.
- b. Measles vaccine is given 3 times in the first 18 months.
- c. At age 1 year MMR only.
- d. At age 91 days; hexa vaccine plus rotavirus only**
- e. At age 9 months (beginning of 10 months)measles +OPV+ Vitamin A 100,000 units

24 - A newborn infant with stigmata of Down syndrome has a heart murmur. Which of the following cardiac lesions is most likely in this baby?

- a. Hypoplastic left heart syndrome
- b. Total anomalous venous return
- c. Coarctation of the aorta
- d. Anomalous coronary artery
- e. Atrioventricular defect**

25 - A 5 -year-old boy presents with the complaint of “breast swelling. The mother noticed that the child started to have regression of his milestones. Your examination demonstrates a Tanner stage of 3. Which of the following is the best next course of action?

- a. brain MRI scan**
- b. Measurement of serum luteinizing hormone (LH) and follicle-stimulating hormone (FSH)
- c. Measurement of serum testosterone
- d. Reassurance of the normalcy of the condition
- e. Chromosomal analysis

26 - Regarding the diagnosis of cerebral palsy all are true except:

- a. Diagnosis is essentially clinical
- b. Normal development excludes the diagnosis
- c. It is a movement and or posture disorder
- d. The course is progressive.
- e. It is due to lesions to the immature brain.

27 - All of the following support the diagnosis of group A streptococcal pharyngitis except:

- a. Sudden onset of sore throat
- b. Age between 5- 15 year old
- c. Petechial skin rash at the palate
- d. Papulovesicular ulcer
- e. Enlarged tender lymphadenopathy

28 - Regarding pediatric gastrointestinal (GI) bleeding, All the following are true except:

- a. Hematemesis in the first day of life in a healthy baby most likely maternal
- b. Anal fissure is the most common cause on lower GI bleeding in infants
- c. Tachycardia is suggestive of significant bleeding
- d. Gastric lavage for upper GI bleeding only
- e. Esophageal varices should be suspected as a cause of bleeding in a patient with biliary atresia

29 - A 1 year old male patient presented with recurrent attacks of wheezy chest , while taking focused history , all of the following pattern of symptoms favor the diagnosis of asthma except :

- a. The symptoms usually predisposed by antecedent upper respiratory tract infection, cold crying, smoking or others.
- b. During the attacks the symptoms usually last more than 10 days
- c. Between the attacks the child usually is free of symptoms
- d. Presence of family history of atopy
- e. The symptoms of cough and wheezing are associated with night worsening

30 - A 12 year old obese female is complaining of headache. Fundus examination showed papilledema. CSF cytology and chemistry are normal. An urgent brain CT scan was normal. The most likely diagnosis is:

- a. Migraine
- b. Acute meningitis
- c. Pseudotumor cerebri
- d. Hydrocephalus
- e. Cerebral abscess.

31 - A 12-year-old boy has migratory arthritis with red, warm, and swollen joints. He has serologic evidence of recent group A streptococcal infection. Echocardiography was done. Cardiac involvement in this condition is characterized by all of the following except :

- a. Carditis occurs in approximately 50-60% of all cases of acute rheumatic fever.
- b. Acute rheumatic carditis usually presents as tachycardia and cardiac murmurs
- c. Rheumatic carditis is characterized by pancarditis, with active inflammation of myocardium, pericardium, and endocardium
- d. Most rheumatic heart disease is isolated aortic valvular disease or combined aortic and mitral valvular disease.
- e. Repeated episodes and severe carditis can be anticipated if the patient has subcutaneous nodules

32 - Regarding megaloblastic anemia which is wrong :

- a. it's always associated with macrocytosis but not vice versa
- b. it's associated with features of developmental delay and hypotonia
- c. it's associated with thrombocytopenia
- d. it may be caused by certain drugs
- e. it can be avoided by goat milk consumption

33 - regarding (attention deficit hyperactive disorder) ADHD one statement is not true

- a. prevalence in Jordan is 6.25% in school age children
- b. it is classified in 3 subtypes
- c. onset before age 7 years
- d. in the brain there is imbalance between serotonin and dopamine
- e. the main stimulant treatment is methyl phenidate.

34 - A 5-month-old baby who is exclusively on regular formula and weaned from breast milk since the age of 1 month, presents with a history of watery diarrhea of the last 10 days. On the beginning of symptoms stool immunoassay was positive for ROTA virus but she continued to have diarrhea. Physical exam shows a well hydrated baby. Of the following the most appropriate to be considered:

- a. hydrolysate formula
- b. Lactose free formula
- c. Oral rehydration solution (ORS)
- d. Soy milk based formula
- e. Amino acid based formula

35 - A child who can kiss parents, can perform all the following skills except

- a. says 10 words
- b. enjoy picture story
- c. show symbolic play
- d. eat with spoon
- e. shows 4 body parts.

36 - A 6-year-old boy is reported by his teacher to "space out" in the classroom. Results of electroencephalography confirm the diagnosis of absence or petit mal epilepsy. Of the following pairs of drugs, the agents MOST likely to be effective in the treatment of absence epilepsy are:

- a. ACTH or corticosteroid
- b. Amantadine or bromide
- c. Carbamazepine or gabapentin
- d. Ethosuximide or Valproic acid
- e. Phenobarbital or phenytoin

37 - Regarding pediatric examination, one is false:

- a. Ankyloglossia (Tongue-tie) should be excised surgically in all patients
- b. Stretched penile length 2.5 cm or more is normal for a term male
- c. Skin manifestations could be a sign of underlying neurological disease
- d. Spine imaging is not indicated for all sacral dimples
- e. Lymphadenopathy usually has benign etiology

38 - A 6-year-old boy, presents with a history of vomiting of 5 days, associated with right upper quadrant pain, yellow sclera, mild pyrexia malaise and decreased oral intake, No history of blood transfusion or drug intake. All the following are true except:

- a. Risk of acute fulminant hepatitis in this patient is less than adult
- b. Prophylaxis for close contacts up to two weeks post-exposure
- c. Vaccine is recommended for children more than 1 year old
- d. Infection of pregnant mother carries no risks to the developing fetus
- e. Vaccine is contraindicated for contact pregnant mother ???

39 - A 6-month-old baby who underwent an open heart surgery for tetralogy of fallot (TOF). During surgery the thoracic duct was injured. The most likely formula needed in management of this patient is:

- a. Lactose free formula
- b. Medium chain triglyceride (MCT) formula
- c. Amino acid based formula
- d. Soya based formula
- e. no formula changes needed

40 - Pervasive developmental disorders include all the following except

- a. Autistic disorder
- b. Asperger disorder
- c. Rett disorder
- d. tourette syndrome .
- e. Childhood disintegrative disorder

41 - A 2-year-old boy presents with diarrhea of two months, diarrhea associated with abdominal distension. He doesn't have a history of recurrent respiratory infections or recurrent admissions. His elder sister has Diabetes mellitus type 1 (DM1). On physical exam he looks pale, his weight is 8.5 kg, Height 70 cm, and the remainder of his physical exam is insignificant. The following are true, except:

- a. He needs a lifelong gluten free diet
- b. He has a higher risk of IgA deficiency
- c. His disease is associated with certain HLA typing
- d. Villous atrophy, crypts hyperplasia and lymphatic infiltrate are characteristic
- e. Definitive diagnosis rely on high antibodies titer

42 - All these combinations are true except:

- a. Croup ----- mostly caused by Parainfluenza virus
- b. Acute epiglottitis ---- thumb sign on lateral x-ray of the neck
- c. Bacterial Tracheitis ----- staph aureus is the most common cause
- d. Acute otitis media ----- sensory hearing loss
- e. Lateral pharyngeal abscess ----- medial deviation of the tonsils

43 - All the following are benign skin lesions, except:

Select one:

- a. Erythema toxicum
- b. Transient pustular melanosis
- c. Milia
- d. Mongolian spot
- e. Shagreen patch

44 - A 10-month-old baby, presents to the ER with a low grade fever and watery diarrhea of 3 days, 8-10 times/day, without blood or mucus. associated with severe vomiting. Physical examination shows temperature 38.2 C, Heart rate 170/min, Blood pressure 65/40, dry skin and mucus membrane, sunken anterior frontanelle, and capillary refill 4 seconds. One of the following is true:

- a. This patient has moderate dehydration
- b. The most likely cause of gastroenteritis is bacterial
- c. This patient can be treated by oral rehydration solution (ORS)
- d. Emergency room (ER) management includes giving IV 0.9%Normal saline 20ml/kg multiple times ???**
- e. This patient needs aggressive antibiotic management

45 - All of the following are true regarding community acquired pneumonia in children except:

- a. Accounting for approximately 20% of all deaths in children younger than 5 years.
- b. Viruses are the most common cause.
- c. Oral cefuroxime is the first drug of choice for treatment.**
- d. Failure of response to treatment after 14 days should raise the suspicion of tuberculosis
- e. Severe malnutrition is associated with an increased risk of death for both viral and bacterial infections.

46 - Regarding cerebrospinal fluids (CSF); all are true; except

- a. Neutrophils 1000.protein 50.sugar 40-----bacterial meningitis
- b. Cells 50 all lymphocytes. Protein 20 .sugar 2/3 blood sugar -----normal CSF**
- c. Normal findings-----Pseudotumor cerebri
- d. Negative culture-----partially treated bacterial meningitis
- e. High protein only-----Guillain Barre Syndrome

47 - Regarding WEST syndrome, which statement is not true?

- a. it's called infantile spasm
- b. in EEG hypsarrythmia
- c. Onset peak 4-7 months and before 1yr age
- d. Development is normal**
- e. Response to treatment is poor

48 - Regarding febrile seizures, which statement is not true?

- a. family history of febrile seizures is predictive of recurrences
- b. family history of afebrile seizures is predictive of epilepsy
- c. Symptomatic febrile seizures, the child has a preexisting neurologic abnormality
- d. It is the main morbidity of Roseola Infantum
- e. recurrence is more common in complex febrile seizure type.**

49 - Regarding term infant feeding, one is false:

- a. Both breast feeding and regular term formulas have same caloric density
- b. The older infant needs less frequent more volume milk
- c. Colostrum is higher in Immunoglobulin than mature milk
- d. Late administration of high allergic food decreases the risk of food allergy**
- e. Vitamin D should be supplemented since birth

50- You are evaluating a 6-year-old boy routinely for school entry. He looks well and not distressed. Physical exam of heart shows normal S1, and S2 has a predominantly fixed split. There is 3/6 ejection systolic murmur at the upper left sternal border and his pulses are normal in all extremities, Of the following the most likely diagnosis is:

- a. Atrial septal defect (ASD)
- b. Ventricular septal defect (VSD)
- c. Hypertrophic obstructive cardiomyopathy (HOCM)
- d. Aortic stenosis (AS)
- e. Pulmonary stenosis (PS)

51 - a 6 month old male patient presented with fever and bruises of 3 days duration , you did a complete blood count and found the WBC count 3/mm³ and Hb :5 g/dl . which of the following is wrong:

- a. it is a hematological emergency that needs to be investigated
- b. you may find musculoskeletal finding on physical examination
- c. they need droplet and contact isolation
- d. antibiotic coverage is not indicated
- e. in older ages it is related to some viral infection .

52 - One of the following is true about Ig A nephropathy:

- a. Presents as gross hematuria 4 weeks after upper respiratory tract infection
- b. An elevated Ig A level is required for the diagnosis
- c. results from a galactose-deficient IgA1 that acts as auto-antigen
- d. A low serum C3 and C4 level is required for the diagnosis
- e. recurrent gross hematuria indicates poor prognosis

53- A 3 year old male patient presents with purpuric skin rash that appeared on both calves,he has limping due to knee pain that was followed by abdominal pain. Which of the following regarding this clinical condition is wrong :

- a. recurrence of skin rash is highly expected in acute phase of the disease and later upon any stressful event
- b. renal complication is the second most common criteria for the diagnosis and renal biopsy is needed in certain conditions
- c. corticosteroid is needed in Gastrointestinal and CNS complication
- d. GI presentation is variable from abdominal pain to intestinal ischemia
- e. its not a recurrent condition in children

54 - Regarding nerve injury at birth, which of the following statements is correct?

- a. Facial nerve paralysis is usually bilateral
- b. Damage to C1,C2 causes Klumpke's paralysis
- c. Horner's syndrome is due to C8, T1 injury.
- d. The arm in Klumpke's paralysis is held in waiter's tip position.
- e. Injury of C5, C6 may cause an Erb's paralysis

55 - A 5 year old boy presented with jaundice of 3 days duration ,his HR :150 ,he has pale conjunctiva and yellowish sclera.After history of fava beans ingestion all of the following lab results are expected except :

- a. DCT negative
- b. hemoglobinuria
- c. low Hb
- d. low reticulocytes
- e. high LDH

56 - All of the following are consistent with HSP (henoch scholnein) nephritis except :

- a. Hypertension in most cases
- b. Proteinuria in some cases
- c. Thrombocytopenia**
- d. Crescents on biopsy
- e. Gross hematuria

57 - Which of the following statements regarding fluid balance and therapy in children is not correct ?

- a. The ratio of the intracellular fluid volume to the extracellular reaches adult level by 1 year of age.
- b. The blood osmolality is measured in mmol/L and is a contribution of sodium, potassium and glucose.**
- c. The renin angiotensin system is an important factor in controlling blood volume
- d. The daily potassium maintenance in a healthy child is 1-2 mEq/Kg
- e. In a child with mild dehydration a 0.9% NS bolus is usually not required.

58 - All of the following are used in the management of TLS(tumor lysis syndrome) except :

- a. calcium gluconate
- b. chemotherapeutic agents**
- c. insulin and glucose
- d. allopurinol
- e. rasburicase

59 - Regarding treatment of neonatal convulsion due to neonatal hypoglycaemia, the initial step should be:

- a. I.V hydrocortisone
- b. An intravenous bolus of 200 mg/kg (2 mL/kg) of 10% glucose-400 mg/kg (4 mL/kg) of 10% glucose**
- c. Initial therapy should be a glucose infusion given at 8 mg/kg/min
- d. I.V diazoxide
- e. I.V octreotide

60 - You are performing a routine discharge examination on a term baby on day 4 of life and notice a swelling on the head. The baby had been delivered by a vacuum extraction and has been well since birth. The swelling is confined to the right parietal bone and measures approximately 4 × 4 cm, it does not cross the suture lines, it is soft and fluctuant. Which one of the following statements is true?

- a. This is most like a subgaleal haemorrhage.
- b. The baby has caput succedaneum.
- c. The baby should have a CT of the head performed before discharge.
- d. This is a cephalhaematoma.**
- e. This swelling should be drained as soon as possible.

61 - A 20 day old male baby found to have asymmetrical right and left limbs with large umbilical mass and hypoglycemia,all of the following are needed except :

- a. renal ultrasound
- b. abdominal ultrasound
- c. alfa fetoprotein
- d. eye exam
- e. hearing exam**

62 - The following statements regarding transient tachypnea of the newborn (TTN) in the newborn are correct, EXCEPT:

- a. Infants born by C-section are at increase risk for developing TTN
- b. Residual pulmonary damage is common amongst infants who have TTN**
- c. The incidence of TTN is higher than RDS
- d. TTN shows marked improvement with 24 hours
- e. Supportive treatment is required only

63 - Which of the following is the most common cause of chronic kidney disease in children?

- a. Nephrotic syndrome
- b. Autosomal recessive polycystic kidney disease
- c. congenital anomalies**
- d. Nephrotoxic Medications
- e. Hypertension

64 - A 4 year old male patient presented with history of gum bleeding of 3 days duration ,mother implied that there is history of URI(upper respiratory tract infection) 2 weeks ago,his vital signs were normal ,no lymph node enlargement ,no organomegaly ,his pletlet count 10×10^9 which of the following is true:

- a. platelet transfusion is highly recommended in this case
- b. measurement of anti-pletlet antibodies is essential for diagnosis
- c. splenectomy is the preferred way of treatment .
- d. if these finding persist beyond 6 months, anti double standered-dna and anti nuclear antibody should be sent**
- e. the bone marrow aspiration and biopsy is the first line investigation for diagnosis

65 - A 2 year old male patient presented with fever of 6 days duration associated with bilateral conjunctival injection and cracked lips , ESR and CRP were markedly elevated. Which of the following is true :

- a. all children diagnosed with the above condition will have ultimately coronary artery involvement
- b. it's proven to be of infectious origin
- c. it can be presented without fever and called atypical disease.
- d. echocardiogram is needed only for diagnostic but not treatment plan
- e. live attenuated vaccines is postponed 11 months after treatment**

66 - Which of the following is the least useful in the workup for diagnosis of rickets:

- a. serum calcium**
- b. PTH level
- c. serum phosphate
- d. 25(OH)VitD3 level
- e. urine phosphate

67 - ALL of the following is true regarding juvenile idiopathic arthritis EXCEPT:

- a. Oligoarticular type is highly associated with uveitis
- b. Machrophage activating syndrome can be either the first presentation of the disease or result of non -compliance to treatment
- c. limb length discrepancy is well known chronic complication
- d. polyarticular is the best prognostic type**
- e. arthritis can be absent initially in systemic onset type

68 - which of the following practices is a recommended practice:

- a. exclusive goat milk consumption under the age of one year
- b. consumption of one liter of cow milk formula at 1 to 2 years of age
- c. vitamin D Supplements to exclusive breast fed baby
- d. introduction of 3 types of food upon the start of weaning
- e. discontinuation of iron therapy once the HB level has increased

69 - All of the following are causes of Excessive Pulmonary Blood Flow, EXCEPT:

- a. Ventricular Septal Defect (VSD)
- b. Atrial Septal Defect (ASD)
- c. Patent Ductus Arteriosus (PDA)
- d. Sever Pulmonary stenosis
- e. Atrioventricular Septal Defect (AVSD)

70 - A multiparous woman whose blood type is negative, gives birth at term to an infant who has (A positive) blood group and a hematocrit of 55%. A serum bilirubin level obtained at 12 hr of age is 13 mg/dL. Which of the following laboratory findings would be strongly characteristic of RH haemolytic disease?

- a. Elevated reticulocyte count
- b. Strongly positive direct Coombs test
- c. Fragmented red blood cells in the blood smear
- d. Drop in haemoglobin
- e. Spherocyte on blood smear

71 - At birth, a newborn infant is noted to have the following findings: heart rate 70/min, poor and irregular respiratory effort, limp, no reflex, blue all over the body. The Apgar score of the baby at this point is:

Select one:

- a. 0
- b. 1
- c. 2
- d. 3
- e. 4

72 - Which of the following bacteria is less likely to be responsible for early onset neonatal sepsis?

- a. Group B streptococcus
- b. *Listeria monocytogenes*
- c. *Escherichia coli*
- d. *Klebsiella pneumonia*
- e. *Staphylococcus aureus*

73 - Recognized complications of premature infant include all of the following EXCEPT:

- a. increased liability to infection
- b. polycythemia
- c. gastro-oesophageal reflux
- d. rickets
- e. Hydrocephalus

74 - Which of the following is not correct combination ?

- a. sulbutamol K 2.7
- b. DKA Na 127
- c. MeningitisNa 123
- d. Cyclosporine K 2.7**
- e. pyloric stenosisHCO3 33

75 - A 14-day old male full term infant, presents to clinic for well-child check. His mother is concerned because she has noticed that his eyes are turning yellow." She reports that he is a "good eater and is exclusively breast-fed. The patient has gained weight since birth and is voiding and stooling appropriately. What is the most likely cause of his jaundice?

Select one:

- a. Physiologic jaundice.
- b. Crigler-Najjar.
- c. Breast-feeding jaundice.
- d. Breast milk jaundice.**
- e. TORCH infection.

76 - All of the following are suggestive of Prerenal acute kidney injury (AKI) except:

- a. Hypotension and use of inotropes
- b. small dysplastic kidneys on renal US**
- c. Urine specific gravity of 1.025
- d. FENa less than 1 %
- e. Urine spot Na less than 20 mEq/L

77 - A 4 year old girl presents with fever 39,vomiting for one time and abdominal pain.Urine analysis showed positive leukocyte esterase and nitrites. Which of the following antibiotics is not effective in treating her?

- a. Gentamicin
- b. Cefixime
- c. Trimethoprim/sulfamethoxazole
- d. Nitrofurantoin**
- e. Cefotaxime

78 - Complications of intravenous immunoglobulin (IVIG) therapy include all of the following EXCEPT:

- a. Anaphylaxis
- b. Fluid overload
- c. Transmission of HIV**
- d. Aseptic meningitis
- e. Systemic reactions

79 - All of the following are risk factors for necrotizing enterocolitis, EXCEPT:

- a. Premature infant with birth weight less than 2 kg
- b. Hypotension
- c. Transient tachypnia of newborn**
- d. Patent ductus arteriosus
- e. Birth asphyxia

80 - while you are examining a baby who is 2 months old, you expect to find all the following except:

- a. positive babiniski sign
- b. bilateral clonus**
- c. persistent fisting in both hands
- d. head support
- e. positive moro reflex

81 - Regarding congenital adrenal hyperplasia (CAH), all are true except :

- a. A group of disorders inherited as autosomal recessive disease
- b. Patients with classic CAH are diagnosed early after birth
- c. Females with 21 hydroxylase deficiency usually have ambiguous genitalia
- d. Males with 17-alpha hydroxylase deficiency have ambiguous genitalia
- e. Elevated 17-hydroxyprogesterone level is found in 3-beta-hydroxysteroid dehydrogenase deficiency**

82 - the differential diagnosis of Kawasaki disease includes all of the following EXCEPT:

- a. Dermatomyositis**
- b. Toxic shock syndrome
- c. Scarlet fever
- d. Stevens-Johnson syndrome
- e. Measles

83 - G6PD DEFICIENCY is inherited as :

- a. AUTOSOMAL RECESSIVE
- b. AUTOSOMAL DOMINANT
- c. XLINKED DOMINANT
- d. XLINKED RECESSIVE**
- e. MITOCHONDRIAL INHERITANCE

84 - A 10 year old boy is on peritoneal dialysis due to nephrotic syndrome , all of the following are expected to be seen on his renal biopsy except?

- a. FSGS (Focal segmental Glomerulosclerosis)
- b. MCD (minimal change disease)**
- c. Diffuse mesangial sclerosis (DMS)
- d. Wegeners (ANCA) Nephritis
- e. MPGN (Membranoproliferative GN)

85 - A 3 year old male patient presented with high grade fever ,lethargy and with WBC count = 2.0 and differential of neutrophils /lymphocytes: 5/80 ,which of the following is true

- a. the most common cause of this condition is congenital
- b. they do not need admission , and home observation is sufficient
- c. the absolute neutrophilic count is 100, which is severe neutropenia**
- d. ceftriaxone is the best choice in these cases
- e. bone marrow aspiration and biopsy is not needed in prolonged recurrent cases

86 - Which maintenance fluid is the one to be given to a child who weighs 30 kg?

- a. 1500 ml/24hr of G10W 0.9 % NS
- b. 1700 ml/24 hr of G10W 0.45 % NS
- c. 1700 ml/24hr of G5W 0.18 % NS
- d. 1500 ml/24hr of G5W 0.45 % NS
- e. 1700 ml/24hr of G5W 0.45 % NS**

87 - In tetralogy of Fallot all the following are correct, EXCEPT:

- a. Chest x ray usually shows Egg-on-a-string sign.
- b. Iron deficiency anemia increases the risk of hypoxic spells.
- c. Hypoxic spells occur on crying.
- d. Hypoxic spells may be treated with morphine.
- e. Beta adrenergic blockers are helpful for hypoxic spells.

88 - All of the following are Contributing factors in development of Respiratory Distress Syndrome, EXCEPT:

- a. Meconium aspiration syndrome
- b. Maternal diabetes
- c. Maternal narcotic addiction
- d. Pulmonary infections with group B Strep
- e. Fetal asphyxia

89 - Infant of diabetic mother is at increase risk of all the following EXCEPT:

- a. birth trauma
- b. transient hypercalcemia
- c. respiratory distress syndrome
- d. hypertrophic cardiomyopathy
- e. Jaundice

90 - All of the following are correct about post streptococcal glomerulonephritis Except :

- a. On electron microscopy, electron-dense deposits "humps" are observed on the epithelial side of the Glomerular basement membrane GBM
- b. Compared to throat infections ,skin infections usually take longer to cause the nephritis
- c. In rare circumstances, some patients might develop rapid progressive nephritis RPGN requiring dialysis
- d. Persistent microscopic hematuria may persist for 1 yr after the initial presentation.
- e. Early use of antibiotics will improve the outcomes and decrease the need for dialysis

91 - All of the following are correct about acute kidney injury (AKI)except

- a. In AKI patients requiring dialysis, those who receive hemodialysis usually have better outcomes
- b. In euvolumic patients,fluid therapy as insinsibles plus urine output replacement is the safest
- c. Polyuria might be seen in the recovery phase of ATN (acute tubular necrosis)
- d. The administration of angiotensin-converting enzyme (ACE) inhibitor will exacerbate the condition
- e. In children admitted to intensive care (PICU), the incidence of AKI is about 5-10%

92 - regarding hemophilia which of the following is wrong :

- a. first attack of bleeding in a joint will make it a target for further bleeding
- b. non responsive bleeding in hemophilias is related to inhibitor formation for the factors.
- c. hemophilia is rarely associated with intracranial bleeding in neonate.
- d. it can be screened for by PTT .
- e. somatic hemophilia is common in type 3 von williebrand disease

93 - One of the following is correct about nephrotic syndrome in children:

- a. A 5-year old boy who had 2 relapses last year needs a renal biopsy
- b. children should be given all the recommended vaccines
- c. A patient with low C3 level at daignsis requires a kidney biopsy
- d. The diagnosis is confirmed by low serum albumin<2.5 g/dl
- e. Children with congenital nephrotic syndrome usually respond to steroids

94 - The drug of choice for neonatal seizure is:

- a. carbamazepine
- b. valproic acid
- c. phenobarbitone
- d. midazolam
- e. phynetoïn

95 - Diagnostic criteria for physiological jaundice include all the following, EXCEPT:

- a. daily rise of serum bilirubin does not exceed 5mg/ 100ml/day
- b. peak bilirubin level 12mg/ 100ml
- c. appears during the first 24 hours of life
- d. fades by 7 – 10 days
- e. it is unconjugated hyperbilirubinaemia

96 - All of the following are correct about (urinary tract infection) UTI in children except :

- a. Pseudomonas species infection may indicate renal tract abnormality.
- b. More common in males in the first year of life than females are at higher risk
- c. Children with cystitis may present with gross hematuria
- d. After a first UTI, 50-60% of children will develop a second infection within 1 year
- e. Children with pyelonephritis should be treated with IV antibiotics as this is more effective

97 - All of the following are associated with nephritic syndrome except:

- a. post infectious glomerulonephritis
- b. Henoch schonlein purpura
- c. Wegener's granulomatosis
- d. Amyloidosis
- e. lupus nephritis

98 - All of the following require increasing the maintenance fluids except :

- a. humidified ventilation
- b. burns
- c. fever
- d. Phototherapy
- e. polyuria

99 - which of the following is a wrong statement:

- a. hemarthrosis is the most common presentation of factor deficiency
- b. vascular and platelet abnormality will be presented with petechial rash
- c. child abuse is one of the most important differential diagnosis in bleeding disorder
- d. bleeding time will not be affected in hemophilia
- e. All cases with factor deficiency will have prothrombin time (PT) or partial thromboplastin time (PTT) affected

100 - Which of the following supports the diagnosis of prematurity in physical exam?

- a. Ear with instant recoil.
- b. Gelatinous red translucent skin.
- c. Creases over whole sole of the foot.
- d. Areola measures 10 mm bud.
- e. Both testes are descended into scrotum.

2019 - 6th year:

1. First factor affected by vit.k deficiency:
Factor 7
2. Protective factor for RDS except :
Elective C/S
3. One of the following mismatch:
Kawasaki with vesicular rash
4. At 18 month age:
Shows 4 parts of the body
5. Which is wrong when comparing MS and Adem: -
 - Causes encephalopathy... Adem only
 - Presents after 10 years of age... MS only
 - New lesion on follow up MRI... Ms only
 - Causes unilateral optic neuritis..... MS only
 - **CSF lymphocytosis... Both ✓**
6. Comparing GBS with poliomyelitis... all true except:
Can be due to side effect ... Only GBS
7. One is wrong about NTD :
craniosynstosis is associated with persistently open anterior fontanelle , it is the most common disability
8. All the following cause delay closure of anterior fontanelle except :
 - Hypothyroidism
 - Rickets
 - Hydrocephalus
 - **Craniosynstosis ✓**
 - Occult cranium.bifidum
9. hydrocephalus الجواب انه كان في سؤال بده الغلط عن ال
hour
- 10.Incorrect answer regarding autoimmune encephalitis: -
 - hsv can sometimes trigger autoimmune encephalitis
 - Behavioral changes are common presentation in autoimmune encephalitis.
 - **Anti-potassium channel antibodies are the most common causative antibodies. ✓**
- 11.SMA disease one false :
 - **X_linked recessive ✓**
 - Death at 2 year
 - In pregnancy decrease fetal movement the main chief complain

12. Q about newborns for mothers with hepatitis b:
Answer was for children born to mothers positive for HbsAg, give both hep. Virus b vaccine and HBIG
13. Q about HSV what's wrong?
Tx does not decrease the mortality
14. All of the following can cause high anion gap metabolic acidosis except :
Acetazolamide
15. Scenario of a patient coming presenting to the ER with something, ABGs and glucose were given and were indicating Dka, in the ER he was given a bolus of 400 ml (his weight was 20 kg), after transporting him to the ward (after this bolus) what fluid you will give him?
Answer was normal saline (we use normal saline for the first 4-6 hours in DKA)
16. Incorrect about HUS:
 - Factor H deficiency is associated with high recurrence post renal transplant.
 - **Children older than 6 years of age have better prognosis. ✓**
17. Patient with minimal change disease who had some other problem and they gave us some investigations including indicating an AKI including BUN that was more than 100 and creatinine about 5 with urine sodium of 10meq/l... :
The right answer was pre-renal azotemia
18. All of the following is true about MINIMAL change disease except :
The answer is 30% progress to ESRD
19. Which of the following organism doesn't cause acute pharyngitis:
 - **streptococcus pneumonia ✓**
 - Neisseria gonorrhoea
 - Group c strept.
 - fusobacterium necropharum - diphtheria
20. All about enterovirus are true except : -
 - cause aseptic meningitis
 - cause hand foot and mouth disease
 - **Causes ulcerative stomatitis ✓ (it is caused by herpes).**
 - herpangina
21. A child who had fever with no earache.. On exam by otoscope, the tympanic membrane of the right ear was hyperemic, tense, bulging and not mobile while the left one was transparent and mobile, dx?
 Answers were combinations of left and right normal, acute otitis media and otitis media with effusion, Answer :
Acute otitis media of the right and normal left.
22. Case female with palpable tip spleen, erythematous tonsils a some think like that **Answer EBV**

23. A child taking his grandfather medication and presenting with pH of 7.50 and pCO₂ 22 and hypoglycemia (more details were mentioned) :

Answer is salicylate poisoning.

24. Anaphylaxis management. –

- **IM 0.01ml/kg of (1:1000) adrenaline ✓**
- SC 0.01ml/kg of (1:1000) adrenaline

25. Wrong mismatch :

cyclosporine — alopecia

26. About vaccines ... one is wrong :

varicella vaccine is given in ALL patient on maintenance therapy

27. One is not from Johnes criteria :

Myocarditis

28. One is not a benign skin lesion

- mongolian spots
- erythema toxicum
- **port wine stain ✓**

29. Machinery heart murmur in new born child ... :

PDA

30. How to assess 21 hydroxylase :

- cortisol
- 17 pregnenolone rennin
- **17 progesterone ✓**

31. One of the following labs used for congenital hypothyroid screening :

- Tsh , T4
- Tsh , T4 , t3
- T3 , t4
- **TSH ✓**

32. One causes DM :

- **toxoplasma ✓**
- rubella
- milk allergy

33. Young patient (i think 6 years old girl), in the description she had pubertal changes and on investigations she had elevated LH, the most likely cause is:

- Exogenous estrogens
- Endogenous estrogen production
- **Central precocious puberty ✓**
- Estrogen secreting tumor

34. Side effect of growth hormone, except :

- Gynecomastia
- Persistent hypothyroidism
- DM typ2

49.Mismatch

EEG.... exclude epilepsy

50. في سؤال عن ام جابت ابنها عالعيادة وانه بعملش eye contact وانه بضل يطول cards من الشنته ويحكي عنهم بشكل متكرر وكانه عنده صعوبة بالقراءة وشاطر بالرياضيات (مش عارف باقي ال school performance كيف كان) و انه مش interested انه يلعب مع اللي قده

Autism :

51.A child who has frequent spitting following feeds and is otherwise normal i think (growth and so)..

The incorrect answer is: -Ph probe monitoring is the best diagnostic study

52.A neonate (2 or 3 weeks) who was born at home, now presenting with hematemesis (coffee colored emesis) and i don't remember whether they gave pt or not.

Diagnosis was vit k deficiency.

53.A child is presenting now with watery diarrhea... He had acute gastroenteritis 2 weeks ago and stool analysis showed rota virus, then he got better and was discharged on ORS??

- persistent rota virus
- stool analysis now will show acidic stool that is positive for reducing substances

54.Regarding hepatitis serology , what is wrong ?

there is anti Hbsag ab and HbcAg ab after vaccine

55.Mismatched :

defect fatty acid metabolism : ketotic hypoglycemia

56.A child that was brought after drowning, labs were indicative of DIC (low platelets, prolonged pt, ptt and increased INR)... I don't remember if there was more information, the most effective supportive treatment is:

Answer was platelets and fresh frozen plasma.

57.True regarding about hemophilia, :

- the most common hemophilia is caused by deficiency of factor 9.
- **somatic hemophilia is a variant of vonwillebrand disease. ✓**
- Hemophilia is more sever in females than males.

58.Female with splenomegaly, lethargy, fever, cervical lymph node :

Answer : ALL

59.Patient diagnosed with JIA , next step is ?

refer to ophthalmologist

60.Newborn presenting with finding suggestive of heart failure, on chest x-ray one of the findings was narrow mediastinum.:

Answer :TGA

61. Mediterranean fever (brucellosis + typhoid) في سؤال عن ال enteric fever بال
Choices: Both have human vaccine Best isolated from bone marrow Feco oral
transmission عارف بده الصح ولا الغلط.

62. Supravalvular aortic stenosis :

William

63. When does a newborn with large VSD present?

- Immediately
- **6-8 weeks ✓**
- 2 months
- 3-4 months
- >4 months

64. Regarding down syndrome , what is wrong ?

affected by paternal age

65. Cushing triad is ?

hypertension – bradycardia

2019 - 5th year

1-Not a complication of baby of diabetic mother :

Hypermagnesemia

2- Wrong regardin Breast milk jaundice :

Resuming of breast feeding after days will increase bilirubin again.

3-Not a cause of early sepsis :

Staph aureus

4- 600 g neonate with low po₂ and normal pH (what are other details ??) , Next step of mangament :

IV glucose (confirmed by doctor)

5- Wrong regarding Neonatal seizure :

subtle type is more in term than pre-term ??

6- Wrong regarding TTN :

More common than RDS

7- Apgar score for very pale baby , 30 RR irregular , HR = 90 , No reflex at nasogastric tube placement , Flaccidity :

2 apgar score

8- Wrong regarding Anemia :

Babies are at risk of developing IDA in the first 4-6 months when they are exclusively on breast feeding

9- Wrong matching regarding side effects of anti-epileptic :

Phenytoin causes hair loss

10- Wrong regarding Duchene muscular dystrophy :

Intelligence is spared

11- Wrong mismatch regarding Migraine headache :

Prodrome – Severe anorexia

12- Which of following isn't indication for Neuroimaging :

Brief febrile convulsion

13- One is not Pervasive development disorder :

oppositional defiant disorder

14- Wrong regarding Cerebral palsy :

Most common cause of perinatal CP is cause by HIE.

15- Wrong regarding Jordanian vaccination program :

OPV is given 3 times until age of 18th month

16- Hx of Seizure with impaired level of consciousness , Lumbar puncture is clear , WBCs are 50 all are lymphocytes , What is the next step of management :

PCR for Herpes simplex

17-Wrong regarding normal development : at 24 months :

vocabulary 20 words

- 18- One is not manifestation that indicates Impulsivity :
Don't follow commands (or something like that cz it indicates poor attention)
- 19-Not a rheumatological symptom :
Headache (other choices : Fever , fatigue , joint pain , skin rash)
- 20- Female patient with lower abdominal pain and frequency , dysuria , no fever ,
U/S normal , what is the next step for management :
oral nitrofurantoin
- 21-Wrong regarding Sinusitis in children :
Frontal sinus treated with Oral antibiotics
- 22-One of the following don't cause arthritis :
RSV
- 23- Not used vaccine for Severe combined immune deficiency :
Measles
- 24- One is not cyanotic Heart disease :
PDA
- 25-Mode of transmtion of TB :
person to person air borne droplets
- 26-Heart disease which is associated with Noonan syndrome :
Pulmonary stenosis
- 27-HbA1C level indicating Sugar regulation during last :
3 months
- 28- Folate is important for development of :
Central nervous system
- 29- Wrong regarding Cow's milk protein :
It isn't affect babies who are exclusively on breast feeding
- 30-Not used for treatment of MRSA :
meropenem
- 31-Not a feature of congenital Hypothyroidism :
microcephaly (actually it is associated with cerebral myxedema > Increase head circumference)
- 32-Case of patient with no teeth growth at age of 18th month , one isn't an cause
of her condition :
Tight tongue
- 33-Which of the following is wrong :
Patau syndrome is 18 trisomy
- 34- One is wrong regarding hypophosphatemia rickets :
It is X-linked recessive (it's Dominant)

35-What is the mode of inheritance for disease that transmitted 100% from affected father to his daughters and 50% for affected mother to her sons :

X-linked dominant

36- Typical scenario of epiglottitis with thumb sign , what is the next step :

Call for Anesthesia consultation for intubation.

37-Case scenario of stridor with steeple sign , most likely organism :

Parainfluenza

38 – Case of Toxic patient with stridor , not affected by lying supine , Dx ?

Bacterial tracheitis

39- Wrong regarding mode of administration of vaccines :

BCG is given subcutaneous

40-Wrong regarding Infectious mononucleosis :

Rash that appears during course of amoxicillin indicates Penicillin allergy and should not be given penicillin in future for that patient

41- Case of pharyngitis and fatigue with hepatomegaly , leukocytosis with atypical lymphocytes “

Infectious mononucleosis

42-Laboratory result indicates hemolytic anemia :

Indirect bilirubin

43- cut point of anemia is :

11 mg / dl for children between 2-7 years (I'm not sure)

44- One doesn't cause nephrotic syndrome :

Wegner at 14 year female patient

45- Patient with Gastroenteritis came to ER with seizure and level of 107 mg/dl of sodium what is next step :

bulious 3% saline

46- History of patient with hypertension , hematuria and edema , what is the next step :

400 ml only for maintenance

47- What is the best lab investigation for Post strept glomerulonephritis :

C3 level

48 – Wrong regarding CKD :

We use for treatment of hypocalcemia High dose of calcium gluconate

49- Treatment of Mycoplasma pneumoniae :

clarithromycin and azithromycin

50-One is wrong :

we use usually ceftriaxone for most cases of Gastroenteritis

51- Patient with nephrotic came with rigid abdomen and fever , what is the antibiotic : **Ceftriaxone and vanco.**

52- One is not used for treatment of nephrotic syndrome :

Erythropoitein

53-One is true :

IgA Nephropathy will progress in 30% of cases to ESRD

54- Patient with 7.9 mEq of potassium what is the best next step :

Calcium gluconate (to protect heart from arrest)

55-Male with ambiguous genetalia and testis at inguinal , dx :

3 beta- dehydroxylase deficiency

56- Wrong regarding adrenal 21-hydroxylase deficiency :

low 17-hydroxyprogesterone

57- One drug isn't used for Cyanotic spells at TOF :

steroid

58- Which of following is main risk factor for (special type I forget it) :

Eczema

59-Most common cause of spared Thrombocytopenia :

ITP

60- True regarding vW disease :

It presents as mucocutaneous bleeding

61-True regarding anemia :

Folate deficiency is presented faster than b12

62- Wrong statement :

broncholitis will increase risk of asthma in future

63- one is not a Sign of moderate to severe asthma:

clubbing

64- Case of biliary atresia came later on with hematemesis , dilated vessels of abdomen , Cause of bleeding is :

Esophageal varices

65- Chronic diarrhea with abdominal distention and paleness, doctor gave him vitamins and irons to treat his anemia but he is not responding , what is the next step for investigation : **Tissue transglutamase IgA ab + IgA level**

66- Hx of failure to thrive , baby is no formula given 90 ml / 6 times daily , no chronic diarrhea or respiratory symptoms :

Low caloric intake

67- IVIG not used in :

Selective IgA deficiency (risk of anaphylaxis , but I'm not sure at all because there is another choice IVIG is not used like x-linked agammaglobinemia)

68-Not a part of Jones criteria of rheumatic fever :

Recurrent joint pain of large joints or Tachycardia with mitral regurgitation ? I'm not sure !

69-Wrong regarding TOF :

associated with left ventricular obstruction

70- Not a lab result for Kawasaki :

Spherocytes at peripheral smear

71- Not an expected laboratory result for Prerenal Acute kidney injury :

urinary sodium of 55 mEq

72- Minimal change disease

73-Not true regarding abdominal examination :

Most of abdominal masses are Malignant

74-11 year old male with long stature and normal IQ :

Marfan ? I'm not sure

75- Wrong regarding Childhood leukemia :

75% of cases of ALL are T cell

76-First sign of puberty for male :

Testis enlargement

77-4 year old patient with hematuria and HTN and abdominal mass , Dx :

Wilm's tumor

78- Best management for patient with diarrhea due to GE and no vomiting , no effect on oral intake , mild dehydration :

ORS

79- One manifestation is associated with physiological Gastroesophageal reflux :

Non-billous vomiting

80-What is the difference between Viral croup and spasmodic croup :

Rhinorrhea and low fever

81-Question about viral hepatitis ???

82-Hx of self limiting Tonsillitis after that he developed new murmur , ankle swelling , what is the dx :

Rheumatic fever

83- Case of early morning hyperglycemia , glucose reading at 3 am is high (Dawn phenomenon) , what is the treatment :

Increase dose of insulin at night

84- Milk formula usef for cow's milk Allergy :

aminoacids residues formula

85-One is not a cause of Infantile Wheeze :

Hypocalcemia ? I'm not sure

86-One statement is true :

Pneumocystis intestinalis is a bad prognostic sign or it is confirmatory sign for NEC ?

87- hypotension , hyper-resonance chest , what is the diagnosis :

Pneumothorax and pneumomediastinum

88- Wrong regarding IUGR:

It is associated with anemia

89- Known case of Cystic fibrosis present with recurrent vomiting and abdominal pain , which of the following lab results are not expected to c :

HCo3 = 17 mEq

90- Cystic fibrosis Question ? :

potentiator or something like that ???

91- Wrong matching between cause of pneumonia and age :

New born - Streptococcal pneumoniae ?

92- Wrong regarding patient with proteinuria under age of 1 :

It causes end stage renal disease ??? I'm not sure

93- Wrong regarding RDS :

Sphngomyelin indicates lung maturity

94- One is wrong about AKI....

Mostly caused by Obstructive uropathy

95-Baby born to a mother with positive HBsAg , what is the most appropriate management to the baby?

HB vaccine+ Immunoglobulins

96- which is wrong :

Head Circumference grows 2cm / month during first year

97- All true regarding ASD except :

usually associated with FTT

98- 8 weeks baby with hemoglobin =11,what is the action ?

nothing to do .(physiological)

99- regarding febrile seizure one is wrong :

EEG predict recurrence .

2018 5th year

- 1- CP one is false :
Spastic associated with hyperbilirubinemia
- 2- duchenne MD one is false :
no cognitive impairment
- 3- drug of choice for listeria monocytogene:
ampicillin
- 4- 21 hydroxylase deficiency one is false
present with vomiting and fever
- 5- Child was exclusive on breast feeding.. On **weaning** he start to have chronic diarrhea abd distention and ftt.. Dx is?
Celiac disease
- 6- For DKA.. Still ketotic.. And blood sugar reaches 190.. He was on insulin drip and i.v.f.. What to do next?
Dextrose w/ NS and continue the insulin
- 7- Gross hematuria isn't a cause of progression kidney injury in ?
Iga nephropathy
- 8- Fever in child i think age <5 yr.. Then when the fever disappeared the rash start. Pink pinpoint blanchable -
> this is common infection acquired in children
- 9- the difference between DM1 and DM2 what is wrong ?
usually positive family hx in DM1
- 10- Sneezing , watery rinorrhea , pale mucosa :
allergic rhinitis
- 11- about the breath holding spells..
Caused by agitation?
- 12- Types of genetic mutations in down syndrome and its relation to mother age
translocation is not related to maternal age
- 13- In pneumonia one organism associated with immunodeficiency?
Pneumocystis carinii
- 14- A case of mother with abruptio placenta and the neonate with blood streaks in stool the cause :
swallowed blood
- 15- One is wrong about congenital hypothyroidism ?
mostly goiterous

- 16- What causes small blood vessel vasculitis?
HSP
- 17- Post neonatal meningitis one is wrong :
pneumococci isnt the most common organism
- 18- **بضلى بيبى بالليل وعنده** left side myoclonus?
Rolandic epilepsy
- 19- about enuresis . Age was <5 what to do?
Reassure the mother
- 20- About paracetamol poisoning.. Asymptomatic child .. What to do?
gastric lavage
- 21- Neonatal sepsis , risk factors for late sepsis except :
early enteral feeding
- 22- About GBS sepsis , all true except :
oral antibiotics are useful for intrapatum prophylaxis
- 23- About Leukemia , all true except
hyperdiploidy is associated with poor prognosis
- 24- What s wrong about Post. Strep GN ?
antibiotics REGRESS THE DISEASE
- 25- Child with leg pain , purpura , Hb 7 , next thing to do?
Bone marrow biopsy
- 26- caput succendum not related to
meningitis
- 27- Septic 3 yrs old female with pyelonephritis , what empiric tx
ceftriaxone and vancomycin
iv ampicillin + gentamycin
- 28- Megaloblastic anemia cause
Phenyotin
- 29- Not used in exacerbation asthma?
inhaled cs
- 30- Wrong about Precococious puberty
in male is familial
- 31- Cow milk formula child complained of rota infection what formula now he will use ?
Lactose free milk
- 32- infant of diabetec mother complications wrong
Anemia

- 33- Turner syndrome what is not characteristics
antithyroid antibody
- 34- Patient 39 fever, u/s hydronephrosis what to do?
Vcug
- 35- Difference between scarlet and Kawasaki
Thrombocytosis in scarlet only
- 36- Choose the wrong answer?
Acrodermatitis enteropathica – copper
- 37- Sumatriptan,,
,used for child!! and adult
- 38- Migraine... Wrong answer
fever and weight loss.
- 39- A boy is very active but can't speak and his hearing is good and do a repetitive wash like movement what diagnosis?
Functional autism
- 40- Tb
low protein and low glucose CSF analysis
- 41- wrong about Tuberculin test :
Induration is measured 8-12 hours
- 42- wrong about Treatment of ITP
first choice is cyclosporin
- 43- Absence seizure ?
Ethosuximide
- 44- Wrong about bronchiolitis treatment :
inhaled steroids shortens Hospital stay and improves the condition
- 45- Wrong in Refeeding syndrome :
hypoglycemia
- 46- hyperbilirubinemia -
ataxic (False)
- 47- febrile convulsion -
abnormal development
- 48- MCC cyanotic Hd
TOF
- 49- PDA -
endomethacin ttt

- 50- jitterness -
autonomic (false)
- 51- oral polio -
cause polio Dx
- 52- RDS-
Cs without labor
- 53- microcephaly-
Cytomegalovirus
- 54- scaphoid abd + no sounds :
diphragmatic hernia
- 55- a baby can wave byebye cannot scribble w/ pencil
10month
- 56- one month old baby
make a fist
- 57- CP MCC
prenatal
- 58- Anemia with retic count 2% -
b12 def anemia?
- 59- anticoagulation in nephrotic
claxane
- 60- prerenal -
enlarged kidney & hydronephrosis (False)
- 61- wrong about rickets type 2 ...
low OH 1-25 vit
- 62- oral replacment therapy for
mild and moderate dehydration
- 63- Regarding the Q about a patient with cystic fibrosis that had an infection which gave gram negative bacilli on culture... All antibiotics are used except :
azithromycin
- 64- Case : 12 yr female , physically sluggish
congenital hypothyroid
- 65- Regard Otitis media... One is wrong
giving amoxicillin to a child who is vaccinated with pneumococcal vaccine

typhoid

67- Most common cause of apnea after 20 seconds of feeding seizure ?

2017 5th year

1. All of cause polyhydramnios except?
IUGR
2. Regarding CP, whats wrong?
Spastic is 20%
3. Regarding HSP, what is right?
intussusception is its sever complication
4. Case 14 year old female with poor school performance?
Hashimoto
5. All of the following increase the risk of jaundice except ?
Phenobarbital
6. Female patient suffering from night sweating and arthralgia , history of drinking Unpasteurized milk?
brucella
7. Regarding Kawasaki and scarlet fever, whats don't match?
ESR elevated in scarlet fever only
8. Regarding pervasive disorder, whats don't match?
Asperger cause delay in speech
9. Which of the following cause Macrocytic anemia?
Chronic liver disease (not sure)
10. Whats wrong about TTN ?
Surfactant is the best choice for treatment
11. regarding bloody diarrhea, caused by?
 - giardia lamblia (may be this not sure)
 - Entameba histolytica
12. Wrong matching about antiepileptic drugs side effect ?
Livetriacitam... Visual field abnormalities
13. Regarding vaccine, whats wrong?
Rota given SC
14. Wrong about leukemia?
 - 85% is B cell
 - absence of blast exclude leukemia
15. Most common type of CAH ?
21- hydroxylase deficiency
16. Regarding exanthema, whats wrong?
varicella zoster cause Pastia's lines .

17. Wrong about DKA ?

- bicarbonate not given in severe acidosis
- Treatment when severe hypokalemia only

18. wrong about developmental assessment?

10 words on age of 12 month

19. regarding Rh incompatibility, what's wrong?

direct coomb's test is usually negative

20. Child can control head movement, responsive smile, but can't reach out for toys ?

3 months

21. LP results: glucose 15 blood sugar 90, lymphocytes 100, protein elevated I think, all are differential dx except ?

Pseudo tumor cerebri

22. Most common cause of seizures in infants and young children ?

- Febrile
- Idiopathic epilepsy

23. Toddler diarrhea?

No FTT

24. Not used for asthma prophylaxis?

- Systemic steroid
- Salbutamol

25. Dyspnea, cough, wheezes, O2 sat =80% best management ?

Give O2 supplements

26. Regarding the previous Q, what are the findings in lab studies ?

RSV antigens in nasal secretions I think

27. less common to cause early sepsis?

pseudomonas aeruginosa

28. Not present in RDS chest x-ray ?

Patchy infiltration

29. which is wrong about JRA?

oligoarthrits is RF +ve

30. Infiltration with cavitation the most likely organism ?

Staph (not sure)

31. Regarding carditis in ARF, what's wrong?

Myocarditis is the most common

32. Cystic fibrosis?

type 1 diabetes in first year

33. Apgar score, flexion of limb, pulse 90 bpm, cough w/ stimulation, pale, irregular RR, Apgar score is?

5 (not sure)

34. Sinusitis?
common before 1 year wrong
35. breast milk?
more protein than cow
36. Regarding Turner's syndrome, what's wrong?
usually come w/ mental retardation (not sure)
37. Regarding Dx of DM, what's wrong?
Glucose in urine (not sure)
38. Breast bud 1st to appear in females
39. Regarding growth, what's wrong?
weight increase 10g each day
40. A full term newborn boy, what is wrong?
HC is 40 cm
41. immunodeficient except?
suspected if low titer of antibody after vaccination
42. mediated immunodeficiency cell?
 - DiGeorge
 - lethal viral and fungal
 - oral thrush
 - absent thymus
 - Palpable spleen and LN
43. not oligo lung field?
VSD
44. all in first week except?
VSD
45. all cuz decrease pulmonary blood flow except?
VSD
46. wrong match?
ASD----FTT
47. 3 day pt had cyanosis & on CXR egg on side next step in Mx?
give PG
48. pt asymptomatic and has ejection systolic murmur & Rt axis deviation?
ASD
49. continuous machinery murmur?
PDA
50. Patient with painless flank mass and HTN.. in XR it's in kidney and not cross midline?
Willis tumor
51. 3 month baby.. With transfusion exchange.. Has delay in development.?
Athetoid CP

52. All cause unconjugated jaundice except :
Choledochal cyst
53. All about pre renal AKI except :
FE Na >2percent
54. Patient with cut wound clean, Last dtp4yaers, What next step?
Give tetanus toxoid
55. hoarseness of voice stridor next step?
dexa + norepinephrine nebulizer
56. All increase risk of having asthma except?
RSV bronchiolitis
57. wrong about childhood asthma ??
FTT (not sure)
58. Case of fever for 2 days then subsided, a maculopapular rash developed , dx ?
Roselea infantum
59. All about sever HIE except :
Hypertonia and brisk tendon reflex
60. One of the matches is wrong :
Conjunctivitis... Parainfluenza
61. mismatch antidote?
flumazenil – cholinergic
62. all suggestive of chronic kidney insufficiency (ckd) except ?
- Small Dysplastic kidney on U/S (may be this)
 - Anemia
 - FTT
 - HTN
 - Hyperparathyroidism
63. All about US in UTI except :
It's benefit for scarring
64. Wrong about GERD?
no diagnosis after 6 months
65. Wrong about hepatitis A?
cause chronic & fulminant commonly

2016 - Unknown batch

1] What is Wrong about Kawasaki?!

- Fever lasting > 5 Days
- unilateral lymphadenopathy
- Rash can be vesicular XXXXX
- Conjunctivitis without Exudate
- Desquamation happen in the 2 week.

2] What is Wrong about Meningitis?!

- most important Symptom in Neonate is poor Feeding
- post Neonatal mortality is 10%
- Hearing loss is one of the preventable complications.
- Duration of treatment 14-21 days.
- Steroid is Given After the antibiotic

3] Which one is Not matching?!

- gram Negative diplococci \rightarrow pneumococcal meningitis. XXXXX
- 100 lymphocyte / glucose (Normal) / protein < 0 \rightarrow Viral meningitis.
- Normal glucose / Normal protein / Normal cells \rightarrow pseudo Tumor Cerebri
- 100 lymphocyte / Very low protein and glucose \rightarrow TB meningitis
- 200 Neutrophils / low glucose / high protein \rightarrow bacterial meningitis

4] What is Not matching?!

- Ethosuximide \rightarrow Absence epilepsy
- idiopathic primary \rightarrow phenobarbitone
- partial complex \rightarrow carbamazepine
- intractable partial \rightarrow Surgical
- ~~West Syndrome \rightarrow ACTA~~
- partial complex \rightarrow altered or loss of consciousness

5] What is Wrong about Febrile seizures.

- Recurrence 20%
- CNS infection must be Excluded.
- age related and it's overgrown with Time
- it's Risk of Developing epilepsy in future.
- one of the causes of morbidity in Rosola in Infants.

6] a boy who can kiss his parents can Do the Following except

- Hold spoon
- Listen to stories with pictures ~~XXXXX~~
- Name 4 body parts
- Symbolic play
- Can speak 10 words

7] Which one is Not matching

- early hand preference → spastic Diplegia.
- hyperbilirubinemia → choreaathetoid C.P
- Congital posterior fossa lesion → ataxic C.P
- Sandifer Syndrome → Severe gastroesophageal reflux.
- Botulinum Toxin → For Spastic muscles.

8] What is Wrong about Jordanian Vaccination programme.

- it protects against 11 devastating childhood diseases
- last vaccine that was introduced meningococcal.
- BCG is given in the first month.
- 3 Doses of measles by 18 month.
-

9] Which is Not matching

- BCG — killed vaccine
- oral polio — live attenuated
- HBV — recombinant
- Hib — conjugated polysaccharide
-

10] what's wrong about Rota virus

- oral vaccine
- 3 Doses.
- given at any Time before 2 Years
- protects against Diarrhea.
-

11] Which one is Not matching

- Family History — migraine.
- ↑ appetite — prodrome.
- Topomax — Acute TIT of migraine
- OCP + alcohol — ↑ thy symptoms
- Cyclical vomiting — migrain variant

12] Which one is Not matching

- Sionitis — Tension Headache.
- early morning vomiting — Organic Headache.
- papilloedema — ↑ intracranial pressure.
- personality trait — predispose to Migraine.
- abdominal pain, Nausea / vomiting — worst symptoms.

13] What is Wrong about Autism

- Rett Syndrome — microcephaly by 6 month
- Asperger Syndrome — No language Delay
- Tuberous Sclerosis — Autism variant.
- Diagnosed before 3 Years.
-

14] What is Wrong about ADHD

- Sibling Risk 30-40%
- must present for 3 month at 2 Setting
- Learning Difficulty is found
- Substance abuse is complication
- Treatment is combination medical + behavior

15] Not matching Rubella/Varicella.

- incubation period 2-3 → both
- Congenital anomalies — rubella only
- vesicular rash — varicella only
- DNA virus — varicella only
- occipital lymphadenopathy — rubella only.

16] Hand Foot mouth Disease

-
-
-
-
-
-

17 What is Wrong about UTI ?!

- Nitrofurantoin is used to treat pyelonephritis.
- most common organism E. coli
- US is Done to all patient.
-
-

18 Scenario of a patient having signs of UTI + US revealed hydronephrosis what's the Next step for Dx.

- VCUG
- DMSA
- CT
-
-

19 what's wrong about MCD

- 95% respond to steroid.
- Congenital type may progress to ESRD
- Renal biopsy is Mandatory for Dx.
-
-

20 all cause proteinuria Except ?!

- HSP
- Wegner
- Amyloidosis
- IgA nephropathy
- galactosemia

21] Renal biopsy is indicated in all of the following except

- MCD not responding after 2w of Steroid TTT
- Persistent hypocomplementemia for 12w.
-
-
-

22] most common cause of gross recurrent hematuria

- IgA Nephropathy
- PSGN
-
-
-

23] What's wrong about prerenal AKI

- Vomiting is one of the causes
- S.G > 1.020
- FENa < 1
- UNa > 20
- most common form of AKI

24] What's wrong about chronic kidney injury.

- Constriction of
- Supplement of vit D \rightarrow hyperparathyroid
-
-
-

No. _____

Heart Questions ARc

- ① Egg Sign on X-ray
- ② TOF all except.
- ③ all cause P pulmonary Blood flow Except
- ④ Heart Failure case How to Dx
- ⑤ Case about early after birth Respiral dista
or cyanosis.

No. _____

- 1 DM Vs DM 2
- 2 GERD
- 3 Pyloric stenosis
- 4 celiac \Rightarrow bloody diarrhea.
- 5 Cystic Fibrosis (
- 6 TR (presentation)
- 7 infectious mono \Rightarrow CMV
- 8 Growth: head 40 cm x
- 9 congenital anemia & acid x
- 10 goat milk \Rightarrow micro x
- 11 best test for liver \Rightarrow albumin
(12-16) congenital HD.
- 17 Q about AIB.
- 18 TTP \Rightarrow EBV/mottled cervical LN---
- 19 VWF \Rightarrow carry factor 10 x
- 20 congenital adrenal \Rightarrow most 21 hydroxylase
- 21 1st in female puberty \Rightarrow breast bud.
- 22 fluid ??
- 23 ricket ??
- 24 phenobarbital in neonatal seizure
(mechanism of action).

No. _____

25 RDS on X-ray.

26 wrong about HIE: hyper-Na⁺

27 APGAR

28 conjugated hyper-bilirubin \Rightarrow biliary atresia

29 cause of delayed jaundice.

30 breast milk feeding.

31 wrong about TTN: \downarrow complement.

32 \downarrow RDS: 2nd part of twin X

33 Maron stool \Rightarrow Mickle.

34 Down 47 XX + 21

35 lobar pneumonia \Rightarrow strept.

36 zinc deficiency.

(37-38) ALL.

39 lung effusion:

40 abdominal mass + HTN \Rightarrow

41 ~~PTT~~ TTT of hyper K⁺.

42 case of DKA \Rightarrow investigation.

43 Management of acute Asthma except.

44 ~~FTT~~ wrong about FTT \Rightarrow Formula is a cause X

45 history of unpasteurized milk \Rightarrow brucellosis.

46 IDM \Rightarrow hyperglycemia X

No. _____

- 47 ~~etc~~ Cystic Fibrosis wrong (bronchiolitis)
- 48 wrong about Asthma (Till Puberty).
- 50 conjunctivitis secretory (Adeno).
- 51 banking cough: wrong (mandatory lateral X-ray)
- 52 wrong about immunodeficiency.
- 53 " = gastric larvae (Poor gag + hydrocarbon)
- 54 subgaleal hematoma: doesn't cross sutures
- 55 case: Hepatitis A \Rightarrow no vaccine.
- 56 Salmonella
- 57 HSP \Rightarrow wrong \Rightarrow Joint deforming
- 58 criteria of RA.
- 59 breast feeding jaundice.
- 60 Facial Presentation of chromosome —
- 61 hypothyroidism \Rightarrow TSH, T4.
- 62 Drug \uparrow jaundice \Rightarrow sulfa.
- 63 wrong about late sepsis \Rightarrow GBS.
- 64 Juvenile RA \Rightarrow wrong (most have \oplus RF)
- 65 early Fontanel closure \Rightarrow craniosynostosis
- 66 Peptic ulcer H-Pylori \Rightarrow differentiate by AP
- 67 congenital Pernicious anemia \Rightarrow wrong achlorhydria
- 68

2015 – Unknown batch

1-Most sensitive blood test for celiac disease :

- * **Anti-tissue transglutaminase antibody (anti-tTG)**

- HLA-DR4

- some other antigens

2-one of the following is a manifestation of 1ry TB in children:

a- hilar lymphadenopathy *

b- upper lobe cavitation

c- pleural effusion

3-first physical sign of puberty in male

is testicular enlargement

4- baby at birth (head circumference is 35 / weight is 3 kg / length is 50 cm) : what is the right?

- at 5 month his weight become 6 kg / at 1 year his height 75 cm / the answer was all of the above are true

5- baby can kiss his parent all these action he can do except:

- Hold the spoon

- symbolic play

- know 10 words

- enjoy story (pictures)**

6-all of the following pervasive developmental disorders except:

Answer is oppositional defiant disorder

7- in ADHD which of the following not match

- Strattera is non-stimulant

- treat by combination of therapy

- diagnosed below age 3 ** the answer

8- according to national jordanian vaccination program all are true except:

Answer : at 9 months only measles

9- in neonatal meningitis all are true except

Answer : Most causes are (E.coli / N. Meningitis / H.influnza)

10- in febrile seizure all of the following are true except:

Answer : lumbar puncture done for all patients

11- which false about CP-

Answer : chorioathetoid type is least type to occur

12-about Duchene all are true except :

- gower sign is pathognomic
- incidence 1:3000

13- female.. obese .. headache .. vomiting and normal CT

Diagnosis is pseudotumor cerebri

14-all of the following can cause HF in 1st 48 hours except

Answer : VSD

15- treatment of bronchiolitis is

Hydration and oxygen

16-in pneumonia which organism causes pneumatocele ?..

staph

17-which organism causes lower lobar pneumonia in 4-15 years old child??

-chlamydia

-strep

18-patient come with barking cough and stridor what the cause :

parainfluenza

19- what is your management in previous

Nebulized epinephrine

20- treatment of acute asthma

Inhalation B agonist and systemic steroid

21- in cystic fibrosis .. what's true:-

- Sweat chloride < 90

- Clubbing

- fat in stool

- all of the above

22- early changes on x-ray in TB

Hilar lymphadenopathy

23- in von willebrand disease .. all are true except

Answer : prolongation of PT in all types

24- all true in hemophilia except: -

Answer : patient presented with petechiae and epistaxis

25-patient with edema and hypoalbuminemia which of the following support your diagnosis that he has nephrotic syndrome :

Answer : proteinuria 40 < mg/m²/hr

26- all are true in nephrotic except

Renal biopsy always should done

27-in nephritic all true except

Heavy proteinuria not a sign of bad prognosis

28- in anemia which of the following mismatch

hypothyroid disease megaloblastic anemia

29- in treatment of AKI all true except

In Hypovolemic patient give only the insensible losses

30-all occur in premature except :

Answer : polycythemia

31- in sepsis all true except:

Answer : late sepsis caused by GBS

32- all about TTN are true except:

Answer : TTN cause renal damage

33- all are conjugated hyperbilirubinemia except :-

Answer : Gilberts

34-all about DM are true except:-

Answer : patient obese in type one

35-all are major manifestations in rheumatic fever except:

Answer : Erythema multiforme

36-all are causes of upper GI bleeding except

: Meckels

37-Which of the following not match:

Answer : hepatitis B is live attenuated

38-One of the following is wrong about neonatal feeding or sth ?

You must give skimmed milk for preterm babies

39-About ORS one is wrong

Glucose is for calories (it is for ion transporters)

40-One of the following does not increase the risk for celiac disease?

I think "Burton's disease"

41-In management of infectious diarrhoea one is false

Give loperamide

42-One is false about GERD

Endoscopy is the gold standard in uncomplicated cases

43- in rickets all are true except ?

: answer : VDD2 is 2ry to failure in the conversion of calcidiol into calcitriol

44-One of the following is wrong about jetirrus

(It is associated with intracranial hemmorrhage)

46-Not a characteristic of physiological jaundice

Fist 24 hours of life jaundice

47-One of the following is wrong about late neonatal sepsis ?

Most common organism is GBS

48-One of the following is not a cause of polyhydramnios

Renal malformation

49-One of the following is not protective for RDS

Maternal diabetes

50-Not a known complication of infant of diabetic mother

Early onset hyperglycemia

51-Finding associated with bad prognosis in neonatal seizures ?

early hypocalcemia

52-Wrong matching?

Edward syndrome have normal life expectancy.

53-All true except?

Hepatitis C can be prevented by vaccine.

54- in ALL which of the following has a poor prognosis :

Philadelphia chromosome

55-Regarding the management of RF, one is wrong?

a-Steroids are used in heart failure.

b-Valproate in treatment of Chorea.

56-one of the following is wrong about hyperthyroid tx :

mithemazole can be given in pregnancy and lactation

57-14 yr-old female presented with growth retardation and delayed puberty, on ex she had a small goiter , dx?

hashimoto disease

58-most common cause of congenital hypothyroid is

ectopic thyroid tissue

59/---yr-old boy exclusively breast fed is expected to have?

rickets

60-one of the following is true about HSP :

a) a disease of medium sized arteries

b) the most common cause of thrombocytopenic purpura

---can't remember the other choices :s

c-intussusception occurs regardless age

61-which of the following doesn't cause necrotizing enterocolitis ?

TPN

62-/which of the following is not a sign of tumor lysis syndrome ?

a) high LDH

b) hyperkalemia

c) hyperphosphatemia

d) hypocalcemia

e) high uric acid in blood

63-/bone marrow smear showing 4% blast ... normal peripheral blood smear + normal physical examination what's the likely dx ?

this is a normal blood smear

64-/ regarding exanthams which one is wrong ?

a) measles coryza , conjunctivitis, cough

b) rubella vit A improves prognosis

c) varicella acute cerebritis

d) fifth disease triphasic rash

e) scarlatina more on flexor surfaces

65-Which of the following is not matching?

a-Pancreatic damage- Swachman

b-Hyper IgE syndrome - skin abscess and eczema

c-Agammaglobulinemia - no lymph nodes.

66- a patient is complaining of weight loss , night sweats ,..... in tuberculin test (20mm) what's ur management ?

a) sputum culture and start broad spectrum

b) sputum culture and start isoniazid , rifampin ,pyrazinamide

c) wait for culture results

68-All the following decrease risk of RDS except?

Maternal Diabetes

-69Regarding juvenile rheumatoid arthritis, one is correct?

a-ANA is associated with a risk of uveitis ...

b-Positive RF has a good prognosis

70-A child presented with abdominal mass and hypertension, most likely dx?

a-Nephroblastoma

b-Neuroblastoma

71-pt with asthma most appropriate investigation is?

-pulse oximetry

72-regarding the dx of epilepsy all are true except?

-EEG is the main dx

73- all of the following are complication of CF EXCEPT?

-P.E

74- about G6PD all are true except ?

A) X- linked recessive

B) during hemolysis level of G6PD in blood is high

75-maintenance for 20 kg?

1500/ 0.5

76- the best way to manage enuresis is ?

78- one is false:

Confirming t cell def. With response to vaccine

79- Wrong matching antidote

Vit A -----ivermectin

80-wrong match?

valporic-----wt loss

81-all of the following about VWD is true except?

pt is prolonged

82-all are change in iron def. anemia except?

HSM

83-TTN cause all of the following except?

Pulmonary damage

84-all are true except?

-treatment for girl with sterile bacteruria is 3rd generation cephalosporin.

85-one of the following is not a cause of megaloblastic anemia?

Hypothyroidism

86-most common cause of congenital hypothyroidism ?

-ectopic

87-in PSGN all are true except?

-persistant decrease in C3

88-dx for celiac dis?

-anti tissue gluti...

89-about celiac all are true except?

-we stop giving pt gluten for 5 years.the he comes back to gluten gradually>>

90-not a risk factor for GBS in sepsis?

-GA>37

91-pt with CKD first sign is ?

-anemia

92-one of the following is not nephrotic?

HSP

93-pt 4month afebrile.cough wheze.abn x-ray the most appropriate organism?

-RSV

-MYCOPLASMA

94-IgA nephropathy all are true except?

-heavy proteinuria is not prognostic

95-we exclude CP in all except?

-increase DTR

96-WRONG Match? about migrane

Anaroxia-----prodrome

97-3kgWT .50cmHT

_HC 42 after one year

-HT 75cm after ne year

-6kg after 5moth

-9kg after one year

-all of the obove

98-about jitterineintss al are true except?

-intracranial hemrrg

99-wrong about vaccines?

MMR is given at 9 month

2015 - Unknown batch

- 1- A 4 month old male presented with cough ,tachypnea, chest retraction ,cyanosis and bilateral wheezes tem was 38.6 most appropriate treatment is
- 1- o2 and IV fluid
 - 2-IV fluid and salbutamol**
 - 3- hydrocortisone , antibiotic ,salbutamol nebulizer and IV fluid
 - 4- salbutamol and antibiotic
 - 5- antibiotic and oxygen
- 3- A 10 y old girl with recurrent chest infection and clubbing her height and weight below 5 percentile chest imging revealed bronchiectasis all of the following expected finding except :-
- 1-sinusitis
 - 2- sweat chlorid test more 60
 - 3-vit D def
 - 4-decrease of stool contant**
 - 5-nasal polyps
- 4- which food was shoulf avoid giving an infant before 12 months :-
- 1- Yoghurt اللبن
 - 2-potato البطاطا
 - 3-Honey العسل**
 - 4-Cheese الجبن
 - 5 Egg Yolks صفار البيض
- 5-all are of hemolytic anemia except :-
- 1-pyruvate kinase def
 - 2-blackfan diamond anemia**
 - 3-vit.E def
 - 4-sickle cell anemia
 - 5-spherocytosis
- 8-multifactorial genetic disorder include all the following except:-
- 1-pyloric stenosis
 - 2-bronchial asthma
 - 3-cleft lip and palate
 - 4-sickle cehh anemia**
 - 5-meningiomyelocele
- 9-all the following regarding intussusception are true except:-
- 1-causes billous vomiting
 - 2-ttt is by surgery as soon as it diagnosis**
 - 3-it happens before age 2 y
 - 4-associated with currant jelly stool
 - 5-causes colicky abdominal pain

12- A 12 y old girl has epistaxis for last 3 day, clinical examination revealed multiple ecchymosis and pinpoint red rash over the trunk and limb
no other finding platlet count is 8000

what the most likely diagnosis :-

1-leukemia in early stage

2-infection mononucleosis

3-Henoch schonlein purpura

4-measles

5-idopathic (immune)thrompocytopenic purpura

13-growth hormone is proved to be effective of the following disease

هرمون النمو تثبتت فعاليته في واحد مما يلي

1-achondroplasia

2-thalassemia

3-down syndrome

4-liver failure

5-turner syndrome

14- A 3 y old child has history of 6 visit in last 2 week to ER complining of bilateral wheezing which improve with salbutamil enbulaizer the most appropriate add on this medication

طفل عمره 3 سنوات احضر الى الطوراء 6 مرات خلال الاسبوعين الماضيين يعاني من نوبات الويزيز الصدري يتحسن على بخاخ السالبيتامول ما العلاج الذي يجب اضافته الى العلاج السابق

1-anti leukotriene

2-theophylline

3-long acting beta agonist

4-antibiotic

5-corticosteroid

15-regarding congintal primary hypothyroidism only one true

1-ttt with T3

2-half of cases have no symptom

3-most of cases are familial

4-the most casuses is dysgenesis---اشهر الاسباب هي سوء التصنيع---

5-TSH and T4 are low

16-preauricular tags may indicate anomalies one of the following system

1-CVS

2-CNS

3-respiratory

4-genitourinary system

5-gastroenterology

17-arterial blood gases interpreting normal values are true except:-

1-HCO₃ 25-35

2-Pao₂ 92-99

3-PH 7:35-7:45

4-base excess +2.5 to 2.5

5-PCO₂ 35-45

17-A 5 y old child was admitted with picture of bacterial meningitis the following antibiotic should be included in the early empirical manegment

1-amikacin

2-cephalexin

3-cefuroxime

4-ceftriaxone

5-ceftazidime

ANSWER IS 5 OR 4 NOT SURE

18-one of the following matches regarding pediatric disease is true

1-varicella zoster and wart

2-HSV-2 and herpangina

3-HHV5 (human herpes virus 5) and infantum roseola

4-HSV-1 and 5th disease

5-staph aureus and rheumatoid

19-ttt hyperkalemia all true except:-

1-na bicarbonate infusion

2-na polystyrene sulfata

3-magnesium sulphate

4-nebulized albuterol

5-insulin and glucose

ANSWER IS 2 OR 3 NOT SURE

21- in x-linked dominant inheritance :-

1-only female are affected

2-transmitted from father only

3-male and female are equally affected

4-only male are affected

5-transmitted from mother omly

ANSWER IS 3

22-turner syndrome is more associated with all except :-

1-increase maternal age

2-hypertension

3-coarctation of aorta

4-hypothyroidism

5-horseshoe kidney

23-all are disease of lower motor neuron except :-

1-poliomyelitis

2-spinal cord tumor

3-duchenne muscular dystrophy

4-myasthenia gravis

5-gullian barre syndeome

34- A 2y old female child presented with pallor and poor apperite her PCV was 27% all of the following may support the diagnosis of iron def anemia except:-

- 1-increase level of transferrin saturation
- 2-history of pica
- 3-high level of red blood cell distribution width
- 4-RBC hypochromia
- 5-increase total iron binding capacity

35- A healthy new bone was born at term with head circumference 35 at one years become

- 1-47 cm
- 2-57 cm
- 3-39 cm
- 4-50 cm
- 5-44 cm

36-family size rate in Jordan معدل حجم الاسرة في الاردن

- 1- 8-9 member
- 2- 11-12 member
- 3- 5-6 member
- 4- 10-11 member
- 5- 7-8 member

40- in hemorrhagic disease of the newborn there is an impaired production of coagulation following factor except :-

- 1- VII
- 2- X
- 3- II
- 4- XI
- 5- V

43- one of the following is correct regarding criteria to diagnosis kawasaki disesase

- 1-cervical and axillary lymph adenopathy usually bilateral
- 2-ulcer of palm and sole
- 3-fever
- 4-muculo_papular erythromatous rash with vesicle mostly over the extrimitis
- 5-bilateral purulent conjunctivitis

46-regarding idopathic nephrotic syndrome on children all correct except :-

1-renal biopsy is mandatory for diagnosis all case الخزعة الكلوية ضرورية للتشخيص في كل الحالات

2-influenza vaccine should be given on yearly basis مطعوم الانفلونزا يجب ان يعطى بشكل سنوي

3-minimal change disease is most common histologiacl lesion النوع الاكثر هو قليل التغيرات النسيجية

4-the majority of children with steroid responsive have repeated relapses

غالبية الحالات التي تستجيب للستيرويدات يحصل فيها تكرر للاصابة

5-peritonitis is comp;ication of nephrotic syndrome التهاب البريتون هو من المضاعفات

47- one of the following is the commonest causes of gross hematuria in children :-

- 1- post-infection glomerulonephritis
- 2- urinary stone
- 3- UTI
- 4- wilms tumer
- 5- IgA nephropathy

51- all of the following can causes metabolic acidosis except :-

- 1-septic shock
- 2-diuretic
- 3-diarrhea
- 4-sallylate poisoning
- 5-ethanol poisoning

56-all the following are risk factor for urinary trc infection in children except :-

- 1-constipation
- 2-poor urinary stream
- 3-neuropathic bladder
- 4-single kidney
- 5-vesico-ureteric reflux (VUR)

57- all are true regarding suchenne muscular dystrophy except :-

- 1- positive Gower sign
- 2-elevate CPK
- 3-autosomal ressive
- 4-heart failure
- 5-leg muscle hypertrophy

58- to diagnosis DM in chi having polyuria and polydipsia ,random blood glucose is more than :-

- 1- 200 mg/dl
- 2- 100 mg/dl
- 3- 125 mg/dl
- 4- 109 mg/dl
- 5- 140 mg/dl

59- in prenatal diagnoses od disease chorionic cilous sampling is best at gestetional age of

- 1- 12-14 week
- 2- 18-20 week
- 3- 8-10 week
- 4- 16-18 week
- 5- 10-12 week

62- A child who can rolls over ,set briefly with rounded back ,prefer mother , his expected age is :-

الطفل الذي يقبل من جه لآخرى , يجلس لوحدة مع انحناء الظهر و يفضل امه يتوقع ان يكون عمره حوالي

- 1- 5 months
- 2- 7 months
- 3- 9 months**
- 4- 11 months

63- A 3 y old boy presented with anemia ,fever ,purpura, loss of appetite m bone pain and hepatosplenomegaly ,the most important test to be done in this case is

- 1-total body CT scan
- 2-lab test for brucella ,widal and malaris
- 3-CBC and blood film
- 4-bone marrow aspiration**
- 5- chest x-ray

64- cataract is noticed in all except :-

- 1-hyperoxygenation in prematures
- 2-prolonged use of steroid
- 3-down syndrome
- 4-neonatal hyperbilirubinemia**
- 5-congenital rubella syndrome

69- fanconi anemia is associated with all except :-

- 1- thrombocytopenia
- 2-metabolic alkalosis**
- 3-increase MCV
- 4-short stature
- 5-decrease retic count

73- all of the following finding are seen in 21 hydroxylase deficiency except :-

- 1-increase 17-hydroxyprogesterone
- 2-low plasma renin activity**
- 3-elevated ACTH
- 4-low serum cortisol
- 5-low sodium and high potassium

2013 – 5th year

1. ADHD: all the except:
 - a. imbalance btwn serotonin & dopamin
 - b. 3 sub type
 - c. Retaline is the best stimulant used
 - d. < 7 yr
 - e. 70 80 % of symptoms persistent to adulthood
2. PDD , all are true, except:
 - a. ADHD
3. Wrong about West syndrome:
 - a. Carry good prognosis.

Wrong about west syndrome

- A. Infantile spasm
- B. Start before one year
- C. Good response to treatment*
- D. Hypsarrhythmia

4. Developmental age of a child who can do interactive play:
 - a. 36 month
5. febrile seizure , all true except:
 - a. +ve FH: risk of epilepsy
 - b. +ve FH: risk of recurrence
 - c. all pt do LP
 - d. most cc cause of death in rosela infantum
 - e. most cause previous URTI.

1. Wrong about febrile seizure
 - A. LP indicated for all

6. Duchan muscle, all correct except:
 - a. cardiac involvement : rare (cardiomyopathy is a constant feature)
 - b. cognitive impairment: universal
 - c. death 18 yr
 - d. ambulation 12

7. match: AED S.E
- phenotylin: hirstism
 - valproic acid: hair loss
 - carbamazipin: hypernaternia**
 - vigobritin: visval defect
 - phenobarb: hyperactivity

Answer: C (carbamazepine → Hyponatremia... Something related to ADHlike action...)

8. IG all has sepsific IG except:
- Rabies
 - measle *******
 - hep B
 - varicella zoster
 - Tetanus

Answer: ???

9. neonatal meningitis:
- most cc cause: E.coli , N.meningitis , lesteria**
 - presentation as N.sepsis
 - post natal meningitis: wrong

Answer: A (Most common is GBS>E.coli>Listeria)

10. BABYB:
decrease permeability when inflamed
11. Exanthems: convulsion: ur DX:
a. Rosella infantum
12. mismatch: pastia line:
varicella (pastia lines comes with scarlet fever)
13. mismatch:
a. Rubella is treated by vitamin A

TREATMENT

- No specific therapy for measles .
- Adequate hydration and antipyretics.
- Avoid strong light ;photophobia.
- IV ribavirin in severe cases.
- High dose vit A supplementation for 6M to 2 years old need hospitilization ,HIV-infected infants,and infant in endemic areas in developing countries.

12

14. vaccination: all true except

- a. OPV: killed
- b. tetanus: toxoid
- c. pure polysaccharide : 23
- d. conjugated: 7
- e. BCG :live attenuated

Answer: A (OPV is live-attenuated vaccine)

15. Hypothyroidism all true except:

- a. in neonate need small dose than adult → **Correct: Higher dose**

16. CP: all true except:

- a. progressive disorder (it's constant)
- b. disorder of movement \ posture

17. female, obese NL, CSF , DX

- a. Pseudotumor cerebri

18. headache: except (match)

- a. Migraine : no FH

1. Migraine, what's wrong

A. Family history isn't a criteria for diagnosis

19. croup: best treatment:

- a. nebulized epinephrine , systemic GCS

20. Helix in asthma , the least drug in emergency is:

- a. oxygen 100%
- b. Magnesium sulfate
- c. salbutamol
- d. inhalation steroid

Answer: D (emergency treatment: Short acting β -agonists + Inhaled anticholinergics + Short course systemic corticosteroids prednisolone or methylprednisolone)

21. of hyperkalemia: all except

- a. atenolol
- b. NaHCO_3 sodium bicarbonate.....
- c. Glucose insulin

22. VWD:

- a. carry of factor x
- b. 12% of most
- c. type 1 most common
- d. presentation: bleeding mucous membranes

Answer: A (carry factor XIII... Therefore, in severe deficiency, prolong PTT)

23. CF , 2 yr old baby , presentation all except:

- a. salt depletion productive
- b. chronic cough
- c. staph aureus in sputum
- d. finger clubbing

Answer: (Pseudomonas aeruginosa mucoid type is characteristic)??? But staph is present

24. wide pulse , Rt axis deviation:

- a. ASD

25. all are cyanotic dis except:

- a. 4 T
- b. AV canal

26. all are true about TOF except

- a. Lt v obstruction
- b. polycythemia
- c. clubbing
- d. overriding of aorta

Answer: A (Right ventricular obstruction)

27. all common about decrease PBF:

- a. TOF TGA plm atresia
- b. critical plm sten W 1 septum

Answer: TGA

28. about Asthma all true except:

- a. XRay hyperinflation
- b. baby < 5 yr W\ recurrent wheeze develop asthma adulthood
- c. bronchial hypersensitivity

Answer: B (is most likely not to develop asthma?)

29. all make HF in 1st wk of life except:

- a. VSD

30. CF all true except:

- a. staph aureus in sputum
- b. restrictive plm in early stage

Answer: Obstructive pattern in early stage, restrictive in later stage.

31. Primary TB findings on x-ray:

- a. hilar adenopathy

32. about transmission of TB,all true except:

- a. Children are highly infective
- b. poor air circulation
- c. forced cough
- d. +ve fast bacilli

Answer: A(no child to child spread) only adult to child

33. Dx of exocrine pancreatic insufficiency:

- a. CF pancreatitis

Answer: ???

34. baby jaundice , vomiting , irritable , exclusive breast milk , reducing substance tve , lethargic , most Dx:

- a. **Galactosemia**
- b. tyrosinemia
- c. fructose d. G6PD

35. A cause of macrocytic anemia:

- a. **Chronic liver dis**
- b. renal dis
- c. IDA
- d. thalassemia
- e. hemolytic

36. prerenal cause except:

- a. **>2% Fna**
- b. >1.020 Sp. Gravity
- c. nat < 20
- d. US NL
- e. Vomiting is cause

37. All are poor prognostic factors for HIE, except:

- a. **Late onset hypocalcemia (this is a good prognosis with 100 percent attaining good neuro development)**

38. according complication of HIE:

- a. DIC
- b. HF
- c. increase persistent systolic

Answer: ???

39. according to DIC , not true:

- a. **decrease FDP**
- b. thrombocytopenic
- c. increase PTT
- d. schizotyt
- e. increase INR

40. Ricket all true except:

- a. Type 1 is problem in hydroxylation
- b. Type 2 is problem in hydroxylation
- c. Renal cause hyperphostanemia

Answer: type 2 problem in receptors

41. According to DX ricket , not true:
 a. **decrease alkaline phasp**
 b. hypophosph c. 25 (OH) low
42. What's wrong about DKA management
 A. Give 40 mEq of KCL per liter
 B. **Use hypertonic saline 3% to correct hyponatremia***
43. Hepatosplenomegaly, pharyngitis, cervical lympho. A rapid diagnostic test?
 a. **monospot test** b. phyrngeal aspiration c. throat culture d. Ab of EBV
- Ansewr: A (rapid antigen test)**

44. IDM , all true except:
 a. **always large of GA**
45. Risk factor for GBS except:
 a. **ROM 12 hr**
 b. GA < 37
 c. m. age <20
 d. choriomonitis
 e. bactriuria GBS

Answer: A (>18 hr)

46. In IUGR all except:
 a. **Anemia**
47. ALL carry Gd px. Except:
 a. hyperpolidy
 b. **hypoploidy**
 c. (12:21) translocation
 d. trisomy 10 trisomy 7
48. baby cynosis when he feeding improvement when cry, best test to confirm DX:
 a. **Nose catheter**
49. scaphoid abdoren:
 a. **Diaph hernia**
50. All about leukemia except:
 a. **<12 m carry Gd px**
51. baby 1yr 95% percentile , spitting food from 1m yr old . Dx:
 a. **GERD**
 b. pyloric stenosis
 c. Partial dudonl atresia
 d. Hypothyroid

Answer: Obese child → GERD

52. HF, HSM &S3 all true except:
 a. **Digiox is strong , inotrope**

- b. inotrope give in unwell case
- c. give diuretics

Answer: A (Digoxin is a weak inotrope)

53. Boy, 9 months, presents with symptoms of CHF, what is correct:

- A. Congenital defects are common cause*
- B. Digoxin is a strong inotrope

54. Antidote, mismatch

- a. actimeorphin: N acetylcystine
- b. Iron: Defro...
- c. benzodis.p: fluonoride (flumazenil)
- d. digoxin atropine**

Answer: D (digoxin antidote is antibodies)

55. according pneumonia \ mismatch

- a. neonate: group A strep**
- b. school age: M.pneumonia
- c. viral: toddler , infant (→ 90%)
- d. imurocamp: pneumocyst carynii

Answer: A (Group B SC)

56. 55 baby , convulsion , bloody diarrhea most organizme:

shigella

57. cyclic vomiting , ttt w\ antiemetic but not resolve , then came w\ bilious vomiting , Dx:

- a. intussusception
- b. superior mesenteric
- c. malrotation**
- d. stress ulcer
- e. meconium dis

58. Wt loss , Anemia , girl adolescent,, w\ abdominal pain:

- a. anorexia nervosa
- b. IBS
- c. Inflammatory bowel disease**
- d. pelvic inflammatory dis

59. baby common w\ chronic diarrhea maroon stool , best investigation:

- a. meckel scan**
- b. colonoscopy
- c. US
- d. air enema

60. mother bring her baby to clinic 3 month: the most common chief complaint:

- a. 14 mL reg 3 times
- b. bowel habit one over day

- c. +ve heme occult blood
- d. 3 day bowel habit

Answer: ???

61. most cc cause of CKI is:

- a. obstructive , reflux nephropathy
- b. AR PKD
- c. (HUS , PSGN)

62. all indication to maturity except:

- a. crease of plame
- b. Ear
- c. liguno hair
- d. skin texture & color
- e. Nipple size

Answer: A (Correct → Planatar crease)

63. RSD all increase it except:

- a. HTN
- b. DM
- c. asphyxia

Answer: A (HTN is protective)

64. late sepsis all true except:

- a. in contrast to early, gram +ve the more cc .
- b. GBS , common isolation frm preterm
- c. sympt gradual & not rapid
- d. E. coli,, kaelbesellia considration

Answer: ???

2. Wrong about late-onset sepsis

- A. Fungal frequently occurs in small preterm
- B. GBS is most common isolates*
- C. Sepsis is gradual

65. about complication of nephritic all true except:

- a. infection is major complicationl
- b. peritonitis , kelbesilla is most cc

Answer: B (Strep pneumonia is most common according to lecture)

66. varcillia vauine

- a. pnevmococcul
- b. if relapse not given vaccine IG
- c. thrombosis but not given prophyloxix anticoagulant

Answer: ???

67. about AD , all true except:

- a. **more cc in boy than female**
- b. if parent not genotype , not inherited to baby
- c. 50 % inherited

68. baby male newborn all true except:

- a. **HC 42 cm**
- b. testes descing in scrotom
- c. hight 50 cm

Answer: A (35 cm)

69. about physiological anemic:

- a. response to EPO NL
- b. 9Hb acceptable in term
- c. in 2 m in preterm
- d. **increase in HbF in electrophoresis**
- e. No therapy

Answer: D (no hematological problem)

70. according to vit B.12 except (choose wrong)

- a. if mother veget: 46 m????
- b. NL store 35 yr ????
- c. **congintal perniousce anemia make Ab**
- d. congintul NL acid stomach secretion

Answer; C (no antibody in congenital)

71. about down , all true except:

- a. narrow ear canal
- b. chronic ear discharge
- c. speech delay
- d. **all of above**

Children with Down syndrome have an increased incidence of upper respiratory tract infections, which predisposes chronic ear infections. The facial anatomy of Down syndrome also predisposes chronic ear disease.

<http://www.ndss.org/Resources/Health-Care/Associated-Conditions/Ear-Nose-Throat-Issues-Down-Syndrome/>

72. 11 yr tall boy with NL mentation , DX:

- a. kelenfilter
- b. **marfan**

73. about CAH: except:

- a. most cc 21 def
- b. usually virilized female W\ ambiguous gen
- c. increase androgen in utero
- d. present hypernat , hypokalemia

Answer: D (No aldosterone → Hyponatremia, hyperkalemia)

74. Correct about CAH

A. Give glucocorticoids

75. common between polyglandular 1,2:

- a. Addison's disease
- b. DM
- c. hypoparathyroid
- d. cutaneous candidiasis

- Type 2: HADM1 (hypothyroid frequently, Addison, and DM1)

- Type 1 (Hypothyroid+Addison + hypoparathyroid + Mucocutaneous candidiasis)

76. about DM, wrong:

- a. type 1 resistant to insulin
- b. type 1 destruction of B cell
- c. hypoglycemia 1st complication

77. about atopic dermatitis:

- a. immune IgE
- b. immediate hypersensitive RX
- c. pruritic
- d. around puberty

3. A principal feature of atopic dermatitis

- A. Pruritus
- B. Increase serum IgE*
- C. Immediate reaction to skin testing
- D. Present in adolescence

78. which increase allergy world wide:

- a. increase antibiotic used in 2 yr old
- b. increase day care

Answer: ??? Hygiene hypothesis?

79. all true about IgA neph , true except:

- a. low C3, C4
- b. IGA deposition in mesangium
- c. 30%: ESRD

Answer: A (normal C3 & C4)

80. UTI: all true except:

- a. E.coli most cc
- b. F>M
- c. treat sterile bacteremia w\ 3G cephalosporins

d. rearrant febril Do DMSA

Answer: C (sterile bacteruria only treated in pregnancy bcs of its complications)

81. about U\S of renal: except

- a. scar
- b. hydronephrosis
- c. 1st investigation
- d. size nd shape of kidney

Answer: A (DMSA is for scar)

82. vaccination: wrong

- a. measles give in 3 dose at 18 m
- b. MMR only at 12 m
- c. 91 day DTP hib hepB OPV , IPV

83. about hematuria , all true except:

- a. Def. As RBC >5
- b. lower urinay tract infection terminal
- c. Hematuria & protinuria
- d. tobelular: tubular cast , leckocyte
- e. fales +ve in menstrual blood & alkain urine

Answer: B (initial)

84. maintenance fluid in child 20 kg:

1500

85. best DX for celiac dis:

- a. endomysil IGA
- b. antiglutine IGA
- c. antigldin IGA

Answer: A?

86. apgar scar , all true except:

- a. it is predictive neurological evaluation
- b. in cp NL
- c. 5,10,15, evaluation in resasitation
- d. apagar in 1st min can determin need of resuscitation.

Answer: C (1, 5, 10)

87. swelling ankle . knee , wrist, murmur , previous 1 month infection w\ strep

A most likely Dx:

- a. RF
- b. rheumatoid arthritis

88. baby 10 yr abdominal pain, flatus, this symptoms after drink milk , or test:

- a. plt monometry
- b. stool PH
- c. lactose

Answer: C (lactose intolerance)

89. about Hep.A , one is true:
- a. I.P 5080
 - b. transimision parentally
 - c. after 6 m , increase bilirubin & LFT.
 - d. **Primary infection comes with fever, malaise,***

90. about CKD (mineral bone dis), all true except:
- a. low phosphate
 - b. low Ca
 - c. high PTH
 - d. decrease GI absorption of Ca and phosphorus

Answer: Please put the eplanation!!!

91. mismatch btwn organism about phyrigitis dis:
- a. scarlet fever: Group A
 - b. Adeno: conjvctiuitis
 - c. HSV: gingivostomatitis
 - d. EBV: HSM
 - e. **Hapop:.... (had ho el answer)????**

Answer: E (the rest are correct)

92. all cause arthritis or arthiragia except:
- a. RSV
 - b. adenuvines
 - c. parvouirus
 - d. HPV B 19
 - e. HSP

Answer: A?

93. all are (B cell) imneno deficiency: except:
- a. **SCID**
 - b. CVID
 - c. hayper IGM
 - d. x lined agamma

SCID: Severe Combined Immunodeficiency

- Profound lack of T Cells function and B Cells dysfunction resulting from the gene defect itself or secondary to lack of T Cell function.
- There are various types of SCID described, however the most common form is X-linked SCID
- Absent T cells or NK cells in the peripheral blood, but have normal number of B Cells.
- Ig levels are low or undetectable.
- Lymph nodes and tonsils are absent.

94. all are true about PSGN except:

- a. complement low persist to 6 m
- b. hematuria low persist 1 yr
- c. variable presentation from microscopic hematuria to ARF

Answer: A?

95. all true about birth injury except:

- a. **caput succedentum limit to suture**
- b. phrenic N palsy & diaphragm, weakness cause of Erb's palsy.
- c. Erb's palsy waiter hand
- d. clavicular most liable to Fx
- e. cervical Fx present in breech present

96. ITP.. all true except:

- a. **HSM**

97. Correct about HSP →

- a. **Has excellent prognosis**

98. Wrong about asthma

- A. Hypoxia in early stages
- B. Clubbing in severe asthma*

99. Not a Risk factor for jaundice

- a. **High concentration of B-ligandin**

100. Wrong about HIE poor prognosis

- A. **No respiratory effort in the first minute**

101. What's wrong about nephritic

- A. **MCD < 20%**

Dr. Amjad Tarawneh:

1. ALL the following physical signs help in identification of prematurity, except :
 - A. Glistening skin
 - B. Breast tissue
 - C. Genitalia
 - D. Palmer creases XXXX**
 - E. Ear cartilage /recoil
2. ALL the following are complications of IUGR, EXCEPT:
 - A. Perinatal asphyxia
 - B. Hypoglycemia
 - C. Hypothermia
 - D. Infection
 - E. Anaemia XXXX**
3. ALL the following account for jaundice in premature, EXCEPT:
 - A. Shortened RBC's life span
 - B. Increased mass of RBCs
 - C. Increased B-ligandin XXXX**
 - D. Reduced UDP-GT activity.
4. ALL the following are contributing factors for developing RDS, EXCEPT:
 - A. Neonates younger than 37 weeks
 - B. Weight less than 2500g
 - C. Pregnancy-induced or chronic maternal hypertension XXXX**
 - D. Cesarean delivery without preceding labour
 - E. Fetal asphyxia
5. Regarding LATE neonatal sepsis, ALL the following statements are TRUE, EXCEPT:
 - A. In contrast to early onset infections, *gram-positive organisms* predominate most of the cases.
 - B. GBS are most common isolates, especially among *preterm infants*. XXXX**
 - C. Gram-negative bacteria e.g. *E. coli* and *Klebsiella pneumoniae* are also significant.
 - D. Fungal infections with *Candida species* occur frequently in *small preterm infants*.
 - E. Among healthy term infants this is much less than early onset sepsis
6. The following are sequels of HIE, EXCEPT:
 - A. Increased blood pressure. XXXX**
 - B. Cardiomyopathy and heart failure.
 - C. NEC. D. Pulmonary haemorrhage. E. Cerebral oedema.

A case history ((the case is about a neonate presented immediately after birth w/ respiratory distress w/out spontaneous respiration, when you examine him you find the followings: SCAPHOID abdomen, NO respiratory sound, NO heart sound in the Rt. side but you find it on the LEFT side. Then you intubate the baby but still there's NO response)).The MOST likely diagnosis is:

- D. Meconium aspiration.
 - E. Diaphragmatic hernia. XXXX**
 - F. BPD.
 - G. Pneumothorax.
7. Newborn develop cyanosis when feeding. When crying he seems better. A quick test that will allow you to reach a diagnosis?
- A. CXR.
 - B. Laryngoscope.
 - C. Passing a catheter through his nose. XXXX**
 - D. Echocardiography
8. Regarding APGAR score, ALL the following statements are TRUE, EXCEPT:
- A. A low APGAR score at 1-min may need resuscitation.
 - B. A low APGAR score may indicate complicated delivery.
 - E. Usually patients w/ CP (Cerebral Palsy) have NORMAL APGAR score. XXXX**
10. What's the cause of neonatal seizure that associates w/ the BEST outcome:
- A. HIE.
 - B. Hypoglycaemia.
 - C. LATE-onset hypocalcaemia. XXXX**
 - D. Early onset hypocalcemia
 - E. Bacterial meningitis
11. Regarding IDM (Infant of Diabetic Mother), ALL the following statements are TRUE, EXCEPT:
- A. Hypoglycaemia occurs in 25 to 50% of IDMs within the first 24 hours after birth.
 - B. ALL IDM are macrosomic. XXXX**
 - C. Hypocalcaemia occurs in 10 to 20% of IDMs during the neonatal period.
 - D. The IDM is at risk for respiratory distress syndrome DRS.
 - E. Increased risk of obesity and of diabetes mellitus in later life
12. ALL the following associated w/ POOR prognosis in a patient w/ HIE, EXCEPT:
- A. No spontaneous respiratory effort within 1 minute. XXXX**
 - B. Seizures is an ominous sign.
 - C. Abnormal clinical neurological findings >7-10 DOL.
 - D. Persistent feeding difficulties.

- E. Poor head growth during the postnatal period.
13. WRONG statement about labor complications:
- A. Erb's palsy → waiter hand
 - B. Calcicle most liable to fracture.
 - C. Caput succedaneum cannot cross the suture lines. XXXX.**
 - D. Phrenic nerve palsy causes diaphragmatic weakness.
 - E. Cervical fracture presents in breech presentation.
14. ALL the followings are risk factors for neonatal GBS infection:
- A. Rupture of membranes for 12 hours XXXX**
 - B. Maternal chorioamnionitis
 - C. Maternal GBS bacteruria
 - D. Maternal age < 20 years
 - E. Gestational age < 37 weeks

Others :

- 1) Newly born baby and afebrile but cyanotic ,, on x ray there is congested lung ??
 - **It is mostly PDA complicated by PPHN**
- 2) Newly born baby with sign and symptoms of RDS ,, on pulsoxymetry ,, O2sat very low and need intubation ,, later on O2sat corrected up to 98 ..48 hrs after that the o2 sat return to admission level ???
 - **You diagnosis should be PDA**
- 3) 1st clinical manifestation of PDA is ??
 - **Increase oxygen requirement**
- 4) You should know the sign of severity in AS:
 - **absence of murmur , absence of click ,, S4 ,, reversed splitting ,, ejection systolic**
- 5) Indication for surgery in AS ???
- 6) Any baby <25 wks is indication for indomethacin to prevent PDA and IVH
- 7) Risk of BPD in any baby <500 gm is 100%
- 8) Any premature baby >2 wks with failure to thrive Late metabolic acidosis of prematurity
- 9) The most important cause of IVH in premature is ?? fluctuant BP
- 10) PVL cause by ((HIE, IVH,, hypocarbia ,, chorioamnitis))
- 11) Retinopathy of prematurity Most common cause is ???
 - **prematurity itself ,, second is oxygen therapy**
- 12) Pathophysiology of ROP mainly ???
 - **high vascularization ... treatment : laser therapy**
- 13) Risk factor of NEC :
 - **prematurity ,, LBW<1KG,, Hx of PET,, exchange transfusion ,, Maternal age <25 ,,PPROM,,APH,,CHD**
- 14) What is the cause of endemic NEC ???

- **coxaci A virus**
- 15)Complication of NEC surgery ???
 - **malabsorbtion ,, short bowel syndrome ,, growth failure**
- 16)What is the duration needed to secret surfactant after single dose of steroid ???
 - **is 2wks ,, initiaton need 24-48hrs**
- 17)BPD : **occur when baby need O2 at >36 corrected GA or at 28 day of life**
- 18)What is the most serious complication of BPD???
 - **Cyanotic spell due to silent asthma**
- 19)Anterior fontanel ... **assess anterior IVH**
- 20)Mastoid **Assess posterior IVH**
- 21)Indomethacin ... indicated in any baby ((25-26)) wks to prevent :
 - **PDA(dose 0.2 mg) and to prevent IVH (dose 0.1 mg)**
- 22)Phocomelia is chracterstic of ?? **congenital VZV**
- 23)Nosocomial VZV ... know the risk factor ((>28 wks,, BW>1000,, no hx of VZV))
and((<28,,<100gm,,regardless hs))
- 24)Leading cause of death in VZV?? **Giant pneumonia ,, hemorrhagic chicken box**
- 25)The virulence dose of HBV to be transmitted in saliva is ??? **100 virus**
- 26)HSV can cause neurological manifestation which include ... **temoral lobe seizures ,, temporal lobe hemorrhage**
- 27)When treating HSV with acyclovir **Ensure good hydration to prevent precipitation in kidney**

Dr. Omar Nafe':

1. A child who is able to do interactive play, takes turns. His developmental age is:
 - A. 12 months.
 - B. 15 months.
 - C. 18 months.
 - D. 24 months.
 - E. 36 months. XXXX**
2. Regarding growth of the newborn, ALL are TRUE EXCEPT:
 - A. Average body weight at birth is 2.5-4.2 kg.
 - B. Head circumference is 42 cm. XXXX**
 - C. Average height at birth is 50 cm.
 - D. Height increase 25 cm in the first year.
 - E. Birth height become double at 4 years age.
3. 12 years obese female with complain of headache. Fundus examination showed papilloedema. Urgent brain CT scan was normal . the most likely diagnosis is:
 - A. Migraine
 - B. Pseudo tumor cerebri XXXX**

- C. Acute meningitis
- D. Hydrocephalus
- E. Tension headache

4. Regarding migraine headache in children, ALL the following are TRUE, EXCEPT:
- A. In common type → The headache usually persists for 1–3hr, although the pain may last for as long as 24hr.
 - B. A positive family history is NOT a part of diagnosis. XXXX**
 - C. Common type is associated w/ intense nausea and vomiting, which may be more bothersome than the headache.
5. Cyclic vomiting is an example of variant migraine.
- Regarding neonatal meningitis, ALL the following statements are TRUE, EXCEPT:
- A. Neonatal meningitis most frequently results from the bacteremia that occurs with neonatal sepsis.
 - B. Mostly results from infection w/ E.coli, H.influenza, and Listeria monocytogens. XXXX**
 - C. Definitive Diagnosis is made by CSF examination via LP.
 - D. Without treatment , the mortality rate from neonatal meningitis approaches 100%.
 - E. Neurological sequelae (hydrocephalus , hearing loss, mental retardation) develop in 20 - 50% of infants who survive.
6. Regarding Post-neonatal meningitis, ALL the following are TRUE, EXCEPT:
- A. Maculopapular or hemorrhagic peticial rash often indicates Waterhouse-Friderichsen syndrome.
 - B. May associated w/ hyponatremia due to SIADH.
 - C. Infection of the meningies decrease the permeability of the BBB. XXXX**
 - D. Dexamethasone should be given 15-30 min before the 1st dose of antibiotics.
 - E. Seizures occur in about 30% of patients.
7. Autistic spectrum include ALL the following EXCEPT one :
- A. Autism.
 - B. Attention deficit hyperactive disorders(ADHD.) XXXX**
 - C. Asperger syndrome.
 - D. Rett syndrome.
 - E. Childhood disintegration disorder.
8. Regarding ADHD, ALL the following statements are TRUE, EXCEPT:
- A. It includes 3 types.
 - B. The onset is usually before 7 years of age
 - C. It results from imbalance between serotonin and dopamine. XXXX**
 - D. Ritalin is a stimulant drug used in treatment.

- E. 70-80% symptoms persist into adulthood
9. Regarding Exanthemas, which ONE of the following is NOT matching:
- Kawasaki disease----- coronary artery aneurysm
 - Scarlet fever----- circumoral pallor
 - Measles----- rash at the top of fever
 - Erythema infectiosum----- aplastic crisis
 - Varicella zoster----- pastia line XXXX**
- 11.Regarding exanthematic diseases one is NOT matching :
- Measles →koplick spots.
 - Scarlet fever → strawberry tongue.
 - Rubella → High dose vit A supplementation reduce the complications. X**
 - Erythema infecioussum →triphasic exanthem.
- 12.Roseola infantum → seizure.
- Regarding HSP (Henoch-Schonlein Purpura), only ONE statement is TRUE:
- is a vasculitis of medium-sized vessels.
 - It is the most common cause of thrombocytopenic purpura in children.
 - The rash tends to occur on the flexor surfaces and the back.
 - The overall prognosis is excellent. XXXX**
 - Arthritis leads to residual deformity and articular damage.
- 13.Regarding infantile spasm (West syndrome) all are TRUE EXCEPT;
- onset in the first year of life
 - b-associated to developmental delay
 - c-characteristic pattern in EEG (hypsarrythmia)
 - Vigabatrin is drug of choice specially if is it due to tuberous sclerosis
 - The prognosis is good. XXXX**
- 14.Regarding anti epileptics drugs side effects ONE is NOT matching
- Valproic acid (depakine)-----neural tube defect
 - Phenobarbital ----- Child excitement and hyperactivity **????**
 - Lamotrigine (Lamictal)-----Steven Johnson syndrome
 - Vigabatrin (sabril)-----visual field defect
 - Phenytoin (epanutin)-----Hirsutism
- 15.Regarding Febrile convulsions, ALL the following statements are TRUE, EXCEPT:
- Family history of febrile seizures associated w/ recurrence.
 - Family history of a febrile seizures associated w/ epilepsy.
 - URTIs is one of the most common causes.
 - May result from roseola infantum.
 - LP should be done to ALL patients to r/o meningitis. XXXX**
- 16.All of the following statements regarding cerebral palsy are TRUE, EXCEPT:
- It is due to an insult to the immature brain
 - It is a progressive disorder XXXX**
 - In most cases the exact cause is unknown
 - Quadriplegic cerebral palsy is the most severe type
 - Vision and hearing might be affected
- 17.ALL the following regarding Duchenne's muscular dystrophy are TRUE, EXCEPT:

- A. Ambulation is obligatory by the age of 12 years.
- B. Onset occurs in early childhood.
- C. Death occurs at about 18 years.
- D. NO cardiomyopathies. XXXX**
- E. Intellectual impairment occurs in all patient.

18.Regarding hypothyroidism, ALL the following statements are TRUE, EXCEPT:

In neonatal hypothyroidism → newborn needs small dose than adult. XXXX

18.Regarding the Jordanian's vaccination schedule, ALL the following statements are TRUE, EXCEPT:

- A. BCG is the first vaccine that's given.
- B. At the age of 91 days we give: DTaP, Hib, HBV, IPV/OPV.
- C. Measles vaccine is given 3 times by the age of 18 months.
- D. We give MMR only at age of 12 months. XXXX
- E. At the age of 9 months we give: Measles and OPV.

19.Regarding vaccination, ALL the following matches are TRUE, EXCEPT:

- A. 23-valent pneumococcal vaccine → Pure polysaccharide.
- B. Prevnar 7 → Conjugated polysaccharide.
- C. BCG → Live attenuated.
- D. HBV → Fractional subunit.
- E. OPV → Killed. XXXX

Developmental Assessment:

18-a child who is able to:

- dress and undress alone.
- name 4 colors.
- Speak in grammatical sentences.
- draw a square.

His developmental age is:

- a) 30 months
- b) 3 years.
- c) 4 years.
- d) 5 years. XXXX
- e) 6 years.

[27] When examining a 2 months old infant you expect to find all of the following reflexes except :

- a) Moro reflex
- b) Palmar reflex
- c) Plantar reflex
- d) Parachute reflex XXXX
- e) Rooting reflex

[24] A 10 months old infant presented to you for routine developmental assessment You expect him to do all of the following except :

- a) Sits alone
- b) Waves bye
- c) Pulls to stand
- d) Has pincer grasp
- e) Speaks 5 specific words XXXX

[25] Regarding motor development in children all of the following combinations match except :

- a) 15 monthswalks alone
- b) 18 monthswalks upstairs with assistance
- c) 2 years hops on one XXXX
- d) 3 yearsrides tricycle
- e) 5 yearsskips

[23] Babies are able to see and fixate by the age of :

- a) **Since birth XXXX**
- b) 1 month
- c) 3 months
- d) 5 months
- e) 6 months

11- a child who can:

- walk alone steadily
- scribble with pencil
- indicate desire by

pointing His

developmental age is:

- a) 10 months.
- b) 12 months.
- c) **15 months. XXXX**
- d) 18 months.
- e) 21 months.

Q about vaccination:

1) The dose of DPT vaccine is :

- A. 1 ml
- B. 0.05 ml
- C. **0.5 ml**
- D. 2drops
- E. 2ml

2) Choose the most appropriate statement from the followings:

- A. Almost equal to one at the age of 6 months.
- B. Less than one at age between 6-60 months indicate protein calorie malnutrition.
- C. It should be more than one after the age of one year.
- D. None of the above.
- E. **All of the above.**

3) All the following statements are correct Except:

- A. TB vaccine is an live attenuated or variant vaccine
- B. **Polio vaccine is a toxoid vaccine**
- C. Whooping cough vaccine is a killed pertussis
- D. DPT is given in IM anterolateral right thigh
- E. Measles is given in subcutaneous right arm

4) An eight weeks pregnant primigravida attends the antenatal clinic for the first time ; she asks for vaccine given to pregnant ladies. What would you do?

- A. Tell her; vaccines are contraindicated during pregnancy
 - B. Give her one dose of tetanus toxoid and ask her to come for second dose next month
 - C. Give her vaccine for rubella
 - D. Tell her to come back in the second trimester of pregnancy to receive the first dose of tetanus toxoid vaccine**
 - E. Give her tetanus vaccine and ask her to come back in the sequent pregnancy.
- 5) All the followings are incorrect except:
- A. Congenital rubella syndrome occurs if the pregnant women exposed to the infection after 16 weeks of gestation.
 - B. Enlargement of lymph nodes at the occiput is rare.
 - C. If the pregnant women exposed to the infection before 16 weeks of gestation, give her rubella vaccine to prevent congenital rubella syndrome.
 - D. Koplik's spots are characteristic .
 - E. All the above**
- 6) A 100% vaccination coverage for DPT vaccine is attained when an eight month old infant receives:
- A. One dose of DPT
 - B. Two doses of DPT
 - C. Three Doses of DPT**
 - D. Four Doses of DPT
 - E. Non of the above
- 7) The maximum number of doses of tetanus toxoid that can be given to a women during her maternal life is:
- A. One
 - B. Three
 - C. Five**
 - D. Seven
 - E. Non of the above
- 8) The daily protein requirement for a pregnant women is:
- A. 1 gm/Kg body weight.
 - B. gm
 - C. gm
 - D. 40 gm
 - E. E.Non of the above**
- 9) Which of the following vaccines is recommended by the WHO to be given intradermally at the left deltoid region:
- A. DPT
 - B. Measles
 - C. HBV
 - D. HiB
 - E. Non of the above**

- 10) Which of the following is (are) absolute contraindications to vaccination
- A. Subsequent doses of pertussis vaccines are contraindicated if the child develops
 - B. convulsions within 3 hours after vaccination
 - C. Severe illness that need hospitalization
 - D. Immunosuppressive diseases
 - E. Recent receipt of blood
 - F. **All of the above**
- 11) The most effective preventive measure against tetanus neonatorum among infants is achieved through which of the followings:
- A. Giving infants Tetanus Toxoid during first week of life
 - B. B.Giving the infant DPT vaccine at age of one month
 - C. C.Following aseptic techniques during handling newly born infants
 - D. **D.Giving the mother appropriate tetanus toxoid vaccine during pregnancy**
 - E. E.Non of the above
- 12) A 55 years old physically fit man , living in a weather of 20 °C , working 8 hours/day, the daily caloric requirement is about:
- A. 3200 calories
 - B. 3000 calories
 - C. **2800 calories**
 - D. 4200 calories
 - E. Non of the above
- 13) Which one of the followings is non essential amino acid:
- A. Tryptophan
 - B. Valine
 - C. Threonine
 - D. All of the above
 - E. **Non of the above**
- 14) All the following statements are incorrect Except one:
- A. Pertusis is a viral infection of the of the respiratory system witha characteristic cough.
 - B. Pertusis is most commonly found among young adults.
 - C. Source of infection in pertusis is a carrier.
 - D. Pertusis is transmitted by direct contact.
 - E. **Cause cerebral damage in 2% of cases.**
- 15) All the followings are true about the reasons that under-five children need special care except:
- A. They undergo physical and mental development which call for preventive care
 - B. **Although they are small sector of the population, they are full of health hazards**

- C. Diseases in this age group are associated with impaired health, disability, or fatality
 - D. A large proportion of the total deaths in developing communities takes place among under five years children
 - E. Most of the diseases that cause morbidity in these children are preventable
- 16) The following diseases are caused by bacteria, Except
- A. Diphtheria
 - B. Tetanus
 - C. Mumps**
 - D. Whooping cough
 - E. Tuberculosis
 - F.
- 17) Incubation period of diphtheria is
- A. 1-2 days
 - B. 2-5 days**
 - C. 1-2 weeks
 - D. 2-5 weeks
 - E. Non of the above
- 18) The recommended minimum dose schedule of triple vaccine (DPT) is:
- A. one dose
 - B. Two doses
 - C. Three doses**
 - D. Four doses
 - E. Five doses
- 19) Spot the most appropriate statement regarding selective services:
- A. A large section of the population expresses a need for this service .
 - B. The service issues handled with well described method.
 - C. The required supplies & equipments are available.
 - D. The service is cost- effective.
 - E. All of the above.**
- 20) Incubation period of pertusis is:
- A. 1-3 days
 - B. 1-3 weeks
 - C. 3-5 days
 - D. 7-14 days**
 - E. Non of the above
- 21) Which is the best preventive measure for control of pertusis?
- A. Early case detection and prompt treatment.
 - B. Prompt isolation of infected persons.
 - C. Passive immunization of all children.
 - D. Active immunization of all children .**
 - E. Non of the above.

- 22) The causative organism for scarlet fever is:
- A. α - haemolytic streptococcus
 - B. β - haemolytic streptococcus**
 - C. Coagulase positive staphylococcus
 - D. All of the above.
 - E. Non of the above.
- 23) Spot the most appropriate statement regarding tetanus:-
- A. Clostridium tetanei is spore- forming.
 - B. The microorganism found in the intestine of animals.
 - C. The exotoxin produced by the microorganism affects the nervous system.
 - D. In patients with a dirty injury and immunization state is unknown ; tetanus immune globulin (TIG) is administered in addition to tetanus vaccine .
 - E. All of the above are true.**
- 24) Spot the incorrect observation in respect to chicken pox:
- A. Source of infection is the infected person.
 - B. The severity of the symptoms is more in adults.
 - C. An attack of chicken pox confers life long immunity.
 - D. The rash involves the trunk and some times the extremities.
 - E. The rash is unimorphic type.**
- 25) The incubation period of chicken pox is:
- A. 6-10 days
 - B. 14-21 days**
 - C. 2- 5 days
 - D. 1-2 weeks
 - E. Non of the above.
- 26) Spot the correct observation in respect to chicken pox:
- A. The causative agent is bacteria.
 - B. Mode of transmission is feco-oral .
 - C. Meningoencephalitis is a rare complication.
 - D. Fetal varicella occurs when a pregnant women exposed to chickenpox during the first trimester.**
 - E. The administration of chickenpox antibodies within 24 hours following exposure to the infection is not effective at preventing chickenpox.
- 27) Choose the most appropriate statement in regard to poliomyelitis:
- A. It can strike at any age, but affects mainly children under three.
 - B. The virus enters the body through the mouth and multiplies in the intestine.
 - C. Poliovirus can spread widely before cases of paralysis are seen.
 - D. Most people infected with the poliovirus do not develop polio paralysis or other symptoms of polio infection.
 - E. All the above.**
- 28) The incubation period of poliomyelitis is :

- A. 16-20 days
- B. 4-5 days
- C. 3-4 weeks
- D. 6-8 weeks

E. Non of the above.

29) Spot the correct observation in respect to poliomyelitis :

- A. Salk vaccine is a live oral vaccine.
- B. Immunization starts in the first month of life.
- C. Sabin vaccine is an injectable vaccine.
- D. Sabin vaccine is preferable vaccine.**
- E. Breast feeding interferes with vaccine.

30) Spot the correct observation in respect to measles:

- A. Risk begins at age <6 months .
- B. Mode of transmission by direct contact.
- C. Incubation period is 2-3 weeks.
- D. Source of infection is a carrier.
- E. An attack of measles confers life long immunity.**

31)All the following statements are true about measles except:

- A. Measles vaccine is a live vaccine.
- B. Measles vaccine is given at age around 9 months to 1 year in children.
- C. The rash of measles appears 7 days after exposure.**
- D. Koplik's spots are considered diagnostic lesions.
- E. Subacute sclerosing panencephalitis is a fatal complication .

32) Spot the correct observation in respect to mumps:

- A. The incubation period is 10-21 days.
- B. A patient with mumps is contagious nine days after the parotid**
- C. glands swelling subsides.**
- D. Reservoir of infection is a carrier.
- E. Repeated attacks of mumps are common among non vaccinated children.
- F. Antiviral treatment is indicated to speed recovery.**

33) Choose the most appropriate statement in regard to mumps:

- A. It occurs throughout the year, but is most common in late winter or early spring.
- B. Aseptic meningitis is a common complication.
- C. Children under age 2 rarely develop mumps.
- D. Pregnant women who develop mumps during the first trimester of pregnancy have a greater chance of miscarriage .
- E. All of the above.**

34) Spot the correct statement from the followings:

- A. Absence of Moro reflex in the newborn indicates normal central nervous system functions.
- B. Diseases due to inborn error of metabolism cannot be detected in the neonatal period.

- C. Conjunctivitis neonatorum occur in babies born to mothers with herpes simplex.
D. Babies born with a birth weight <2500 gram are below the third percentile.
 E. The height of a healthy term baby is between 40-45 cms.
- 35) Spot the correct observation in respect to acute rheumatic fever :
- A. Fleeting migratory polyarthritis involving small joints.
 B. Carditis is the only manifestation of rheumatic fever that does not leave a sequelae or permanent damage to the organ.
C. Sydenham chorea alone, if other causes have been excluded is diagnostic.
 D. ASO titer >200 Todd units attained at 6 weeks is diagnostic.
 E. Rheumatic fever with carditis and residual heart disease need prophylaxis for next 5 years only.
- 36) Spot the correct statement in respect to child's growth assessment:
- A. Growth monitoring must be started at an age of 2 months.
 B. Growth monitoring involves repeated measurement of weight over time.
C. A rate of growth measures the change in a baby's growth over a specified period of time.
 D. The vertical axis in the growth chart represents the age of the child.
 E. Stunting means low height for weight.
- 37) Spot the incorrect observation in respect to child development:
- A. Slow gain in height occurs in acute stage of a disease.**
 B. Brain growth as measured by head circumference is last to be affected.
 C. Head circumference of a healthy term baby is 35 cms.
 D. Wasting means low weight for height.
 E. Non of the above.
- 38) Choose the most appropriate statement in regard to the nutritional assessment of the community:
- A. Food Balance Sheet
 B. Laboratory investigation.
 C. Clinical examination
D. All of the above.
 E. None of the above.
- 39) Choose the most appropriate statement in regard to daily fat requirement for a healthy adult is:
- A. 2.5 gm/kg body weight.
 B. (b)1.5 gm/kg body weight.
 C. (c) 2 gm/kg body weight.
 D. (d)1-1.5 gm/kg body weight.
E. (e)1- 1.25 gm/kg body weight.
- 40) Choose the most appropriate statement in regard to the sever thinness:

- A. BMI is < 17.9
- B. BMI is >17.9
- C. BMI is between 16- 17.9
- D. (d)BMI is < 16**
- E. None of the above.

Growth:

19-A mother brings to you her 5 years old boy for short stature. Both parents had a history of short stature in childhood, but they are now of normal height. Features that qualify as criteria for the diagnosis of constitutional growth delay include all the following, EXCEPT:

- a) height and weight below the third centile
- b) normal growth of 5 cm per year
- c) the child was normal at birth for height and weight
- d) delayed puberty
- e) bone age is equal to chronological age XXXX**

95-normal pubertal development includes all the following except :

- a) 95 % of girls will have commenced puberty before the age of 14 yrs
- b) luteinizing hormone stimulates spermatogenesis
- c) luteinizing hormone stimulates ovulation in females
- d) increase of the testicular volume to 4 ml is the first sign of puberty in males ????
- e) the growth spurt occurs in girls earlier than in males

8- Regarding growth, all are true except:

- a) average head circumference at birth is 35 cm.
- b) head size grow 4-5 cm in the first year of life. XXXX**
- c) average height at birth is 50 cm.
- d) height increase 25 cm in the first year.
- e) birth height become double at 4 years age.

HEADACHE:

1. NOT a cause of functional headache:

- a) Subdural hematoma XXXX**
- b) Benign intracranial hypertension
- c) Migraine

[30] All of the following statements regarding headache in children are true except:

- a) Migraine headache is the most common cause of acute recurrent headache in children
- b) Migraine is usually unilateral in children XXXX**
- c) Diagnosis of migraine headache is clinical
- d) 50% of children will have remission
- e) Family history of migraine is frequent

23-All the following are precipitating factors for migraines episodes except;

- a) a-Chinese food b-alcohol
- b) c-contraceptive pills
- c) d-topamax (topiramate) XXXX**
- d) e-excessive physical exertion

3- A 5-years old presented with headache of one month duration. This headache is worse in the early morning and during coughing, and associated with increase vomiting. This morning mother noted that his gait is unsteady, the most likely diagnosis in this patient is :

- a) pseudomotor cerebri migraine.
- b) tension headache.

c) cerebellar tumor. **XXXX**

d) aseptic meningitis.

2. Regarding Headache; which is NOT matching;

a) neuralgia ultra short duration

b) cluster headache → around eye

c) migraine episode → few hours

d) classical migraine → least common migraine type

e) common migraine → aura **XXXX**

34- 10 years old boy had episode of severe excruciating headache of sudden onset describing it as a blast after less than one hour he lost his consciousness. On arrival to emergency room meningeal irritation signs were positive and temperature was 38, CSF examination shows

Cells 5 all lymphocytes

Glucose 75 blood sugar 100

Protein 40 normal 40

The most likely diagnosis is:

- . a-aseptic meningitis
- . b-TB meningitis
- . c-partially treated meningitis
- . d-subarachnoid hemorrhage
- . e- acute encephalitis

3. neuroimaging is indicated in all the following except;

- . a-headache awakens child from sleep
- . b-focal neurological deficit
- . c-focal seizures
- . d-headache and seizures
- . e-chronic daily headache **XXXX**

4. Regarding **migraine prophylaxis's**, all are true EXCEPT;

- . if child experience more than two severe episodes monthly
- . if a child is unable to attend school regularly c-Propranolol is the drug of choice
- . d-duration of prophylaxis's is lifelong. **XXXX**
- . e-tricyclic antidepressant can be used.

5. years obese female with complain of **headache**. Fundus examination showed papilloedema. Urgent brain CT scan was normal . the most likely diagnosis is:

- . A-Migraine
- . B-Pseudo tumor cerebri **XXXX**
- . Acute meningitis
- . Hydrocephalus
- . Tension headache

MENINGITIS:

1. Wrong about meningitis:

- **20% has complications like hydrocephalus, MR, and... ????** "I think this choice is NOT the answer !!!"

2. regarding meningitis which statement is TRUE;

- etiology is same regardless patient age
- prognosis is better in new borns
- duration of treatment is 7 days regardless age or etiology
- **Aseptic meningitis is mainly of viral etiology XXXX**
- tuberculous meningitis has the least severe complications

3. on examining cerebrospinal fluid of 6 years child with fever and neck rigidity we found

- Cell 200 all lymphocytes
- Protein 150 normal 30-40
- Glucose 15 blood glucose 90

Differential diagnosis include ALL the following EXCEPT;

- a-viral meningitis
- b-tuberculous meningitis
- **c-pseudotumour cerebri XXXX**
- d-meningeal leukemia
- e-partially treated meningitis

4. The viral encephalitis is specifically treated with:

- Penicillin
- Hyperimmune rabbit serum
- Gamma globulin
- Steroids
- **Supportive treatment XXXX**

5. years old boy presented with fever, T=39 for 2 days and when he arrive to ER he start to have seizure , after you stabilize the patient you did for him CT scan found to have a focal lesion in the left temporal lobe , the management of this patient should include :

- A. Phenobarbital
- B.Carbamazapine
- C.erythromycin
- **D.Acyclovir XXXX**
- E.Phenytoin

ADHD & Autism:

1. Wrong about ADHD:

- **Usually develops before 3 years of age**

2. Autistic spectrum include ALL the following EXCEPT one :

- autism.
- attention deficit hyperactive disorders(ADHD.)
- asperger syndrome.


- . Rett syndrome.
 - . childhood disintegration disorder.
3. Regarding autism in children all of the following statements are true except
- . Delay in qualitative social interactions
 - . Delay in verbal and non verbal communication
 - . Decrease imaginative activity
 - . **Symptoms appear in the first month of life XX**
 - . Mental retardation is frequent
4. regarding RETT syndrome, one statement is NOT true
- . it is x linked dominant disorder
 - . **only males are affected xxxxx**
 - . patient is normal first 5- 6 months of life
 - . head circumference not grow after age 6 months
 - . there is autistic behavior
5. regarding autism which statement is NOT true;
- . there are five subtypes
 - . there is some association to MMR vaccine
 - . it is mainly genetic disorder
 - . **outcome depend to intelligence level and verbal skills e-treatment is mainly pharmacological .xxxxxxx**

GENERAL SOFT

2014-04-05 11:53:32

IP --> 10-12 days.

Exanthemas :

1. Clinical features of measles include all the following except:
- . Conjunctivitis
 - . Dry cough
 - . Koplik's spots on the buccal mucosa.
 - . **Incubation period of 14-21 days. XXXX** 
 - . Maculopapular rash.
2. which one of the following is NOT matching
- . Kawasaki disease----- coronary artery aneurysm
 - . Scarlet fever----- circumoral pallor
 - . Measles----- rash at the top of fever
 - . Erythema infectiosum -- aplastic crisis
 - . **varicella zoster----- pastia line XXXX**
 - .
3. 1year-old-boy exposed to child with measles you will give him:
- . **Vaccine alone within 72 hrs. XXXX**
 - . Immunoglobuline alone within 72 hrs
 - . Reassure mother and arrange appointment within incubation period
 - . Vaccine & immunoglobuline within 72 hrs
 - . Vaccine & immunoglobuline within 5 days
4. Regarding exanthematic diseases one is NOT matching :
- . measeles → koplick spots.
 - . scarlet fever → strawberry tongue.
 - . rubella → congenital anomalies in fetus.

- . erythema infectiosum → hydrops fetalis.
 - . roseola infantum → pastia lines. XXXX
5. Regarding incubation period for these diseases one is WRONG:
- . measles(rubeola) → 3-5 days. XXXX
 - . rubella "german measles" → 2-3 weeks.
 - . hicken pox "varicella" → 10-21 days.
 - . scarlet fever → 1-4 days
 - . roseola infantum → 5-15 days
6. human parvovirus B-19 infection cause each of the following EXCEPT:
- . erythema infectiosum
 - . transient aplastic anemia
 - . hydrops fetalis
 - . reactive arthritis
 - . **roseola infantum XXXX**
7. A 14-year-old girl awakens with a mild sore throat , low-grade fever and a diffuse maculopapular rash during the next 24 h she develops tender swelling of her wrists and redness of her eyes in addition her physician notes mild tenderness and marked swelling of her posterior cervical and occipital lymph nodes four days after the onset of her illness the rash has vanished the most likely diagnosis of this girl's condition is:
- . **rubella XXXX**
 - . rubeola
 - . roseola
 - . erythema infectiosum
 - . erythema multiforme
8. 1 year old male had fever reaching 40C developed convulsions, CSF examination was normal. After 2 days of persistent high grade fever a maculo papular rash appeared and fever disappeared. the most likely diagnosis is :
- . measles
 - . rubella
 - . **roseola infantum XXXX**
 - . scarlet fever
 - . erythemia infecciosm
9. Congenital rubella infection has been associated with all the following EXCEPT:
- . cataract
 - . **pleocytosis of the cerebrospinal fluid XXXX**
 - . Optic nerve hypoplasia
 - . Congenital heart lesion
 - . Deafness.

Vasculitis (HSP & Kawasaki's Disease) :

1. Regarding **Henoch-Schonlein purpura** which of the following statements is FALSE:
 - . Thrombocytosis
 - . Microscopic hematuria may persist for more than a year
 - . Intussusceptions is a recognized complication
 - . **The arthritis may lead to joint deformity. XXXX**
 - . There is evidence to suggest that it is an immune complex disease.
2. regarding Kawasaki ALL statements are TRUE EXCEPT:
 - . it's a syndrome of acute febrile vasculitis .
 - . 80% of patients are younger than 5 years.
 - . strawberry tongue, erythema and swelling of hands and feet are manifestation.
 - . **corticosteroids are mainstay of treatment. XXXX**
 - . coronary artery aneurism is the major complication.
3. Which of the following is USUALLY found in the CBC of a patient with **Kawasaki's**?
 - . **high platelets XXXX**
 - . low platelets
 - . high RBCs
 - . low RBCs
 - . high WBCs
4. Regarding **Henoch-Schonlein purpura**, all statement are TRUE EXCEPT:
 - . its vasculitis of small veseles.
 - . its cause is unknown but typically follow upper respiratory tract infection.
 - . most cases occur between 2-8 years of age.
 - . therapy with intravenous or oral corticosteroids in associated with dramatic improvement of gastrointestinal and neurological manifestation.
 - . **there is usually severe thrombocytopenia. XXXX**
5. 2-year-old child is admitted to your hospital team. The child's primary care doctor has been following the child for several days and has noted her to have had high fever, peeling skin, abdominal pain, and a bright red throat. You are concerned because two common pediatric problems that could explain this child's condition have overlapping presenting signs and symptoms. Which of the following statements comparing these two diseases in your differential is TRUE?
 - . Neither has cardiac complications
 - . Serologic tests are helpful in diagnosing both
 - . Only one of the diseases has mucocutaneous and lymph node involvement
 - . **Pharyngeal culture aids in the diagnosis of one of the conditions XXXX**
6. A specific antibiotic therapy is recommended for one of the conditions, but only supportive care is recommended for the both. **Scarlet fever** and **Kawasaki syndrome** have many manifestations in common. Each of the following statements comparing

these diseases is TRUE EXCEPT:

- . both have cardiac complication
- . serological tests are helpful in diagnosing both. XXXX
- . both have mucocutaneous and lymph node involvement.
- . pharyngeal culture aids in the diagnosis of scarlet fever but not in the Kawasaki syndrome.
- . a specific therapy is recommended for both.

Febrile Seizures & Epilepsy:

1. Regarding **anti epileptics drugs side effects** one is NOT matching
 - . valproic acid (depakine)----- neural tube defect
 - . b-phenytoin (epanutin) ----- gum hyperplasia
 - . c-lamotrigine -----(lamictal) steven Johnson syndrome
 - . d-vigabatrin (sabril)-----visual field defect
 - . **e-gabapentin (neurontin)----- -renal toxicity XXXX**
2. Characteristics of **simple febrile seizures** include all the following EXCEPT:
 - . Last less than 15 minutes
 - . Only one occurs per 24 hour period
 - . **Can be caused by intracranial infection XXXX**
 - . Is not caused by severe metabolic disturbance
 - . it is generalized
3. Regarding **infantile spasm** (West syndrome) all are TRUE EXCEPT;
 - . onset in the first year of life
 - . associated to developmental delay
 - . characteristic pattern in EEG (hypsarrythmia)
 - . vigabatrin is drug of choice specially if is it due to tuberous sclerosis
 - . **the prognosis is good. XXXX**
4. WRONG about **febrile seizures**:
 - . Usually associated with developmental delay
 - . You need to rule out infectious causes
5. All the following are predictive of adverse outcome of **epilepsy** except
 - . multiple type of seizures .
 - . association with cognitive impairment.
 - . recurrent status epilepticus.
 - . **late age of onset .XXXX**
 - . high rate of seizures
6. Regarding febrile convulsions, one statement is WRONG:
 - . a- it's the commonest form of seizures in infant and young children. b- Main differential diagnosis is meningitis.
 - . **most children become epileptic when older XXXX**
 - . children outgrow it at age 5 years.
 - . Is classified into simple and complex.

7. all statements regard febrile seizures simplex are true EXCEPT:
- . a-age less than 5 years
 - . b-duration less than 15 minutes c-generalized tonic clonic
 - . **d-association to mesial temporal scleroses later on XXXX**
 - . e-absence of CNS infection
8. All of the following regarding febrile convulsion in children are true except
- . It is the most common form of seizure in children
 - . It affects age groups between 6 months and 6 years
 - . **Most patients will develop epilepsy if not treated XXXX**
 - . Simple febrile convulsions are generalized
 - . Only minority will have frequent (more than 3)attacks
9. all the following are predictive of adverse outcome of epilepsy except
- . multiple type of seizures .
 - . association with cognitive impairment.
 - . recurrent status epilepticus.
 - . **late age of onset XXXX**
 - . high rate of seizures
10. modalities for treatment of epilepsy include all the following except;
- . pharmacological treatment
 - . ketogenic diet
 - . vagal nerve stimulation
 - . surgery
 - . **intrathecal baclofen XXXX**
11. which one of the followings is NOT matching
- . Ash-leaf spots, intracranial → calcifications Tuberos sclerosis
 - . Gower's sign → Muscular dystrophy
 - . Café au lait spots, cutaneous tumors → Neurofibromatosis
 - . **strawberry hemangioma → sturge -weber XXXX**
 - . e-retinitis pigmentosa → visual field defect
12. All of the following statements regarding epilepsy in children are correct except:
- . Epilepsy is more common in children than in adults
 - . One third of patients do not respond to medical treatment
 - . Vagal nerve stimulation is a palliative treatment in epilepsy
 - . **West syndrome carries a good prognosis in most patients XXXX**
 - . Syndromic classification permits prediction of prognosis

CP:

1. Regarding cerebral palsy one statement is not true :
 - . **Its transient disorders of movement. XXXX**
 - . incidence is 2/1000.
 - . shaken baby syndrome can be a cause.
 - . high serum bilirubin is risk factor.
 - . intrauterine infections are possible causes.
2. Preventive measures for cerebral palsy include all the following except :
 - . child safety seats in cars. b- prevention of child abuse.
 - . **proper treatment of hyperbilirubinemia d- vaccination against mumps XXXX**
 - . identify Rh incompatibility.
3. 30 months old boy had developmental delay ,on examination ;There is Spasticity in lower limbs, exaggerated deep tendon reflexes, ankle clonus, his gait is tip toe bilaterally, upper limbs are normal his most likely diagnosis is;
 - . spastic hemiplegia
 - . **spastic diplegia XXXX**
 - . spastic quadriplegia
 - . mixed type cerebral palsy e- ataxic type cerebral palsy
4. All of the following statements regarding cerebral palsy are true except :
 - . It is due to an insult to the immature brain
 - . **It is a progressive disorder XXXX**
 - . In most cases the exact cause is unknown
 - . Quadriplegic cerebral palsy is the most severe type
 - . Vision and hearing might be affected
5. regarding cerebral palsy ,all are true except;
 - . spastic type is the commonest.
 - . **quadriplegic type is having the BEST prognosis XXXX**
 - . choreoathetotic → lesion in basal ganglia.
 - . spastic diplegia → germinal matrix periventricular leukomalacia (PVL)
 - . ataxic type is the least; only 1%.
6. Regarding cerebral palsy one statement is not true :
 - . **Its transient disorders of movement XXXX**
 - . incidence is 2/1000.
 - . shaken baby syndrome can be a cause.
 - . high serum bilirubin is risk factor.
 - . intrauterine infections are possible causes.

Enuresis:

1. All of the following are correct regarding nocturnal enuresis except
 - . Nocturnal enuresis is the involuntary loss of urine that occurs only at night
 - . Children are not considered enuretic until they have reached five years of age
 - . To establish the diagnosis, a child of five to six years old should have two or more bed-wetting episodes per month.
 - . Wetter children have not been found to have an increased incidence of emotional problems.
 - . **About 0 percent of children are bed wetter over all the world XXXX**
2. The most effective treatment for nocturnal enuresis is
 - . **Bed-wetting alarm XXXX**
 - . Antidiuretic hormone
 - . A reward system for dry nights.
 - . Bladder training.
 - . love and support.
3. Regarding enuresis " necturia " , all the statements are true EXCEPT ONE :
 - . bladder control during day and night is achieved at age 5 years.
 - . its more common in boys than in girls.
 - . Spontaneous resolution rate is approximately 15% per year.
 - . its classified into primary and secondary.
 - . e-treatment with desmopersion may lead to hyponatemia.

Miscellaneous:

1. Regarding Duchenne muscular dystrophy
 - . ambulation is lost by age 12 years
 - . death is usually at age 21 years
 - . c-cardiomyopathy is constant feature
 - . **d-there is no intellectual impairment XXXX**
 - . e-lordosis and tip toe gait are usual .
2. On examining visual field of 12 years old obese female, you find bitemporal hemianopia the lesion is localized in :
 - . optic nerve.
 - . optic tract.
 - . optic chiasm.
 - . optic radiation.
 - . occipital cortex.

3. regarding neonatal seizures, all statements are true except :
 - . incidence is more in premature babies than in full term babies.
 - . the subtle type is the commonest.
 - . jitteriness is the main differential diagnosis.
 - . **if underlying cause is hypoglycemia the outcome is excellent. XXXX**
 - . phenobarbitone is the drug of choice.

4. regarding colostrum, all statements are true except :
 - . it's the secretion of breasts during latter part of the pregnancy and for 2-4 days after delivery.
 - . its of deep lemon yellow color.
 - . its alkaline.
 - . total secretion is 100-400 ml daily.
 - . contain more protein than mature breast milk.

5. comparing breast milk to cow milk, all statement are true except :
 - . water content is same in both.
 - . calories are almost same in both.
 - . cow milk contain more protein.
 - . breast milk contain more carbohydrates.
 - . cow milk contain more Vit.k .

6. the most common cause of death in children 1-4 year is ;
 - . accident.
 - . malignant diseases.
 - . neurological disorders.
 - . congenital anomalies.
 - . respiratory disorders.

7. A one year child came to you in emergency room after accidental ingestion of kerosene, your management include all the followingmeasures except :
 - . immediate gastric wash.
 - . admission for observation.
 - . order chest X-ray.
 - . avoid emesis.
 - . if become cyanosed shift to intensive care unit.

8. 3 years old boy came to emergency room with complain of weakness in both lower limbs and inability to walk, he had history of upper respiratory tract infection two weeks before, on examination there is symmetrical bilateral loss of deep tendon reflexes .marked flacidity. Muscles power was grade 3,your most likely diagnosis is
 - . poliomyelitis
 - . guillian-barre syndrome
 - . transverse myelitis
 - . polymyositis
 - . cerebral palsy.

9. regarding Denver developing screening test all statements are true except;

- . is applied to children under five years
- . gross motor development is tested
- . fine motor development is tested
- . social adaptation is tested
- . growth rate is measured

10. A child with S&S of infectious mononucleosis. He has rash which mother says developed after penicillin therapy. Diagnosis is:

- . EBV

11. two months old infant with irritability and moderate grade fever all following could be the cause except;

- . meningitis
- . otitis media
- . urine tract infection
- . umbilical hernia
- . napken dermatitis

12. all the following are signs of severe dehydration except one;

- . depressed anterior fontanelle
- . sunken eyes
- . slow pulse
- . dry tongue
- . loss of skin elasticity

13. regarding down syndrome all statements are true except;

- . incidence is 1 in 700 live born babies
- . is the most common cause of mental retardation
- . incidence increase when father age is more than 40 years
- . congenital leukemia is complication
- . hypotonia is universal finding
- . developmental delay is global

14. one of the following is not matching

- . microcephaly small head
- . Hydrocephaly accumulation of fluid in ventricular system
- . plagicephaly asymmetrical skull
- . megalencephaly large brain size
- . anencephalycongenital absence of brain

15. all the following are matching except one

- . typhoid fever salmonella typhi
- . dysentery entamoiba histolytica
- . kalazar leishmania
- . infectious mononucleosis parvovirus B19
- . atypical pneumonia mycoplasma pneumoniae

16. concerning a positive mantoux test in a child all the following statements are true except:

- . it generally develops within 2 to 10 weeks after infection
- . it indicates that the child is contagious
- . it indicates a need for antimicrobial therapy
- . it may revert to negative for a brief period after immunization with live viruses

- . it may indicate infection with a typical mycobacteria
17. regarding infantile spasm(west syndrome) all are true except;
- . onset in the first year of life
 - . associated to developmental delay
 - . characteristic pattern in EEG (hypsarrythmia)
 - . vigabatrin is drug of choice specially if is it due to tuberous sclerosis
 - . the prognosis is good.
18. All of the following match except :
- . Guillain Barre syndrome.... decrease deep tendon reflexes
 - . **Polio brisk reflexesXX**
 - . Werdnig hoffman (SMA I)..... tongue fasciculation
 - . Duchenne dystrophy..... mental retardation
 - . Congenital myasthenia..... asymmetrical ptosis
19. All of the following are true regarding acute guillain Barre syndrome except :
- . Weakness starts in the lower limbs
 - . The paralysis is flaccid
 - . **Symptoms develop slowly over 6 months XX**
 - . Steroids are not indicated
 - . Prognosis is good in children
20. All of the following are correct regarding hypothyroidism except:
- . Stopping thyroxin at 3 years for 3-4 weeks with marked increase of TSH confirm the diagnosis
 - . **Cardiomegally is one of the clinical manifestationsXX**
 - . Twice common in girls
 - . Defect of thyroglobulin synthesis expressed by increase TSH and low T4
 - . Constipation
21. Which of the following statements regarding pertussis vaccine is CORRECT:
- . Toxoid
 - . Contraindicated in Down's syndrome.
 - . **Given as triple vaccine combined with diphtheria and tetanus vaccines. XXXX**
 - . Given at 4, 6 and 8 months of age
 - . Given as a booster prior to school entry.
22. Regarding tuberculosis one statement is not true
- . -TB infection no signs no symptoms
 - . TB disease there is signs and symptoms
 - . miliary TB tuberculin skin test can be negative
 - . TB meningitis 4 antituberculous drugs must be used
 - . **urogenital TB not disease xxxxxxx**

23.-3 years old boy came to emergency room with complain of weakness in both lower limbs and inability to walk, he had history of upper respiratory tract infection two weeks before, on examination there is symmetrical bilateral loss of deep tendon reflexes .marked flaccidity. Muscles power was grade 3,your most likely diagnosis is

- . poliomyelitis
- . **guillian-barre syndrome XXXX**
- . transverse myelitis d-polymyositis
- . cerebral palsy.

24.A child being treated with OM since 5 days with Ampicillin? CSF analysis: revealed: decreased glucose, increased protein, increased WBCs 85% of which is polymorphonuclear leukocytes. Diagnosis is:

- . TB
- . Partially treated bacterial
- . Lyme disease
- . Viral

Dr. Enas:

1. A 15-month child w/ a hx of some rinorrhoea ,sore throat, mild cough, low grade fever for 1-3 days before he has barking cough ,hoarseness, Inspiratory stridor. The BEST mode of treatment is: ((N.B: this scenario case represents a child w/ CROUP infection, because the following support the dx of croup; age, male, hx of URTI before 3 days, then complaining of laryngeotracheobronchitis. And as u know croup is caused by a virus, mostly "Parainfluenza type 1, 2 and 3" → so there's NO role for antibiotics Rx))
 - A. 3rd generation Cephalosporin.
 - B. Antistaph antibiotics.
 - C. Antibiotics PLUS corticosteroid.
 - D. Nebulized Epinephrine PLUS systemic corticosteroid (oral or IM). XXXX**
 - E. Inhaled corticosteroid.
2. ALL the following matches are TRUE, EXCEPT:
 - A. Adenovirus →may have concurrent conjunctivitis.
 - B. EBV → cervical lymphadenitis.
 - C. Streptococcus → Epiglottitis XXXX**
 - D. Herpangina → mouth ulcer.
 - E. Primary Herpes Simplex → gingivostomatitis.
3. Regarding Asthma, ALL the following statements are TRUE, EXCEPT:
 - B. Most children who have asthma during their early childhood will continue to have asthma when they're adults. XXXX**
 - C. bronchial hyperresponsiveness (BHR) is one of the major theories that explains the pathophysiology of asthma.

D. Common viral infections of respiratory tract (RSV), usually precede of asthma and exacerbate it.

4. ALL the following statements about diagnosis of asthma are TRUE, EXCEPT:

A. In asthma there is partial reversible airways obstruction.

B. Hypoxia occur in acute phase of severe cases.

C. Airflow limitation (low FEV₁, FEV₁/FVC < 0.8)

D. CXR may show lung hyperinflation.

E. **Clubbing fingers in severe persistent cases. XXXX**

5. Regarding management of acute exacerbation of asthma in the ER, ALL the following medications are mode of choice, EXCEPT one:

A. 100% O₂ therapy.

B. SABA (short acting β agonist).

C. Systemic GCS (glucocorticoids).

D. **Inhaled GCS XXXX**

E. I.V magnesium sulfate.

6. ALL the following matches regarding causative organisms of pneumonia are TRUE, EXCEPT:

A. *Mycoplasma pneumonia* → school-aged children.

B. **Group A β haemolytic streptococcus → 20-day-neonate. XXXX**

C. Aspiration pneumonia is → children with neurological impairment.

D. RSV → bronchiolitis in a 1-year-child.

E. *Pneumocystis* species → In immunosuppressed individuals.

7. ALL the following microorganisms have immunoglobulin (IVIG), EXCEPT:

A. Varicella.

B. Measles. **???**

C. Rabies.

D. Hepatitis B.

E. Tetanus.

((hada el Q 7ayrne ktheer, l2no el doc Omar b m7a9'rt el exanthema 7aka 2no el measles 2lo immunoglobulin nd we use it in exposure to a case of measles within 7 days,,,, w benesbe lel remaining 4 choices Varicella, Rabies, Hepatitis B and Tetanus → All of them have immunoglobulin as he mentioned in his seminar "Vaccination" ,, benesbe 2le I chose B. Measles !!!))).

8. Regarding cystic fibrosis, ALL the following statements are TRUE, EXCEPT:

A. **In EARLY stages of the disease the pulmonary function test shows an restrictive pattern (↑RV/TLC & ↑ TLC). XXXX**

B. Sputum culture in early stages may show S.aureus.

C. Findings of *P aeruginosa* , especially the mucoid form, support the diagnosis of CF in children.

E. May present with increased frequency of stools, which suggests malabsorption.

9. A 2-year-old boy diagnosed w/ cystic fibrosis, ALL the following findings you may find in him, EXCEPT:
- A. Sputum culture showing S.aureus.
 - B. Wheezing, Cough.
 - C. Hyper-resonant chest on percussion.
 - D. Clubbing of fingers. XXXX (I'm NOT sure if this choice is the proper answer, but I think clubbing fingers usually reflects the presence of chronic hypoxia as a result of bronchiectasis which usually presents after years).**
10. ALL the following factors INCREASE the chance of TB transmission, EXCEPT:
- A. Positive acid-fast staining of sputum.
 - B. Upper-lobe cavitations.
 - C. Children are highly infective. XXXX**
 - D. Strong cough.
 - E. Positive skin reaction to the PPD.
11. Regarding TB, only ONE statement is TRUE:
- In primary TB → a CXR shows hilar adenopathies. XXXX**
12. ALL the following CHD (congenital heart diseases) presents w/ neonatal hypoxia, EXCEPT:
- A. Total pulmonary atresia.
 - B. TGA.
 - C. ASD XXXX**
 - D. Truncus arteriosus.
 - E. Tricuspid Regurgitation.
13. A case history (about 9 months boy asymptomatic, accidentally you found a 2/6 systolic murmur, w/ a wide FIXED splitting of S2). The MOST likely diagnosis is:
- A. VSD.
 - B. ASD. XXXX**
 - C. PDA.
 - D. TGA.
 - E. TOF.
14. ALL the following CHD (congenital heart diseases) presents w/ heart failure within the FIRST WEEK, EXCEPT:
- A. Severe coarctation of the Aorta.
 - B. Hypoplastic Left Heart
 - C. Critical Aortic stenosis
 - D. Large VSD XXXX**
 - E. TGA
15. ALL the following cyanotic CHD (congenital heart diseases) associated w/ DECREASED pulmonary blood flow, EXCEPT:
- A. TOF.
 - B. Pulmonary atresia with intact atrial septum.

C. TGA (Transposition of Great Arteries). XXXX

D. Tricuspid atresia.

E. Total anomalous pulmonary venous return with obstruction.

16. ALL the following are parts of the TOF (Teratology of Fallot), EXCEPT:

A. VSD. B. Overriding C. RV hypertrophy

D. Left-ventricular outlet obstruction. XXXX E. Associated w/ hypercyanotic spells.

17. A case history, (u'll b very happy that u know the Dx that z Heart Failure, but after a long time while u r checking the finding and vital signs,,, etc... The question mentions that "Regarding the Heart Failure that the child has, ALL the following statements are TRUE, EXCEPT:")

- A. Diuretics are part of treatment.
- B. We use inotropic agents as a part of Rx.
- C. Digoxin is a STRONG inotropic agent. XXXX**
- E. It's best diagnosed by means of detailed history taking, physical examination.

18. ALL the following matches about drug and its antidote are TRUE, EXCEPT:

- A. Acetaminophen → NAC (N-acetylcysteine)
- B. BDZ (Benzodiazepine) → Flumazenil (flumazenil)
- C. Digoxin → atropine. XXXX**
- D. Iron → deferoxamine
- E. Opioid → Naloxone

19. ALL the following statements about childhood leukaemia are TRUE, EXCEPT:

- A. May associated w/ Down's syndrome.
- B. A bone marrow show 20 % blasts.
- C. T-cell type may associated w/ mediastinal mets.
- E. Those w/ onset before 12 months of age carries a good prognosis. XXXX**

20. Another question about Leukaemia (Unfort. I don't remember it)

21. ALL the following immunodeficiency diseases are due to B-Cells defect, EXCEPT:

- A. SCID XXXX**
- B. CVID
- C. hyper IGM
- D. x lined agamma

22. A case history, ((a child comes to after he visited a local GP when he was complaining of prominent tonsillar enlargement, cervical lymphadenitis and the GP give him antibiotic, his conditions deteriorates after 1 day of Rx, then he immediately come to you.)) → It's EBV.

What is your BEST next step to diagnose the case?

- A. Pharyngeal aspiration.
- B. Positive slide agglutination.(SPOT) –EBV infectious mononucleosis. XXXX**
- C. Throat culture.
- D. Antibodies of EBV.

Dr. Salma:

1. ALL the following statements about UTI in children are TRUE, EXCEPT:
 - A. In girls, the first UTI usually occurs by the age of 5 year, with peaks during infancy and toilet training.
 - B. In boys, most UTIs occur during the 1st year of life.
 - C. *E.coli* is the most common pathogen.
 - D. A haemorrhagic cystitis may present w/ haematuria.
 - E. A child w/ sterile bacteruria should be treated w/ a 3rd generation cephalosporin. **XXXX**
2. Regarding U/S (Ultrasonography) imaging of the kidneys, ALL the following statements are TRUE, EXCEPT:
 - A. Is the first standard imaging investigation to be done.
 - B. It's the best way to diagnose hydronephrosis.
 - C. One of its disadvantages is being operator-dependent.
 - D. It's VERY sensitive in showing renal scar. **XXXX**
 - E. It shows well the cortex from the medulla.
3. Regarding PSGN, ALL the following are TRUE statements, EXCEPT:
 - A. follows infection of the throat or skin with certain "nephritogenic" strains of *group A beta-hemolytic streptococci*.
 - B. It's rare before the age of 3 year.
 - C. Renal involvement may vary from asymptomatic microscopic haematuria to acute renal failure requiring dialysis.
 - D. Urinary abnormalities; like microscopic haematuria may persist for 1 year.
 - E. Low C3 present for at least 6 months. **XXXX**
4. Regarding IgA, ALL the following are TRUE statements, EXCEPT:
 - A. Most commonly present with recurrent gross hematuria following URTI.
 - B. It shows Increase serum IgA in around 20% of patients.
 - C. Low C3 & C4. **XXXX**
 - D. 30 % of patients will progress to ESRD.
 - E. Heavy proteinuria > 1g/L is associated w/ poor prognosis.
5. Regarding nephrotic syndrome, ALL the following statements are TRUE, EXCEPT:
 - A. It is characterized by Heavy proteinuria (>40 mg/m²/hr in children).
 - B. (90%) of nephrotic syndrome in children is a form of the idiopathic nephrotic syndrome (INS) while (10%) is secondary.
 - C. MCD (Minimal change disease) accounts for about 20-30 % of cases. **XXXX**
 - D. Theories have shifted towards the podocyte as playing a primary role in the development of proteinuria.
6. Regarding MCD (Minimal change disease), ALL the following statements are TRUE, EXCEPT:
 - A. 90% of cases response to steroids.
 - B. Does NOT progress to end stage renal failure ESRD.
 - C. Serum albumin is < 2.5 g/dL,
 - D. A renal biopsy should be done to ALL patients. **XXXX**

7. Regarding complications of nephrotic syndrome, ALL the following statements are TRUE, EXCEPT:
- A. Infection is the major complication of nephrotic syndrome. Increased susceptibility to bacterial infections owing to urinary losses of immunoglobulins and properdin factor B, immunosuppressive therapy, malnutrition, edema.
 - B. Spontaneous bacterial peritonitis is the most frequent type of infection, mostly as a result of *klebsiella* infection. XXXX**
 - C. Increased risk of thromboembolic events, both arterial and venous.
 - D. Prophylactic anticoagulation is not recommended in children unless they have had a previous thromboembolic event.
8. Regarding ITP, ALL the following statements are TRUE, EXCEPT:
- A. Is the most common cause of acute thrombocytopenia in a previously healthy child.
 - B. Presents 1 to 4 weeks after exposure to a common viral infection.
 - C. Associated w/ Splenomegaly. XXXX**
 - D. In up to 80% of children with acute ITP spontaneous resolution → will be within 6 months.
 - E. The physical examination is normal other than the finding of petechiae and purpura.
9. Regarding von Willebrand Disease (VWD), ALL the following statements are TRUE, EXCEPT:
- A. (VWD) is the most common hereditary bleeding disorder.
 - B. VWF also serves as the carrier protein for plasma factor X. XXXX**
 - C. Patients with VWD usually have symptoms of mucocutaneous hemorrhage, including excessive bruising, epistaxis.
 - D. Type 1 → is the most common type (85%).
 - E. It's characterized by Prolonged bleeding time
10. Regarding DIC (Disseminated Intravascular Coagulation), ALL the following statements are TRUE, EXCEPT:
- A. Associated w/ Prolonged PT, PTT and INR.
 - B. Associated w/ very low platelet count.
 - C. Peripheral blood smear shows → fragmented RBCs (Schistocytes).
 - D. Platelet , cryoprecipitate and FFP infusion is the mode of treatment.
 - E. LOW FDPs. XXXX**
11. Regarding treatment of sever hyperkalaemia, ALL the following could be given, EXCEPT:
- A. Calcium gluconate IV; 100 mg/Kg over 5-10 min.
 - B. Glucose (500 mg/Kg) PLUS Insulin (0.1 IU/Kg); over 30 min.
 - C. Labetolol (0.1-0.3 mg/kg); over 10 min. XXXX**
 - D. Sodium polystyrene sulfonate (1g/Kg); orally or rectally.
 - E. Sodium bicarbonate (1 mEq/Kg); over 10 min.
12. Regarding pre-renal causes of AKI, ALL the following characters are TRUE, EXCEPT:
- A. It is the most common form of paediatric AKI.
 - B. Caused by reduced renal perfusion.
 - C. May be seen in those w/ severe gastroenteritis.
 - D. Renal imaging shows abnormal kidney size. XXXX**

13. The MOST common cause of children CKD (Chronic Kidney Diseases):

- A. Obstructive uropathy.
- B. AD and AR polycystic kidney disease.
- C. Reflux nephropathy. XXXX**
- D. FSGN.
- E. Renal hypoplasia and dysplasia.

14. Regarding CKD-associated bone disease, ALL the following could be seen, EXCEPT:

- A. Hypocalcaemia.
- B. Hypophosphataemia. XXXX**
- C. Decreased Vit. D synthesis.
- D. Hyperparathyroidism
- E. Osteomalacia.

15. Regarding DM in children, ALL the following statements are TRUE, EXCEPT:

In DM type I → there's a reduction in the sensitivity of insulin. XXXX

16. Regarding treatment of DKA as a complication of DM, ALL the following statements are TRUE, EXCEPT:

- A. Fast-acting soluble insulin should be administered as a continuous IV infusion (0.1 U/kg/hr).
- B. An initial IV fluid bolus of normal 3% saline at 10 to 20 mL/kg. XXXX**
- C. Potassium replacement should be given as potassium chloride at a concentration of 20 to 40 mEq/L.
- D. When serum glucose concentrations decrease to less than 250 to 300 mg/dL, glucose should be added to the IV fluids.
- E. Bicarbonate therapy should be avoided unless severe acidosis (pH <7.0) results in hemodynamic instability.

17. Regarding rickets, ALL the following are TRUE regarding laboratory findings, EXCEPT:

- A. Decreased Alkaline Phosphatase. XXXX**
- B. Hypophosphatemia.
- C. Low level of Vit D; 25(OH).

18. Regarding rickets, ALL the following statements are TRUE, EXCEPT:

- A. In type 1 the problem is in the hydroxylation.
- B. In type 2 the problem is in the hydroxylation. XXXX**

19. How much **maintenance fluid** is required for a child who weighs 15 kg?

- A. 1000 ml/24hr
- B. 500 ml/24 hr
- C. 1250 ml/24hr XXXX**
- D. 1500 ml/24hr
- E. 1800 ml/24hr

20. Regarding congenital Adrenal hyperplasia, ALL the following are TRUE, EXCEPT:

- A. The classic form is due to 21-hydroxylase deficiency.
- B. The primary clinical manifestation is the virilization of the external genitalia of the affected female fetus.
- C. Associated w/ hypernatraemia and hypokalaemia. XXXX**
- D. A male infant with this defect appears normal at birth.
- E. Biochemical diagnostic studies show elevated levels of serum 17-OHP.

21.A cause of macrocytic anemia:

- A. Chronic liver disease. **XXXX**
- B. Renal dis
- C. IDA
- D. Thalassemia
- E. Hemolytic anemia

AKI, Fluids & Electrolytes:

1. A 7 month old boy has 3 day history of intolerable vomiting and watery diarrhoea. *He was only able to drink water.* His mother noticed decrease in his urine output over the past 24 hrs. On physical exam he has 39.5 C temperature and heart rate of 190 b/min. His BP is 50/30. He has sunken anterior fontanel. Which one of the following is the MOST Likely type of dehydration he has:
 - a) Moderate hypernatremic
 - b) Moderate hyponatremic
 - c) Moderate isonatremic
 - d) Severe hyponatremic
 - e) **Severe hypernatremic XXXX**
2. Which one of the following is CORRECT about **oral rehydration solution therapy**?
 - a. the choice of treatment with severe vomiting and diarrhoea
 - b. should be given as rapid as possibly tolerated
 - c. **should contain both glucose and electrolytes XXXX**
 - d. content of potassium is greater than 40 mmol/L
 - e. content of sodium is greater than 110 mmol/L
3. One of the following is the most common adverse effect of **furosemide** (Lasix) therapy?
 - a. Hypercalcemia
 - b. Metabolic acidosis
 - c. Hyperchloremia
 - d. **Hypokalemia XXXX**
 - e. Hypernatremia
4. An 8 month old baby girl is brought to the emergency room in status epilepticus. She had severe vomiting and diarrhoea for three days and was only able to tolerate water and cola. Which one of the following is the most likely cause of her seizure?
 - a) Hypoglycaemia
 - b) **Hyponatremia XXXX**
 - c) Hypocalcaemia
 - d) Hypomagnesaemia
 - e) Hypokalemia
5. How much **maintenance fluid** is required for a child who weighs 20 kg? a) 1000 ml/24hr
 - b) 500 ml/24 hr
 - c) 2000 ml/24hr
 - d) **1500 ml/24hr XXXX**
 - e) 1800 ml/24hr
6. How much sodium(in meq / mMol) is required to raise the serum sodium by 5 meq for a child who presented to the emergency room seizing with a sodium level of 115meq/L. His weight is 15 kg.
 - a) **45 meq given slowly over 2-3 hour as hypertonic saline 3 % XXXX**
 - b) 75 meq given slowly over 2-3 hour as hypertonic saline 3%
 - c) 30 meq given slowly over 2-3 hours as hypertonic saline 3%
 - d) 90 meq given slowly over 2-3 hours as hypertonic saline 3%
 - e) 100 meq given slowly over 2-3 hours of hypertonic saline 3%

7. All of the following are known side effects of Angiotensin converting enzyme ACE inhibitor therapy EXCEPT:

- a) Angioedema
- b) Cough
- c) **Hypokalemia XXXX**
- d) Azotemia
- e) Anemia

UTI:

1. A 5 year old girl is seen in the clinic for 1 month history of night time wetting. She was toilet trained and dry at the age of 3 years. Her mother does not recall any other symptoms or illness nor are there any family stresses. Which is the most appropriate next step in evaluating this child?
 - a. Abdominal x-ray
 - b. Measure serum electrolytes
 - c. Psychological evaluation
 - d. Urological referral
 - e. **Obtain a urine analysis and culture XXXX**
2. A 20 day old baby girl who is premature had an episode of urosepsis. Her urine culture grew E.Coli. She was so sick and treated with Ampicillin and Gentamicin. She dramatically improved after 48hr of treatment but on day 4 her creatinine increased from 0.2 mg/dl to 0.9mg/dl. She is receiving adequate amount of fluids and still has a good urine output. Which one of the following is the most likely cause of the creatinine rise?
 - a. Acute pyelonephritis
 - b. Nephrotic syndrome
 - c. Prerenal azotemia
 - d. **Drug toxicity XXXX**
 - e. Stones
3. A 3 month old baby boy has a second episode of febrile UTI. The urine culture grew *Klebsiella*. He has good urine output and his KFT is normal. When he first presented he had fever 39.5C and was vomiting. One of the following is the best treatment course:

	<u>Admission</u>	<u>Antibiotics</u>	<u>Renal US</u>	<u>VCUG</u>
a)	No	oral	yes	in 1 week
b)	No	oral	yes	in 6 weeks
c)	Yes	intravenous	yes	in 1 week XXXX
d)	No	oral	No	in 6 weeks
e)	Yes	intravenous	No	in 6 weeks

4. One of the following microorganisms is the MOST common cause of UTI in children :
 - a. **Escherichia Coli XXXX**
 - b. Klebsiella
 - c. Proteus
 - d. Pseudomonas species
 - e. Group B streptococcus

5. All of the following are TRUE about urinary tract infections in children EXCEPT:
- Patients with cystitis who are not clinically ill can be treated with oral antibiotics.
 - Asymptomatic bacteriuria is very common in girls and always requires antibiotic treatment. XXXX**
 - More common in males in the first year of life.
 - Up to 50% of children will have a recurrent urinary tract infection usually occurring in the first 6-12 months of presentation.
 - The most common pathogen is E.Coli.
6. All of the following antibiotics are good choices for treating **pyelonephritis** EXCEPT:
- Nitrofurantoin XXXX**
 - Cefixime
 - Trimethoprim/sulfamethoxazole
 - Amoxicillin
 - ciprofloxacin

Nephrotic Syndrome:

1. All of the following are TRUE about nephrotic syndrome in children EXCEPT :
- 90% of nephrotic syndrome are idiopathic
 - More common in males than females
 - Heavy proteinuria of 40 mg/m²/hr. is diagnostic
 - Low serum albumin of 2.5 g/dl or less
 - Hypertension and hematuria are characteristic XXXX**
2. All of the following are TRUE about cyclosporine adverse effects EXCEPT:
- Hypertension
 - Hirsutism
 - Gingival hypertrophy
 - Haemorrhagic cystitis XXXX**
 - Neutropenia

Nephritic Syndrome:

1. A previously healthy boy presents to the emergency department with abdominal pain, swelling and pain in his knees and ankles. He has multiple purpuric lesions on his legs and buttock. His exam shows mild nonspecific abdominal tenderness. His BP and pulse rate are normal. His Urine analysis showed 25-50 RBCs/HPF and +1 protein. His serum lytes, albumin, CBC and creatinine are within normal. One of the following is the best next management for this child:
- Measure Ig A level
 - Repeat a urine analysis next morning
 - 24 hour urine collection for protein
 - Schedule a kidney biopsy XXXX**
 - Get complement C3, C4 level
2. A 10 year old African-American boy has 2 day history of back pain and gross hematuria. *His mother and brother in the past had few similar episodes too.* He had no history of trauma, stone passage or any medication use. His physical exam is unremarkable. Which one is the most likely cause of gross hematuria in this child?
- Tumor
 - Papillary necrosis XXXX**
 - Pyelonephritis
 - Haemorrhagic cystitis
 - Glomerulonephritis

3. All of the following **Glomerulonephritis diseases** are associated with POOR renal outcome EXCEPT:
 - a. FSGS (Focal segmental Glomerulosclerosis)
 - b. MCD (minimal change disease) XXXX**
 - c. ANCA positive GN
 - d. Anti GBM nephritis (Goodpasture disease)
 - e. MPGN (Membranoproliferative GN)

4. ALL of the following are required for diagnosing glomerulonephritis EXCEPT:
 - a. Hematuria and RBC cast
 - b. Hypertension
 - c. Renal impairment
 - d. Proteinuria XXXX**
 - e. Edema

5. All of the following are TRUE about **Ig A nephropathy** EXCEPT:
 - a. Mostly presents as recurrent gross hematuria following an upper respiratory tract infection
 - b. An elevated Ig A level is seen in MOST cases XXXX**
 - c. Definite diagnosis is by renal biopsy
 - d. Hypertension and heavy proteinuria indicate poor prognosis
 - e. Serum C3 and C4 level are normal

6. Which ONE of the following indicates the need for a renal biopsy in a child who presents with Post- streptococcal GN (**PSGN**)?
 - a. Hypertension at presentation
 - b. Hematuria at presentation
 - c. Edema at presentation
 - d. Persistently low C3 level after 12 weeks of diagnosis XXXX**
 - e. Recurrence of microscopic hematuria in the first 6 months after diagnosis

Anaemia:

1. Folic acid supplement is required in all pregnant women to prevent ONE of the following:
 - A. Retinopathy of prematurity
 - B. Neural tube defects XXXX**
 - C. Congenital heart disease
 - D. Renal dysplasia
 - E. Skeletal anomalies

2. All of the following are correct about vitamin B12 deficiency EXCEPT:
 - a. A known cause of megaloblastic anemia.
 - b. Older healthy children and adults have sufficient B12 stores for 3-5 years.
 - c. In infants who are strictly breast fed and born to vegetarian mothers the anemia may show at the age of 4-6 months of age.
 - d. In congenital pernicious anemia patients have antibodies to parietal cells. XXXX**
 - e. In congenital pernicious anemia patients, the stomach secretes acid normally.

3. All of the following are known to cause megaloblastic anemia EXCEPT:
 - a. Vitamin B12 deficiency
 - b. Folic acid deficiency
 - c. Infant feeding of mainly goat milk
 - d. Liver disease XXXX**
 - e. Short bowel syndrome

4. A 2 year old baby boy is evaluated for anemia. He has normal growth parameters and no previous illness. His nutrition is good. His physical exam is unremarkable .The following were his lab results : Hb 8.0 mg/dl, MCV 63, RDW 14, RBC count 5.6 million. Blood films

shows microcytic hypochromic RBCs with basophilic stippling. Which one of the following will be your diagnostic investigation?

- a. Serum B12 level
- b. Serum total Iron II
- c. Serum folate level
- d. Thyroid function test (TSH)
- e. **Haemoglobin electrophoresis XXXX**

5. All of the following lab results are consistent with acute hemolysis EXCEPT:

- a. Retic count of 10 %
- b. **High haptoglobin level XXXX**
- c. Normochromic normocytic anemia
- d. High LDH
- e. Spherocytes on the blood film

6. All of the following are causes of microcytic anemia EXCEPT:

- a. Iron deficiency anemia
- b. Thalassemia
- c. Lead poisoning
- d. **Hypothyroidism XXXX**
- e. Hookworm infection

Bleeding Disorders:

1. An otherwise healthy 5 year old child has 1 week of bruises and petechial rash. He has NO hepatosplenomegaly or lymphadenopathy on his exam and looks well. His CBC showed platelet count of $20 \times 10^9 /L$ with a normal Hb and WBC count. Which one of the following is the best next management step?

- a. **Give IV Ig therapy XXXX**
- b. Start corticosteroid therapy
- c. Do a bone marrow aspirate
- d. Send a blood film and ESR
- e. Avoid NSAIDs and Aspirin

Dr. Eyad: (ma darastelo!!! But I remembered those questions)
A 15-year-old boy presents with melena and anemia. Endoscopy demonstrates a nodular gastritis of the antrum and an ulcer. Biopsies of the antrum demonstrate spiralshaped organisms consistent with *Helicobacter pylori* .You prescribe amoxicillin, clarithromycin, and lansoprazole for 2 weeks. At a follow-up visit, the family asks whether the treatment has been successful in eradicating the organism.

Of the following, the **PREFERRED** noninvasive test to evaluate whether the pathogen has been eradicated is

- A. fecal *Campylobacter*-like organisms (CLO) test
- B. **fecal *H pylori* antigen XXXX**
- C. salivary *H pylori* antibody concentrations
- D. serum *H pylori* immunoglobulin G serology

E. serum *H pylori* urease concentrations

2. A 5-year-old girl presents after having a brief generalized seizure. Her mother reports that the child has had a 3-day history of fever, tenesmus, and bloody diarrhea. On physical examination, you find a mildly toxic-appearing child who has a temperature of 104°F (40°C) and diffuse abdominal tenderness. The rectal examination produces significant pain. Stool from her rectum is guaiac-positive. You tell her mother that you believe the diarrhea has an infectious cause.

Of the following, the MOST likely pathogen is

- A. *Cryptosporidium* sp
- B. rotavirus
- C. *Salmonella* sp
- D. *Shigella* sp **XXXX**
- E. *Yersinia* sp

3. A baby with jaundice, vomiting, irritable, exclusive breast milk, reducing substances → (+)ve, lethargic, the MOST likely diagnosis

- A. Galactosemia **XXXX**
- B. tyrosinemia
- C. fructose
- D. G6PD

4. ALL of the following carry GOOD prognosis, EXCEPT:

- A. Hyperpolidy
- B. Hypoploidy **XXXX**
- C. (12:21) translocation
- D. Trisomy 10
- E. Trisomy 7

5. A 1-year old child, his weight → 95% percentile, spitting food from the age of 1month, the MOST likely diagnosis is:

- A. GERD **XXXX**
- B. pyloric stenosis
- C. Partial duodenal atresia
- D. Hypothyroid

6. Patient presented with cyclic vomiting, treated with antiemetics but NOT resolve, then came with bile stained vomiting, the MOST likely diagnosis:

- A. Intussusception.
- B. Superior mesenteric.
- C. Malrotation **XXXX**
- D. Stress ulcer.
- E. Meconium disease.

7. A girl adolescent presented with weight loss, anemia with abdominal pain, the MOST likely diagnosis is:

- A. Anorexia nervosa
- B. IBS
- C. Inflammatory bowel disease **XXXX**
- D. Pelvic inflammatory disease

8. A baby presented with chronic diarrhea maroon stool, the BEST investigation to do is:

- A. Scan for meckel's diverticulum. **XXXX**

B. Colonscopy.

C. US.

D. Air enema.

9. Regarding the Autosomal Dominant type of inheritance, ALL the following statements are TRUE, EXCEPT:

A. MORE common in male than female. XXXX

B. If parent not genotype, not inherited to baby

C. 50% inherited.

10. Regarding Down's syndrome:

A. Narrow ear canal

B. Chronic ear discharge

C. Speech delay

D. All of above are true statements. XXXX

E. NONE of the above are true statements.

11. A principal feature of atopic dermatitis is:

A. Pruritus

B. Increase serum IgE XXXX

C. Immediate reaction to skin testing

D. Present in adolescence

12. A child presented with swelling of the ankle, knee and the wrist; murmur, 1 month ago he had infection with strep A, the MOST likely diagnosis is:

A. Juvenile RA.

B. SLE.

C. Rheumatic fever. XXXX

D. Rheumatoid arthritis

13. Regarding hepatitis A, only ONE statement is TRUE:

A. I.P 50-80 days

B. Transmission occurs parentally.

C. After 6 months → increase bilirubin & LFT.

E. Primary infection comes with fever, malaise. XXXX

13. A 10-year old child with recurrent abdominal pain, flatus, only after drinking milk, your NEXT step is to test the following:

Lactose. XXXX

2012 – 5th year

2. Case history: Newborn with meconium aspiration. First step in management?

- a. Oxygen
- b. Endotracheal tube**
- c. Suctioning

3. Which is not a contraindication to gastric lavage?

- a. Hydrocarbons
- Weak GAG reflex

A & B

4. Which carries the best prognosis in HIE?

- a. Late onset hypocalcemia
- b. Early onset hypocalcemia
- c. Hypogalcaemia

Ans: (???)

5. Not an advantage of cold therapy:

- a. Decreased metabolic rate
- b. Decreased energy stores**

Ans: (B → Energy stores are not depleted → Correct is that it increases energy stores)

6. About complement deficiencies:

- a. Complement... is associated with recurrent Neisseria meningitidis infection
- b. Complement... like syndrome
- c. Complement is associated with angiomas

Ans: (??)

7. Most common cause of pancreatic insufficiency in childhood?

- a. Pancreatic lipomatosis
- b. Cystic fibrosis

Ans: (??)

8. All could be signs of cystic fibrosis in children, except:

- a. FTT
- b. Salt loss
- c. ?
- d. ?
- e. All of the above

Ans: (??)

9. A 10 year old girl with history of ? surgery for biliary atresia now has progressive clumsiness (moving or doing things in a very awkward way.), ataxia, and ???. Diagnosis is

- a. Hepatic encephalopathy
- b. Vitamin E deficiency**

10. Wrong about GERD:

- a. Ph monitoring is the golden diagnosis
- b. Sildenafil is a rare complication
- c. Protective methods from the RS can actually cause problems

Ans: (??)

11. Wrong about measles:

- a. **Exudative conjunctivitis**
- b. Incubation period 5-10 days

12. Wrong about erythema infectiosum:

- a. Exanthema has 3 stages
- b. **Athopathy is more common in children**

13. A virus known to cause rhinorrhea, conjunctivitis, hemorrhagic cystitis, pneumonia:

- a. Rhinovirus
- b. **Adenovirus**

14. Next test you will request after admitting a patient with RSV bronchiolitis:

- a. CBC
- b. Oximetry
- c. **Peripheral blood smear** كان كله ملون احمر ما بعرف ليش

15. A child with S&S of infectious mononucleosis. He has rash which mother says developed after penicillin therapy. Diagnosis is:

- a. **EBV**

16. What should you pay attention to during the evaluation of this child?

- a. **Splenic rupture**

17. Not a risk factors for RDS?

- a. HTN
- b. DM
- c. Prematurity

18. Wrong about rubella:

- a. **Cannot pass the placenta**

19. A child has apnea for 20-30 sec. Glucose is 50 gm/dL, normal calcium. Between attacks, he is normal. The diagnosis is?

- a. **Seizure**
- b. Hypoglycemia

20. Newborn develop cyanosis when feeding. When crying he seems better. A quick test that will allow you to reach a diagnosis?

- a. Echocardiography
- b. **Pass catheter through nose**

Ans: B (He might have congenital choanal atresia)

21. All are risk factors for hyperbilirubinemia, except:

- a. **Increased ligandins**

Ans: Increased ligandins will increase bilirubin uptake by the liver.

22. All are complications of IUGR, except:

- a. Infection
- b. Anemia

Ans: As Dr. Adeil Abul Heija beautiful once defined IUGR, in two words, chronic hypoxia. As a result, you can easily calculate that the end result is polycythemia.

23. Wrong about infant of diabetic mother:

- a. Hypglycemia after birth
- b. Higher risk to develop DM when an adult
- c. Always macrosomic infants

24. Wrong statement about labour complications:

- a. **Caput succedaneum cannot cross the suture lines**

25. Regarding late onset neonatal sepsis:

- a. Most common organism are gram positive in contrast to early onset
- b. ?
- c. Fungal infection can occur?

26. Wrong combination:

- a. School aged children – mycoplasma pneumonia
- b. CP – Anaerobic organism
- c. Neonate – GBS

27. Wrong about HSP:

- a. No specific organism is implicated
- b. The arthritis is deforming and damaging

28. All are cyanotic heart lesions, except:

- a. Truncus arteriosus
- b. Pulmonary atresia
- c. Critical pulmonary stenosis

29. Not a sign in pediatric asthma:

- a. Weight loss
- b. Pulsus paradoxus

Ans: Both weight loss and pulsus paradoxus can occur.

30. Not a drug for treatment of acute asthma exacerbations:

- a. Steroids for 2-3 days
- b. Salbutamol
- c. Ipratrobium
- d. **Montelukast**

31. Wrong about asthma:

- a. **Most children with recurrent wheeze will not develop asthma in latter childhood**
- b. The hallmark is airway hyperresponsiveness and inflammation
- c. Hypoxia develop late in exacerbation due to V/Q mismatch

32. Wrong about VSD:

- a. Prophylactic antibiotic is indicated in VSD
- b. **Right axis deviation and right sided heart failure**
- c. Loud S2 and S3

Ans: B (Left axis deviation and LVH.)

33. Case history: Child with S&S of croup. Wrong about the condition that this child has:

- a. The most common organism is parvovirus
- b. You need a lateral neck x-ray
- c. Most common from 5 months to 5 years
- d. More common in winter
- e. A common infectious cause of airway obstruction

34. Correct combination:

- a. Salmonella – Erythromycin
- b. Campylobacter jejuni – Ceftriaxone
- c. Clindamycin – stop antibiotic and start metronidazole?

35. Which vaccine is not given to a child with?

- a. Measles
- b. DPT
- c. Hepatitis B

36. An 8 yo child with painless rectal bleeding and foul smelling flatus. He has abdominal distention. Test that you will request to reach a diagnosis?

- a. Colonoscopy
- b. Micturition scan
- c. Stool analysis

37. Wrong about Von Willebrand disease:

- a. Prolonged PT
- b. Prolonged BT
- c. ?

- PT, PTT, increased bleeding time, but normal aggregation. Bernard-Soulier has a similar presentation except lab also shows decreased platelet count. In severe vWD, PTT might be prolonged (somatic hemophilia)

38. Wrong about hemophilia A:

- a. Prolonged PT
- b. Prolonged PTT

A → PT is normal.

39. Wrong combination:

- a. Folic acid deficiency – Hypersegmented neutrophils
- b. Diamond blackfan –
- c. ?

Ans: Megaloblastic anemia → Hypersegmented neutrophils

40. Wrong about iron deficiency anemia:

- a. Most common hematological complaint
- b. Present at 4 months for term infants
- c. Iron from cow milk is harder to be absorbed than breast milk

All are correct.

41. Not a necessary test for a child with nephrotic syndrome:

- a. Creatinine
- b. Urine analysis
- c. Kidney biopsy

All are correct.

42. Wrong about post-strep GN:

- a. Complement level is normal at presentation

43. The mechanism of edema in GN is:

- a. Salt and water retention

44. For the diagnosis of nephrotic syndrome, you need:

- a. Edema
- b. Hyperlipidemia
- c. Proteinuria >40 mg/kg?

45. A 3 month old girl with UTI, the second time, she is doing well. Wrong about management:

- a. Hospital admission
- b. Cefuroxime is the empirical treatment
- c. Duration of treatment is 7-10 days
- d. Prophylactic treatment is not needed so far
- e. Do a cystourethrogram

46. Not a drug for treatment of absent seizure:

- a. Ethosuximide
- b. Carbamazepine
- c. Valproic acid

47. Wrong about the use of ?

- a. Sertaline is serotonine receptor antagonist

48. Not a cause of functional headache:

- a. Subdural hematoma
- b. Benign intracranial hypertension
- c. Migraine

49. Wrong about CRF:

- a. The cause of hypocalcemia is hypoparathyroidism
- b. FGR of 67 is stage II

50. Wrong about pre-renal ARF:

- a. Urine sodium <20
- b. FeNa <1%

51. Wrong about Kawasaki:

- a. Aspirin is indicated as anti-thrombotic and anti-inflammatory
- b. Echocardiography at least once

Both are true

52. Wrong about treatment of fever in children:

- a. Aspirin is the drug of choice

53. Which of the following doesn't support the diagnosis of CP over a progressive neurological condition:

- a. Hepatosplenomegaly
- b. Clonus and increased DTR \ decreased???

54. Which of the following does not help in diagnosing TB?

- a. Positive tuberculin test
- b. Family member
- c. Weight loss
- d. Finding on Chest x-ray

55. The most common cause of UTI in children is:

- a. E. coli

56. Which of the following antibiotics does not cover G-ve organisms:

- a. Ciprofloxacin
- b. Flucloxacillin
- c. ?

57. Child 2 days old was well but now cyanotic and has machinery like murmur in the left???

Management is:

- a. Indomethacin
- b. PGE-1

58. Not expected at one year for a child:

- a. Skull circumference of 43

59. Expected head circumference in a normal newborn whose height is 50th percentile, length 50th percentile is:

- a. 35 cm

60. Not a characteristic feature of systemic RA:

- a. Hepatosplenomegaly
- b. RF is usually positive

Ans: B (RF is negative)

61. 8 year old healthy child, well with no complaints, presented with painless skin rash.

Platelet count is 25 thousands. Next step in management:

- a. IV IG
- b. Platelets transfusion

62. Wrong about salmonella treatment:

- a. Previous antibiotic treatment for other reason is protective

63. Wrong about X-linked agammaglobulinemia:

- a. Palpable lymph nodes and enlarged tonsils??

64. Wrong about febrile seizures:

- a. Usually associated with developmental delay
- b. You need to rule out infectious causes

65. A child being treated with OM since 5 days with Ampicillin? CSF analysis: revealed:

decreased glucose, increased protein, increased WBCs 85% of which is polymorphonuclear leukocytes. Diagnosis is:

- a. TB
- b. Partially treated bacterial
- c. Lyme disease
- d. Viral

66. Wrong about ADHD:

- a. Usually develops before 3 years of age

67. 5-all the following are predictive of adverse outcome of epilepsy except

- A. multiple type of seizures .
- B. association with cognitive impairment.
- C. recurrent status epilepticus.
- D. late age of onset .xxxxx
- E. high rate of seizures

- 68.1- The following statements about short stature in children are correct except one,
- A. Defined as height below the 3rd centile of age.
 - B. Bone age is delayed in constitutional short stature and normal height velocity.
 - C. In familial short stature ,bone age is not consistent with chronological agexxxxx.**
 - D. The commonest diagnostic cause of short stature in girls is Turner syndrome .
 - E. Arrested growth with previous normal growth is normal in chronic illness.
- 69.-In treatment of DKA which one of the followings is wrong?3
- A. A loading I.V insulin dose is to be given immediately.xxxxx**
 - B. Normal saline (0.9%Nacl)is the ideal fluid should be used as first replacement fluid.
 - C. Start replacing Potassium after initial volume expansion &urine out put is documented before starting insulin therapy.
 - D. NaHCO₃ must not be given unless patients with severe acidemia(arterial Ph<6.9).
 - E. Antibiotics should be given to febrile patients after obtaining appropriate cultures of body fluids.
- 70.-The following statements about puberty are true except one, 4
- a. FSH is the first hormone to be secreted by both sexes.
 - B. b.Pulstile GnRh release is necessary for gonadotrophin secretion.
 - C. c.After the Menarche only 3-5cm of growth remains.
 - D. d.Congenital adrenal hyperplasia is a common cause of pseudo-precocious pubrty in girlsxxxxx**
 - E. e. Functional follicular cyst is a common cause of pseudo-precocious pubrty in girls.
- 71.-The following statements are correct except one,5
- A. There is no placental transfer of Iodine.xxxxxxxx**
 - B. Most infants with congenital hypothyroidism have no goiter.
 - C. Growth failure & Delayed osseous maturation are important clinical features of acquired hypothyroidism in children.
 - D. In congenital hypothyroidism if the defect is primarily in the thyroid gland, levels of TSH are elevated.
 - E. In cogenital hypothyroidism serum levels of T4 are low, serum levels of T3 may be normal & are not helpful in the diagnosis.
- 72.Poor prognostic features of ALL are the followings except one,6
- A. a.Age less than 2years&more than 10 years.
 - B. b.males.
 - C. High white blood count on presentation,>100,000/microL.
 - D. d.Chromosomal abnormalities, the Philadelphia chromosome.
 - E. e.If the patient responds to the initial appropriate therapy in less than one month.xxxxxx**
- 73.The following statements about malignancy in children are true except one
- A. a.Intrauterine exposure to X-Rays of 3 rads may cause tumour.
 - B. b.Immunosuppressive therapy increases risk of malignancy in children.
 - C. c.Intra thecal chemotherapy may cause meningitis.
 - D. d.Radiotherapy for non-malignant conditions carries No risk.xxxxxxx**
 - E. e.Myeloblastic leukaemia is not common in younger age groups.

74.11-In Rickets the following biochemical changes are true except one :

- A. Serum phosphate decreases in vitamin D dependent rickets
- B. Serum alkaline phosphatase activity is elevated in all types of rickets
- C. Serum 25(OH)vit D decreases in Nutritional rickets
- D. Serum Calcium is usually normal in nutritional rickets
- E. Serum phosphate decreases in renal osteodystrophy xxxxxxx**
The doctor changed options.. Option e was now increased

75.13-The followings are causes of secondary immune deficiency except one which is a primary immune deficiency disease :

- A. Malnutrition
- B. Nephrotic syndrome
- C. Chronic granulomatous disease xxxxxx**
- D. Sickle cell disease
- E. HIV

76.Wrong about meningitis:

- a. 20% has complications like hydrocephalus, MR, and...

77.Not a risk factor for GBS of newborn:

- a. Ruptured membranes of 12 hours**
- b. Age <20 years
- c. Preterm birth
- d. Asymptomatic bacteriuria

Ans: A (>18 hours)

78.Wrong about enzyme deficiency in intestinal wall:

- a. Fating improves condition**
- b. Biospy is needed for diagnosis
- c. Presence of reducing substance in stool
- d. Acidic stool

79.Child with psorasiform lesions on oral, perineal, hands, cause is:

- a. Acrodermatitis enteropathica

80.Wrong about HIT:

- a. High systemic Blood pressure
- b. Cardiac enlargement and Heart failure

81.First step in for management of hypoglycemia of newborn is:

- a. Glucose 20 mg
- b. Glucose 40 mg** **كله كان احمر**

82.Daily maintenace of a 20 kg child who was admitted for appendectomy:

- a. 1500 0.9% NS
- b. 1500 0.45% NS
- c. 1500 0.45% NS G5W

83.Not used in management of hypoxic spell of tetralogy of fallot:

- a. Morphine
- b. Hydraliazine**

84.Child 15 months... Question about a child with ? Answer is related to celiac?

- a. Serum antibodies
- b. C6-C3? C.IgA

85. In the previous question, which of the following is associated with better prognosis?

- a. Down syndrome
- b. IgA deficiency

86. Normal anion gap is present in:

- a. Salicylate poisoning
- b. Diarrhoea
- c. Metabolic disorders
- d. DKA

87. A child presented with signs and symptoms of DKA. Wrong statement:

- a. Hyperglycemia and ketonemia to confirm the diagnosis

Fasting blood glucose is necessary to diagnose type

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- In the majority of children, the anterior fontanel is closed by:
 - 8 months
 - 10 months
 - 12 months
 - 14 months
 - 18 months***
- All of the following statements about cephalhematoma are correct EXCEPT:
 - May cause anemia.
 - May cause hyperbilirubinemia.
 - It crosses the suture lines.***
 - Aspiration is contraindicated.
 - It is subperiosteal bleeding.
- Complications of birth asphyxia may include any of the following EXCEPT:
 - Convulsions.
 - DIC.
 - NEC.
 - Pulmonary hypertension.
 - Retrolental fibroplasias.***
- Erb's palsy is due to traction damage OF:
 - First & second cervical nerves.
 - Second & third cervical nerves.
 - Third & fourth cervical nerves.
 - Fifth & sixth cervical nerves.***
 - Seventh cervical & first thoracic nerves.
- During examination of a newborn at 5 minutes of age, you found that she has ambiguous genitalia, heart rate of 90/minute, respiratory rate 30/minute irregular, very pale, cough during nasal suctioning, all limbs are flaccid, her Apgar Score is:
 - 4***
 - 5
 - 6
 - 7
 - 8
- One week old female newborn has swollen breasts that oozing milk, the best management is:
 - Hot compresses.
 - Reassurance of parents and observation.***
 - Express the milk daily.
 - Give antibiotics.
 - Consider hormone therapy.
- All of the following are suggestive of a large ventricular septal defect EXCEPT:
 - Heart failure.
 - Cardiomegaly.
 - An ejection systolic murmur over the base.***
 - Failure to thrive.
 - Tachypnea.

8. In Fallot tetralogy, all of the following are true EXCEPT:
- A. Cyanosis usually occurs at birth.*
 - B. Iron deficiency anemia increases the risk of hypoxic spells.
 - C. Hypoxic spells occur on crying.
 - D. Hypoxic spells may be treated with morphine.
 - E. Beta adrenergic blockers are helpful for hypoxic spells.
9. A three years old child can do all the followings EXCEPT:
- A. Rides tricycle.
 - B. Hops on one foot.*
 - C. Knows his sex.
 - D. Knows his age.
 - E. Can tell a story.
10. Full head support in a normal baby is achieved at age of:
- A. months.
 - B. months.
 - C. months.*
 - D. months.
 - E. 9 months.
11. Comparing breast milk to whole cow milk, all are true EXCEPT:
- A. Contains less protein.
 - B. Contains less lactose.*
 - C. Contains same amount of fat.
 - D. Same calories.
 - E. Lower calcium phosphorus ratio.
12. All of the following signs and symptoms may present in diabetic ketoacidosis in children EXCEPT:
- A. Severe abdominal pain.
 - B. Kussmaul breathing.
 - C. Diarrhea.*
 - D. Vomiting.
 - E. Dehydration.
13. Clinical presentation of congenital hypothyroidism include all of the following EXCEPT:
- A. Prolonged jaundice.
 - B. Developmental delay.
 - C. Stunted growth.
 - D. Hypertonia.*
 - E. Umbilical hernia.
14. Scars in the kidneys are best diagnosed by:
- A. Renal ultrasound.
 - B. IVP.
 - C. DMSA scan.*
 - D. Abdominal CT scan.
 - E. Kidney MRI.

15. All of the following vaccines can be given during the first year of life EXCEPT:

- A. Hepatitis A.*
- B. Hepatitis B.
- C. BCG.
- D. Hib.
- E. Measles.

16. The main goal of management of gastroenteritis with severe dehydration in children is to

- A. Correct the PH.
- B. Correct hypoglycaemia.
- C. Rehydration.*
- D. Correct hypokalemia.
- E. Correct hypocalcaemia.

17. Common presentations of inborn errors of metabolism include all the following EXCEPT:

- A. Metabolic acidosis.
- B. Persistent vomiting.
- C. Constipation.*
- D. Failure to thrive.
- E. Development delay.

18. Sensation is affected in all the following conditions EXCEPT:

- A. Guillane Bare syndrome
- B. Transverse myelitis
- C. Spinal cord tumor
- D. Poliomyelitis*
- E. Brachial palsy

19. All of the following are associated with Down syndrome EXCEPT:

- A. Flat occiput
- B. Brush field spots
- C. Hypertelorism
- D. Protruding tongue
- E. Macrocephaly*

20. All of the following are autosomal recessive disorders EXCEPT

- A. Cystic fibrosis
- B. Galactosemia
- C. G6PD*
- D. Wilson disease
- E. Infantile polycystic disease

21. All of the following are associated with microcytosis EXCEPT;

- A. Alpha thalassemia
- B. Chronic infections
- C. Pica
- D. Pyruvate deficiency*
- E. Iron deficiency

22. All the following conditions are associated with thrombocytopenia EXCEPT;

- A. Hypersplenism
- B. Kawasaki disease***
- C. Heparin therapy
- D. Mononucleosis
- E. Brucellosis

All of the following are features of G6PD deficiency EXCEPT;

- B. Red urine
- C. Jaundice
- D. Splenomegaly***
- E. Low serum haptoglobin level
- F. Reticulocytosis

23. All of the following statements are true in a one year old baby EXCEPT

- B. Average wt 10 kg
- C. Average height 87 cm***
- D. Average HC 47 cm
- E. Erupted teeth 4-6
- F. Can walk alone

24. Regarding chickenpox all are true EXCEPT;

- A. The rash is polymorphic
- B. Incubation period is 2-3 weeks
- C. The disease is worst in the newborn
- D. The disease is milder in adults***
- E. The vaccine is available

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Dr. Hussam

2. Which of the following statements regarding pertussis vaccine is correct
 - a. it is a live vaccine
 - b. Contraindicated in Down's syndrome.
 - c. **Given as triple vaccine combined with diphtheria and tetanus vaccines**
 - d. Given at 4, 6 and 8 months of age
 - e. Given as a booster prior to school entry.

3. Regarding nerve injury at birth, which of the following statements is correct;
 - a) **Injury of C5, C6 may cause an Erb's paralysis**
 - b) Facial nerve paralysis is usually bilateral
 - c) Damage to C1,C2 causes Klumpke's paralysis
 - d) Horner's syndrome is due to C8,T1 injury.
 - e) The arm in Klumpke's paralysis is held in waiter's tip position.

4. Causes of unconjugated hyperbilirubinemia include all the following except:
 - a. Cephalhaematoma.
 - b. Hereditary spherocytosis.
 - c. **Giant cell hepatitis of the newborn.**
 - d. Meconium plug.
 - e. Breast milk jaundice.

5. Clinical features of hydrocephalus in infancy include all the following except:
 - a) Rapidly increasing head circumference (OFC).
 - b) Dilated scalp veins.
 - c) Papilloedema
 - d) Large anterior fontanelle.
 - e) **Restriction of upward gaze.**

6. Regarding cerebrospinal fluid (CSF) findings which one of the following is true:
 - a) Glucose is low in viral meningitis
 - b) Protein is low in bacterial meningitis
 - c) Glucose is normal in TB meningitis
 - d) **Lymphocytes are raised in TB meningitis**
 - e) Lymphocytes are increased in bacterial meningitis

7. A 4 year old boy should be able to do all the following except
 - a) Ride a tricycle
 - b) **Copy a hexagon.**
 - c) Do up buttons.
 - d) Skip.
 - e) Go to the toilet alone.

8. Laboratory features of HIV include all the following except:
 - a) Hypergammaglobinemia
 - b) Thrombocytopenia.
 - c) **Polycythemia.**
 - d) Low CD4 numbers.

9. All the following are complications of Epstein-Barr virus infection except:

- a) Hepatitis
- b) **Acute renal failure**
- c) Splenic rupture
- d) Thrombocytopenia
- e) Encephalitis.

10. Clinical features of measles include all the following except:

- a) Conjunctivitis
- b) Dry cough
- c) Koplik's spots on the buccal mucosa.
- d) **Incubation period of 14-21 days.**
- e) Maculopapular rash.

11. Regarding hepatitis A all the following statements are correct except:

- a) Is spread by fecal-oral rout
- b) **May spread antinately from mother to fetus.**
- c) Does not lead to carrier state.
- d) Is a cause of aplastic anemia.
- e) May lead to prolonged cholestasis

12. Developmental warning signs (red flags) include all the following except:

- a) Loss of previously acquired skills.
- b) Hand preference at 5 months.
- c) Inability to walk independently at 12 months.
- d) Persistent Moro reflex by 6 months.
- e) nystagmus at 3 months.

13. Features of biliary atresia include all the following except

- a) Spontaneous hemorrhage.
- b) White stools.
- c) Hepatosplenomegally.
- d) Situs inversus.
- e) **Autosomal dominant inheritance.**

14. Pathogens responsible for acute gastroenteritis include all the following except:

- a) Shigella sonni.
- b) Campylobacter: jejuni
- c) Giardia lambilia
- d) **Coxsachi virus A 16**
- e) Entamoeba histolytica.

15. Which of the following statements is true in neonatal physiological jaundice:

- a) Does not occur in premature infants
- b) Appears during the first 24 hours of life.
- c) Maximum serum bilirubin level of 17 mgm/dl in full term baby..
- d) Begins to fade within the third or fourth week of life.
- e) **Is associated with decreased red blood cell survival.**

16. Gastrointestinal complications of cystic fibrosis (CF) include all the following except:

- a) Rectal prolapse.
- b) Neonatal meconium ileus
- c) **Malrotation of the gut.**
- d) Malabsorption
- e) Recurrent abdominal pain

17. All the following are recognized causes of convulsions in the neonatal period except:

- a) Hypocalcaemia
- b) Maternal opiate abuse
- c) Hemorrhagic disease of the newborn
- d) **Hypothyroidism**
- e) Hypoglycemia.

18. Choose the correct answer regarding transient Tachypnoea of the newborn:

- a) Must settle within the first 4 hours of life.
- b) **Is more common following caesarian section delivery.**
- c) Can be distinguished from group B streptococcal infection on CXR.
- d) Due to delayed surfactant production.
- e) Should be treated with antibiotics may cause serious disease in the newborn.

19. The following statements regarding hypoglycemia in the newborn are true, except:

- a) Occurs more frequently in large-for-dates babies of diabetic mothers
- b) Occurs more frequently in low birth weight babies for their gestational age
- c) In newborn babies with hemolytic disease due to Rh incompatibility
- d) Causes attacks of apnoea and cyanosis.
- e) **Does not occur in babies who have been fed early.**

20. Which of the following statements regarding Rota virus gastroenteritis in infants is incorrect:

- a. Its incubation period is 48-72 hours
- b. Fever is a prominent feature
- c. Respiratory symptoms are present in one third of the cases
- d. Glucose-stimulated sodium transport is impaired
- e. **Intracellular cyclic AMP levels are reduced.**

21. Regarding hemophilia B (Christmas disease) which of the following statements is true:

- a) Tends to have more severe clinical manifestations than hemophilia A.
- b) Is treated with regular administration with cryoprecipitate
- c) Is an autosomal recessive inheritance.
- d) Is treated with desmopressin
- e) **is asymptomatic in carriers.**

22. All the following conditions predispose for the development of neonatal idiopathic respiratory distress syndrome except:

- a) Infants of diabetic mother.
- b) Babies delivered by caesarian section.
- c) Premature babies.
- d) **Prolonged rupture of the membranes.**
- e) Babies delivered after antipartum hemorrhage

23. A 9 months old baby should be able to do all the following except:

- a) **Build a tower of 3-4 cubes**
- b) Sit unsupported
- c) Reach out for objects
- d) **Demonstrate a pincer grasp**
- e) Can crawl

24. All the following are clinical manifestations of moderate dehydration except:

- a) Rapid thready pulse
- b) sunken eyes
- c) **Bulging anterior fontanelle**
- d) Loss of skin turgor
- e) excessive thirst

25. In which of the following types of gastroenteritis blood and mucous is usually found in the stools:

- a) Viral gastroenteritis
- b) Enteropathogenic E. coli gastroenteritis
- c) Salmonella infection
- d) **Infection with entamoeba histolytica**
- e) Giardiasis

26. Treatment with antibiotics is indicated in the treatment of all the following conditions except:

- a) Neonatal gastroenteritis
- b) **Viral gastroenteritis**
- c) Gastroenteritis in baby less than 3 months old
- d) In shigellosis
- e) In giardiasis.

27. In hypernatremic dehydration all the following statements are correct except:

- a) **Hypotension is an early clinical feature.**
- b) Doughy feeling of the skin and abdomen.
- c) Rehydration should be done slowly over 48 hours
- d) hypotonic rehydration solution should not be used.
- e) Serum sodium is usually more than 150meq/ L .

28. All of the following are appropriate in the initial assessment of failure to thrive except:

- a) Diet history
- b) Social history
- c) Measurement of height, weight and head circumference.
- d) **Growth hormone level.**
- e) Bone age x-ray.

29. Choose the incorrect statement regarding acute laryngotracheobronchitis (croup) :

- a) Para influenza virus is a common causative agent.
- b) A "barking" cough is a prominent feature.
- c) Highest incidence at the age of 2 years.
- d) **Restlessness indicate good respirator effort**
- e) Nebulized adrenaline may give temporary relief

30. In the management of acute gastroenteritis all the following statements are incorrect except:
- a) Breast feeding should be discontinued for 24 hours.
 - b) Oral rehydration solution is effective in rehydration of most moderately dehydrated patients.
 - c) Oral rehydration solutions contain 80mmol/L.
 - d) Antidiarrhoeal agents are indicated if stool losses are severe
 - e) Acidosis during severe dehydration should be corrected with i.v sodium bicarbonate.
31. Regarding hereditary spherocytosis all the following statements are incorrect except:
- a) Inheritance is autosomal dominant.
 - b) The direct coomb's test is usually positive.
 - c) Regular blood transfusion is required
 - d) Hemolysis may be precipitated by fava beans
 - e) Splenectomy is the treatment of choice in the first decade of life
32. Choose the correct statement regarding hemophilia A:
- a) A family history is commonly obtained..
 - b) Factor V111 level 20% of normal is associated with severe bleeding problems
 - c) Desmopressin does not reduce bleeding during dental extraction.
 - d) Physiotherapy is contraindicated after joint bleed.
 - e) Factor V111 related antigen level is low.
33. Features which suggest that a 10 year old child with acute asthma is having a severe attack include all the following except:
- a) An inability to speak in a complete sentence.
 - b) Respiratory rate of 15/min.
 - c) Bilateral wheeze
 - d) A normal arterial pco2
 - e) Confusion.
34. Congenital rubella infection has been associated with all the following except:
- a) cataract
 - b) pleocytosis of the cerebrospinal fluid
 - c) Optic nerve hypoplasia
 - d) Congenital heart lesion
 - e) Deafness.
35. Regarding neonatal convulsions all the following statements are correct except:
- a) They can be exacerbated by external stimuli
 - b) generalized tonic seizures without EEG changes do not respond to anti-convulsant therapy
 - c) Focal tonic seizures are usually associated with EEG changes
 - d) Myoclonic seizures are most commonly seen with metabolic disturbances.
36. Seizures due to hypoglycemia have an excellent prognosis.
The following statements regarding neonatal infection are true except:
- a) Hypothermia is a recognized sign of gram- negative septicemia
 - b) Jaundice is a ognized sign.
 - c) Fresh breast milk provides better protection than sterilized breast milk.
 - d) The incidence of neonatal infections can be reduced by having all newborn babies nursed in a single nursery.
 - e) Organisms normally regarded as commensals may cause serious disease in newborns.

37. The following are features of hemolytic anemia except:

- a) Reticulocytosis
- b) Low haptoglobin level
- c) **Raised conjugated bilirubin**
- d) **Normochromic erythrocytes**
- e) Urobilin in the Urine

38. Which of the following statements regarding B thalassemia is true:

- a) The infant is anemic at birth.
- b) Fetal hemoglobin is raised at the time of diagnosis.
- c) The likelihood of sibling being affected is 1 in 2.
- d) There is defect in synthesis of hemoglobin A .
- e) Desferoxamine should not be given until after the age of one year because of toxic effect.

39. The following statements regarding hereditary spherocytosis are true except

- a) It is inherited as autosomal dominant
- b) Red cell osmotic fragility is increased
- c) **Intravascular hemolysis is a common feature**
- d) Aplastic crises occur due to parvovirus infection
- e) The symptoms are relieved by splenectomy

40. An infant or child whose spleen has been removed following traumatic rupture has an increased risk of developing which one of the following:

- a) Thrombocytopenia
- b) Hemolytic anemia
- c) Leukemia
- d) Polycythemia
- e) **Severe bacterial infection.**

41. Regarding Henoch-Schonlein purpura which of the following statements is false:

- a) **Thrombocytopenia**
- b) Microscopic hematuria may persist for more than a year
- c) Intussusception is a recognized complication
- d) The arthritis may lead to joint deformity*.
- e) There is evidence to suggest that it is an immune complex disease.

42. All the following signs may be present in infant with congenital dislocation of the hip except:

- a) asymmetrical thigh folds.
- b) Limitation of abduction of the hips
- c) **Absent femoral pulse**
- d) Crying due to pain on movement of the leg
- e) Ortolani or Barlow maneuver

43. Causes of iron deficiency anemia in a 2 years old child include all the following except:

- a) Consumption of more than one litre of milk a day.
- b) Feeding fads
- c) **Acute glomerulonephritis**
- d) Coeliac disease
- e) Prolonged breast feeding

44. Foreign body in the respiratory passages can cause all the following except:
- Atelectasis
 - Unilateral pulmonary hyperinflation
 - Mediastinal displacement to opposite side**
 - Wheezing
 - Recurrent chest infection.
45. Which of the following statements is true regarding meningococcal meningitis:
- Penicillin is the drug of choice for chemoprophylaxis.
 - The meningococci can be cultured from hemorrhagic skin lesion
 - Adrenal hemorrhage is a recognized complication**
 - Neurological complications are less likely in early treated meningococcal meningitis than following other bacterial meningitis
 - Blood cultures are positive in most patients.
46. In which of the following hemolytic disease of the newborn the Coomb's test is usually positive:
- G6PD deficiency.
 - Rh isoimmunization**
 - Hereditary spherocytosis
 - ABO incompatibility
 - B thalassemia
47. Prolonged unconjugate hyperbilirubinemia occur in all the following except:
- Breast milk jaundice
 - Hypothyroidism
 - Galactosemia
 - Biliary atresia**
 - Crigler Najjar syndrome.
48. Megaloblastic anemia is likely to occur in which of the following infants:
- Fed on soya formula
 - Exclusively breast fed
 - Under going resection of the ileum**
 - With gastro-oesophageal reflux
 - With colostomy for Hirschsprung disease
49. In acute lymphoblastic leukemia in children all the following statements are true except:
- Is the most common childhood malignancy
 - Is accompanied by splenomegaly in more than half newly diagnosed cases
 - Is excluded if blast cells are not seen in peripheral blood film**
 - Central nervous system complications are common in relapse
 - Treatment places the child at great risk from infection
50. In ABO incompatibility all the following statement are true except:
- ABO incompatibility is the most common isoimmune hemolytic disease of the newborn.
 - Women of blood group O accounts for the vast majority of ABO incompatibility.
 - Usually it does not occur in the first pregnancy.**
 - Jaundice usually appears in the first 24 hours.
 - The direct coomb's test on the infant's blood is usually negative.

51. Regarding prevention of Rh isoimmunization all the following statements are correct except:

- a) Anti-D gammaglobuline should be given in a dose of 100-200microgram within 72 hours of delivery to all Rh negative women who give birth to Rh positive infant.
- b) **Anti-D gammaglobulin should be given to Rh negative mothers with positive indirect coomb's test.**
- c) Anti-D gammaglobulin should be given after abortion in at risk Rh negative women.
- d) Should be given to at risk Rh negative women after aminiocentesis.
- e) Anti-D gammaglobulin is ineffective against non D Rh negative antigen (C,E)

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Q about celiac disease:

- 1) All of following are correct about celiac disease except;
 - a. The injury is greatest in the proximal small bowel
 - b. About 70% of patients are improved within first two weeks of free gluten diet
 - c. The most common period of presentation is between 6 mo and 2 yr
 - d. Autoimmune thyroiditis is an associated conditions
 - e. **Decline in alkaline phosphatase level**

- 2) All of the following are correct regarding nocturnal enuresis except
 - a. Nocturnal enuresis is the involuntary loss of urine that occurs only at night
 - b. Children are not considered enuretic until they have reached five years of age
 - c. To establish the diagnosis, a child of five to six years old should have two or more bed-wetting episodes per month.
 - d. Wetter children have not been found to have an increased incidence of emotional problems.
 - e. **About 0 percent of children are bed wetter over all the world**

- 3) The most effective treatment for nocturnal enuresis is
 - a. **Bed-wetting alarm.**
 - c. Antidiuretic hormone
 - d. Areward system for dry nights.
 - e. Bladder training.
 - f. love and support.

- 4) All of the following are correct regarding hypothyroidism except
 - a. Stopping thyroxin at 3 years for 3-4 weeks with marked increase of TSH confirm the diagnosis
 - b. **Cardiomegally is one of the clinical manifestations**
 - c. Muscle hypotrophy is not rare
 - d. Twice common in girls
 - e. Defect of thyroglobulin synthesis expressed by increase TSH and low T4

Collection of questions:

1. Clinical features of hydrocephalus in infancy includes all the following except:
 - a. Rapidly increasing head circumference (OFC).
 - b. Dilated scalp veins.
 - c. Papilloedema
 - d. Large anterior fontanelle.
 - e. Restriction of upward gaze. xxx
2. Laboratory features of HIV include all the following except:
 - a. Hypergammaglobinemia .
 - b. Thrombocytopenia.
 - c. Polycythemia. xxx
 - d. Low CD4 numbers.
 - e. Neutropenia.
3. Regarding CRETINISM , one is correct :
 - a. dysgenesis is by far the most common cause xxx
 - b. incidence is 1 / 40,000 live births
 - c. diarrhea is common presentation
 - d. appetite is voracious
 - e. small birth weight
4. Seizures in neonate can present in any of the following type , except :
 - a. subtle
 - b. clonic
 - c. generalized tonic – clonic xxx
 - d. myoclonic
 - e. tonic
5. The drug of choice for neonatal seizure is:
 - a. carbamazepine
 - b. valproic acid
 - c. phenobarbitone*xxx
 - d. midazolam
 - e. phenytoin
6. For the differential diagnosis of SOMOGYI and DAWN phenomeneae, we need to check blood sugar,
 - a. 3 am and 7 am*xxx
 - b. 6 am and 12 midnight
 - c. 6 am and 6 pm
 - d. 12 mid-day and 12 midnight
 - e. 6 hrs interval
7. All these features can present in KAWASAKI's disease except:
 - a. bilateral bulbar conjunctivitis without exudates
 - b. strawberry tongue
 - c. desquamation of fingers
 - d. axillary lymphadenopathy* xxx
 - e. polymorphic skin rash primarily truncal
8. Regarding Enuresis, one is correct :
 - a. most children achieve bladder control during day and night by the age of 5 yrs*xxx
 - b. organic causes present in more than 50% of cases
 - c. female predominate
 - d. no spontaneous resolution
 - e. secondary enuresis > 90 % of cases

9. Regarding DIABETES MELLITUS , one is correct :
- improved control decrease complications*xxx**
 - caloric mixture compromise 55% Fat, 15% carbohydrate and 30% protein
 - insulin requirements increase during Honey- moon period
 - no need for insulin during febrile illness
 - hypersensitivity to human insulin is common
10. Nephritic syndrome includes all the following, except:
- gross hematuria
 - edema
 - hyperlipidemia xxx**
 - hypertension
 - albuminuria (proteinuria)
11. Regarding precocious puberty one is correct :
- onset before 9 yrs in female
 - onset before 10 yrs in males
 - most cases in females are idiopathic xxx**
 - congenital adrenal hyperplasia is a cause of delayed puberty
 - leads finally to tall stature
12. Major manifestations of rheumatic fever include all the following, except:
- migratory arthritis
 - carditis
 - erythema multiforme*xxx**
 - subcutaneous nodules
 - chorea
13. Regarding secondary prophylaxis for rheumatic fever, one is correct:
- drug of choice is long acting penicillin*xxx**
 - metronidazole can be used in case of penicillin sensitivity
 - patients need no prophylaxis for dental surgery if there is evidence of rheumatic heart disease
 - duration is life long in all cases
 - oral prophylaxis is enough
14. Regarding rheumatic fever, one is correct :
- peak age is 5-15 yrs*xxx**
 - it is a rare cause of acquired heart disease in developing countries
 - no association with HLA markers
 - complication of streptococcal infection (beta hemolytic group B)
 - joint involvement leads to deformity
15. All considered steps in enuresis management, except:
- star chart
 - punishment*xxx**
 - conditioning device
 - antidepressants
 - desmopressin
16. All of the following symptoms favor the diagnosis of achalasia except:
- dysphagia for solids
 - dysphagia for liquids*
 - painful swallowing xxx**
 - regurgitation
 - nocturnal regurgitation of undigested food

17. A 7-month-old infant has failure to thrive, with vomiting and diarrhea noted since 1 month of age. Developmental neurological milestones are not being met. A physical examination reveals hepatomegaly. The eyes show cataract formation in the crystalline lenses. The baby dies of fulminant *Escherichia coli* septicemia at 8 months of age. Which of the following disorders is most likely to produce these findings?
- Hunters disease
 - Galactosemia xxx**
 - Phenylketonuria
 - Homocystinuria
 - Congenital rubella syndrome
18. A 10-year-old boy is mentally retarded, but able to carry out activities of daily living, including feeding himself and dressing himself. On physical examination, he has brachycephaly and oblique palpebral fissures with prominent epicanthal folds. On the palm of each hand is seen a transverse crease. Upon auscultation of the chest, there is a loud systolic murmur. Which of the following diseases will he most likely develop by the age of 20 years ?
- chronic renal failure
 - hepatic cirrhosis
 - acute leukemia xxx**
 - acute myocardial infarction
 - aortic dissection
19. A 10-year-old male fell while riding his scooter down a steep hill. In the Emergency Department, his injuries included a fractured wrist and a lacerated spleen, which required surgical removal. Two years later he is diagnosed with bacterial pneumonia. Which of the following bacterial agents is the most likely pathogen for this patient's pneumonia?
- Escherichia coli*
 - Klebsiella pneumoniae*
 - Neisseria meningitidis*
 - Streptococcus pneumoniae** xxx**
 - Staphylococcus aureus*
20. A 10-year-old boy has a long history of recurrent infections. These have included pneumonia, suppurative lymphadenitis, persistent rhinitis, dermatitis, diarrhea, and perianal abscesses. Involved organisms have included *Staphylococcus aureus*, *Serratia*, *Escherichia coli*, and *Pseudomonas*. Biopsy of skin and lymph nodes have demonstrated granulomatous lesions, even though the only species isolated were those noted above. Immunoglobulin levels are higher than normal. Which of the following findings would be most helpful in establishing the diagnosis?
- Absent B cells and normal numbers of T cells
 - Deficient nitro blue tetrazolium dye reduction in neutrophils xxxx**
 - High serum IgM and very low serum IgG
 - Very low CD11 on the surface of white blood cells
 - Very low serum calcium levels
21. An emergency cesarean section is being performed because of fetal distress. At delivery the baby is covered with thick meconium and is apneic. The most appropriate management is:
- gives oxygen
 - intubates the trachea and ventilates the baby
 - ventilate with bag and mask xx**
 - aspirate the baby `s gastric content
 - suction trachea under direct vision xxxx**

22. All of the following are features of chronic non specific (Toddler`s) diarrhea of childhood, except:
- three to six watery stools per day
 - familial tendency xxx**
 - onset at age of 6- 30 months
 - reduced intake of dietary fat
 - failure to thrive
23. After diagnosis and treatment of a urinary tract infection in a 3-year-old female child, further investigations should include which one of the following?
- renal ultrasound only
 - renal ultrasound and voiding cystourethrogram* xxx**
 - intravenous pyelogram
 - voiding cystourethrogram
 - intravenous pyelogram and voiding cystourethrogram
24. Oligohydramnios is associated with which one of the following conditions:
- renal agenesis* xxx**
 - fetal erythroblastosis
 - tracheo-esophageal fistula
 - down syndrome
 - anencephaly
25. Six months after hepatitis B infection or immunization, which one of the following markers would be the best indicator of acquired immunity:
- anti – HbsAg xxx**
 - Hb e Ag
 - Hb s Ag
 - Anti Hb c Ag
 - Anti Hb e Ag
26. - Which of the following statements about hemorrhagic disease of the newborn is true::
- more common in females
 - more common in bottle- fed babies
 - requires therapy with fresh frozen plasma
 - has prolonged prothrombin time xxx**
 - becomes evident in the first 24 – hrs
27. A primigravida has been given Pethidine during the last 4 hrs of the labour, delivery was uneventful, but the baby shows poor respiratory effort. immediate management includes all the following, except:
- drying the exposed skin
 - clearance of the airway
 - intravenous sodium bicarbonate xxx**
 - administration of naloxone
 - oxygen
28. A diagnosis of hemophilus influenzae type B Epiglottitis just been made. The child has one – year – old unimmunized brother . which preventive measure among family contacts is appropriate:
- rifampicin prophylaxis in all family members XXX**
 - rifampicin prophylaxis in adult only
 - rifampicin prophylaxis in children only
 - immunization in children less than 18 month old
 - immunization of all family members

29. - A 3-week-old boy is brought to the Emergency Department because of a generalized seizure 2 hours ago. The infant is highly irritable with incessant high pitched crying. The infant's weight is 2.5 kg (250 gm below birth weight), blood pressure is 70 /40 mm Hg, pulse is 145/min and respirations are 50/min. Laboratory results show:
Blood glucose 120 mg/dL - Urea nitrogen 50 mg/dL -Serum sodium 170 mEq/L
Serum calcium 8.5 mg/dL -Serum magnesium 1.5 mg/dL
Which of the following is the most likely cause of this infant's seizure?
- Hypocalcaemia
 - Hypoglycemia
 - Hypomagnesaemia
 - Hypernatremia xxx**
 - Meningitis
30. - A pediatrician examines a 2-month-old infant who had been born at term. A continuous murmur was heard at the upper left sternal border. The peripheral pulses in all extremities are full and show widened pulse pressure. Which of the following is the most likely diagnosis?
- Coarctation of the aorta
 - Patent ductus arteriosus xxx**
 - Peripheral pulmonic stenosis
 - Persistent truncus arteriosus
 - Ventricular septal defect
31. A 20-month-old presents to the office with a 2-day history of a harsh, barking cough. His mother states he has not had any fever, although he had a runny nose earlier in the week. On examination, he is notably hoarse with inspiratory stridor. He is not drooling and is sitting comfortably. The rest of his examination is within normal limits. Which of the following is the most likely diagnosis?
- Acute laryngotracheobronchitis* xxx**
 - Aspiration of foreign body in the upper respiratory tract
 - Epiglottitis
 - Laryngomalacia
 - Subglottic stenosis
32. - A 16-month-old is taken to the emergency room after falling while walking. The toddler has an enlarging, swollen bruise on his forehead, which is now over two inches across. A blood sample is drawn, and the child oozes blood at the puncture site for 25 minutes. Clotting studies on the blood sample show a prolonged PTT and a normal PT and very low levels of factor VIII. Which of the following is the most likely diagnosis?
- Disseminated intravascular coagulation
 - Hemophilia A xx**
 - Hemophilia B
 - Hyperhomocysteinemia
 - Von Willebrand's disease*xx**
33. A 5-year-old boy develops a headache, cough, myalgia and a fever. He has been a healthy child with all immunizations up to date. He is given a decongestant and an aspirin for his symptoms with some relief. However, 4 days later, he is brought back by his parents because of persistent vomiting and irritability. On physical examination, he is found to be semi comatose, becoming combative on stimulation. Which of the following levels should be measured to aid in the diagnosis of this patient?
- Serum ammonia level xxx**
 - Serum blood urea nitrogen level
 - Serum calcium level
 - Serum opiate level
 - Serum sodium level

34. A 4-year-old, apparently healthy child is examined by a pediatrician. The pediatrician hears a loud systolic ejection murmur with a prominent systolic ejection click. He also hears a soft, early diastolic murmur. Both murmurs are heard best at the upper right sternal border. ECG shows left ventricular hypertrophy. Which of the following is the most likely? diagnosis?
- Aortic valve stenosis xxx**
 - Atrial septal defect
 - Tetralogy of Fallot
 - Transposition of great arteries
 - Ventricular septal defect
35. A 4-month-old infant boy has gained only 10 ounces since birth. He has failed to gain weight with multiple formula preparations. His stools have been loose and fatty. An older sister had similar symptoms and has been repeatedly hospitalized for failure to thrive and recurrent pulmonary infections. Which of the following is the most likely cause of this patient's? gastrointestinal symptoms?
- Achlorhydria
 - Bacterial overgrowth
 - Colonic inertia
 - Gastric hypersecretion
 - Pancreatic exocrine insufficiency* xxx**
36. - A 4-week-old infant presents with tachycardia, tachypnea, and poor weight gain. His arterial blood gas shows a pH of 7.34, a PaCO₂ of 41 mm Hg, and a PaO₂ of 74 mm Hg. A chest radiograph shows cardiomegaly. Echocardiography reveals a structurally normal heart, left ventricular dilatation, a left ventricular ejection fraction of 20%, and mild mitral and tricuspid regurgitation. IV administration of which of the following medications is the best initial step in management of this patient?
- Angiotensin-converting enzyme inhibitor
 - Corticosteroid
 - Digoxin
 - Epinephrine
 - Furosemide xxx**
37. A 4-year-old boy presents with severe pains in both of his legs. On physical examination, his temperature is 37.7 C (99.8 F), blood pressure is 108/68 mm Hg, pulse is 96/min, and respirations are 17/min. He is noted to have marked pallor on his lips and palpebral conjunctiva. Numerous purpura and petechiae are noted on his skin. His spleen is palpable 3 cm below his left costal margin. Laboratory evaluation reveals a white blood cell count of 1600/mm³; hemoglobin, 6.1 g/dL; and platelets, 36,000/mm³. Which of the following diagnoses is most consistent with these findings?
- Acute lymphocytic leukemia xxx**
 - Aplastic anemia
 - Henoch-Schönlein purpura
 - Immune thrombocytopenic purpura
 - Thrombotic thrombocytopenic purpura
38. - A neonate develops severe cyanosis that begins within minutes of birth. Blood drawn one hour after birth shows metabolic acidosis with respiratory acidosis. A chest x-ray film shows a narrow base to the great vessels and the heart resemble an egg on its side. ECG is normal. Which of the following is the most likely diagnosis?
- Aortic valve stenosis
 - Complete atrioventricular canal defect
 - Tetralogy of Fallot
 - Transposition of the great arteries xxx**
 - Underdeveloped (hypoplastic) left ventricle syndrome

39. A vomiting infant is brought to the emergency room. The blood work results reveal a normal blood count, but a hyponatremic, hypochloremic, metabolic alkalosis. Which of the following would be consistent with these findings?
- Diabetes mellitus
 - Cystic fibrosis xxx**
 - Ethanol poisoning
 - iron ingestion
 - Isoniazide ingestion
40. - An 11-year-old boy presents with fever and sore throat. A rapid-strep test confirms streptococcal pharyngitis. He is leaving for a summer camp in 2 days. In the past, he has had problem finishing the whole course of antibiotic treatment. Which of the following is the best treatment for his streptococcal pharyngitis?
- A single dose of benzathine penicillin G intramuscularly xxx**
 - A single dose of ceftriaxone intramuscularly
 - A single dose of procaine penicillin G intramuscularly
 - Erythromycin orally for 5 days
 - Penicillin V orally for 5 day
41. In the treatment of bronchial asthma, all are suitable treatment options in acute exacerbation ,except:
- ventolin nebulizer
 - ventolin inhaler
 - theyophilin intravenously
 - corticosteroids intravenously
 - salmeterol inhaler xxx**
42. If an asthmatic child presented with dyspnea while talking, using the accessory muscles for breathing, and his pulse oximetry is 90%, his exacerbation is classified as:
- mild
 - moderate
 - severe xxx**
 - mild to moderate
 - he is not in exacerbation from the start
43. Which of the following does not match?
- epiglottitis ----- thumbprint sign
 - croup ----- Steeple Sign
 - retropharyngeal abscess ----- widened retropharyngeal space
 - peritonsillar abscess ----- trismus
 - otitis media ----- cough * xxx**
44. all the following interfere with hemostasis, except:
- alcohol
 - aspirin
 - broad spectrum antibiotics
 - Digoxin xxx**
 - methotrexate
45. All are characteristics of bleeding due to platelet disorders, except:
- involving mucous membrane primarily
 - the delayed bleeding is usually severe* xxx**
 - petechiae present
 - small, superficial ecchymosis is evident
 - ITP is one of the commonest causes in pediatric age group

46. - CNS leukemia present with all the following except ::

- a. headache and vomiting
- b. ataxia
- c. polyphagia
- d. weight loss
- e. normal CSF findings is the usual xxx**

47. - All carry good prognostic value in ALL, except:

- a. age between 2 and 10 yrs
- b. WBC > 50.000 at diagnosis xxx**
- c. female patients
- d. absent of t (9, 22)
- e. DNA Index < 1.16

48. Regarding attention deficit hyperkinetic disorder in children all of the following statements are correct except:

- a. Prevalence in children is 3-8%
- b. All symptoms disappear at adulthood xxx**
- c. School adaptation is needed
- d. Medical treatment is indicated if there is school failure
- e. Symptoms appear before seven years of age

49. -A 5 year old child presented to you with difficulty to stand from sitting position. He has calf hypertrophy. which one of the following statements is TRUE?

- a. Calf hypertrophy is pathognomonic for Duchene disease
- b. Global developmental delay rules out the diagnosis of muscle dystrophy
- c. In Duchene disease CPK is high since birth xxx**
- d. Becker disease is inherited in autosomal recessive pattern
- e. The prognosis for the child described above is good

50. -All of the following statements regarding metabolic disorders in children are true except:

- a. Dysmorphic features rule out the diagnosis of metabolic disorders xxx**
- b. History of unexplained deaths in siblings raise the possibility of metabolic disorders
- c. Most metabolic disorders are inherited in an autosomal recessive pattern
- d. Organomegaly is suggestive of lysosomal storage disorders
- e. antenatal diagnosis is possible for several metabolic disorders

51. All of the following statements regarding Phenylketonuria are true except:

- a. It is a lipid storage disorder xxx**
- b. There is no acute clinical symptoms
- c. Phenylalanine restricted diet is mandatory
- d. Autosomal recessive inheritance
- e. Leads to mental retardation if not treated

52. -A 9 month old male child presented to you with hypotonia , which one of the following signs indicates that the hypotonia is due to upper motor neuron disorder(choose one correct) :

- a. Hypotonia in infants is always a sign of upper motor neuron disorder
- b. Exaggerated deep tendon reflexes xxx**
- c. Positive babinski sign bilaterally
- d. Absence of cerebellar signs
- e. Intact cranial nerves

53. -A 6 month old child presented to you because of weakness, upon examination you found severe hypotonia, power was 1/5, and the deep tendon reflexes were absent, there were also fasciculation in the tongue .The most likely diagnosis in this infants is:
- cerebral palsy
 - myasthenia gravis
 - werding Hoffman disease xxx**
 - congenital muscle dystrophy
 - metabolic disorder
54. - Which one of the following statements regarding cerebral palsy in children is true (choose one correct):
- pertussis vaccine is contraindicated
 - patients cognitive function deteriorate with time
 - deafness worsens with time
 - tetraplegic cerebral palsy patients carry the worst prognosis xxx
 - the majority of patients have mental retardation xxx**
55. - Hemophilus influenzae type B vaccine has been recommended for which one of the following groups:
- siblings and day care contacts of children who develop systemic hemophilus influenzae type B infections regardless of age xxx
 - all children at age of two months
 - any child with impaired immunity or chronic diarrhea
 - all children after the age of five years
 - all the children at the time of there first birth date
56. - Exposure to lead can cause all the following, except:
- abdominal pain
 - porphyria
 - cirrhosis of the liver xxx**
 - paresis
 - anemia
57. - A previously well 8-month- old boy admitted to the hospital with 12-hrs history of intermittent periods of screaming and vomiting. On physical examination there is a questionable right upper quadrant mass, he appears ill, pale and slightly dehydrated, the most likely diagnosis is:
- volvulus
 - acute intussusception* xxx**
 - hydronephrosis
 - malrotation
 - Hirschsprung enterocolitis
58. A 6- month old baby presents with vomiting and diarrhea of acute onset. Her systolic blood pressure was 40 mmHg and pulse rate 160/ min; she has poor peripheral circulation and is very lethargic. Her serum sodium 158 mmol/l , which one of the following is the best initial management :
- oral solution containing 50 mEq sodium per liter
 - intravenous 5 % dextrose in water at 80 ml / Kg per 24 hours* xxx**
 - septic work up
 - hydrocortisone 200 mg intravenously
 - intravenous 0.9 % saline 20 ml / Kg over 60 minutes

59.- A 3 wk old baby is brought to the emergency department with 36 hrs history of progressive vomiting. The birth weight was 3.1 Kg. On examination his weight 2.8 he is moderately dehydrated and is very irritable but not toxic. His blood work up reveals:

pH 7.5	PaCO ₂ 30 mmHg	HCO ₃ 31 mmol /L
B.E 7	K 3 mmol/ L	Na 135
	Cl 70 mmol/ L	urea 7.2 mmol / L

which of the following is the most likely diagnosis ?

- a. congenital adrenal hyperplasia
- b. cystic fibrosis
- c. Gastroenteritis
- d. Pyloric stenosis
- e. Obstructive uropathy

60.- The disappearance of a ventricular septal defect murmur in a patient known to have a large left to right shunt is most likely due to :

- a. increase in the lt. to rt. Shunt
- b. development of pulmonary stenosis
- c. closure of VSD
- d. development of significant pulmonary arterial hypertension xxx??
- e. development of aortic stenosis

61. A 1 year old child who had gastroenteritis is asymptomatic after 2 days dietary management. A stool culture then reported positive for salmonella group b. which one of the following is the most appropriate:

- a. oral chloramphenicol
- b. dietary management only xxx
- c. oral cefaclor
- d. oral sulfamethoxazole / trimethoprim
- e. oral ampicillin

62. Inheritance in Duchenne muscle dystrophy, one is true :

- a. autosomal recessive
- b. autosomal dominant
- c. sex linked dominant
- d. multifactorial
- e. sex linked recessive*xxx

63. A 5 – wk old infant presents with history of vomiting since birth, this occurs shortly after feeding and is often associated with burping. He is exclusively breast fed. His birth weight was 2.7 Kg now he is 3.7 Kg and physical exam is within normal limits. The most likely diagnosis is:

- a. otitis media
- b. urinary tract infection
- c. milk allergy
- d. pyloric stenosis*
- e. gastroesophageal reflux disease

64. Compared with human milk cow milk contain more of the following , except:

- a. Protein
- b. Phosphate
- c. Vitamin K
- d. Lactose
- e. Sodium

65. - An infant of 16 months was referred for assessment of suspected mental retardation, which of the following is outside the range of normal:
- He does not scribble spontaneously
 - He does not walk alone
 - Mama and BaBa are the only words which are clearly recognized xxx**
 - He is able to build of four cups
 - He is unable to through an object over his head
- 66- A five years old child should be able to do all of the following , except:
- Draw a man xxx**
 - Identify four colors
 - Copy a circle
 - Count from one hundred and backward
 - Skip with alternate feet
66. By the age of four months most full term infant should be able to do the following, except:
- Can roll over xxx**
 - Have conjugate eye movement
 - Reach out and grasp object
 - Sit with support
 - Babble and vocalize xxx**
67. The following findings are suggestive of bronchiolitis, except:
- Expiratory wheezes and crackles heard on chest auscultation
 - Fever 38 c
 - Hyperinflation of the chest
 - Widespread patchy opacification of the lung fields on chest radiograph* xxx**
 - Identification of respiratory syncytial virus in nasopharyngeal secretions
68. The following organisms commonly cause community acquired respiratory tract infection except :
- Respiratory syncytial virus
 - Streptococcus pneumonia
 - Pneumocystis carinii xxx**
 - Mycoplasma pneumonia
 - Parainfluenza virus
69. - In Henoch- Schonlein purpura , one is true :
- thrombocytopenia
 - increased susceptibility to infection
 - destructive arthropathy
 - blood in stool xxxx**
 - intracranial hemorrhage
70. Human immunodeficiency virus infection in children, all are true except:
- in most cases is due to administration of contaminated blood products xxxx**
 - may present with pneumocystis carinii pneumonia
 - may present with neurological signs in absence of immunodeficiency
 - is more likely to present with recurrent bacterial infections than in adults
 - may be acquired by breast feeding from an infected mother
71. Children with following genetic disorders have an increased risk of malignancy except:
- ataxia telangiectasia
 - neurofibromatosis type I
 - congenital hemihypertrophy
 - down syndrome
 - achondroplasia xxx**

72.- Neuroblastoma, all are true except:

- a. may spontaneously regress without treatment
- b. commonly presents with abdominal mass xxx**
- c. prognosis is determined by age at presentation
- d. may be detected by measuring urinary catecholamines
- e. commonly presents at stage IV

73.- Idiopathic thrombocytopenic purpura, one is correct:

- a. results from decreased platelet production
- b. classically presents with acute blood loss
- c. requires urgent treatment to prevent intracranial hemorrhage
- d. should be confirmed by bone marrow aspiration
- e. is preceded by a viral URTI in more than 60 % of cases xxx**

74. - Hazards of blood transfusion include all except:

- a. hemosidrosis
- b. circulatory failure
- c. hypokalemia* xxx**
- d. DIC
- e. CMV infection

75. A child who swallowed an unknown quantity of a strong bleach solution should:

- a. Be allowed home if there is no ulceration of the lips or tongue
- b. Have vomiting induced by ipecac
- c. Be investigated with a barium swallow
- d. Be investigated by an early endoscopy xxx**
- e. Be given a course of oral clindamycin as prophylaxis of anaerobes

76.- Lactose intolerance may occur due to all of the following, except:

- a. As a congenital abnormality
- b. In extreme preterm infants as a result of GI tract immaturity
- c. Following gastroenteritis
- d. In celiac disease
- e. As a result of pancreatic insufficiency* xxx**

77. Celiac disease is associated with all the following except:

- a. HLA-B8 antigen
- b. Dermatitis herpetiformis
- c. Increased risk of bowel lymphoma
- d. Temporary sensitivity to gluten xxx**
- e. Delayed puberty

79- Thrombocytopenia is a recognized complication of the following conditions, except:

- a. Meningococcal septicemia
- b. Hypersplenism
- c. Acute myeloid leukemia
- d. Hemophilia A xxx**
- e. Cavernous hemangioma

78. A prolonged bleeding time is seen in which one of the following :

- a. Factor 8 deficiency disease
- b. Coumadin orally
- c. Von Willebrands`s disease xxx**
- d. Paracetamol intravenously for pyrexia
- e. Heparin subcutaneously

- 79.- In anaphylactic reaction all are true except:
- Is an example of type I hypersensitivity reaction
 - Should be treated by subcutaneous atropine xxx**
 - May cause facial swelling and upper airway obstruction
 - May present with acute onset wheezes
 - Is a recognized complication of IVP
- 80.- Tumor lysis syndrome, all are true except:
- Characterized by hyperkalemia
 - Characterized by hyperuricemia
 - Characterized by hyperphosphatemia
 - Is reduced in severity by treatment with allopurinol
 - Moderate fluid restriction (2/3 rd maintenance)will decrease the severity xxx**
- 81.- All the following are ECG changes in hyperkalemia, except:
- tall, peaked T wave
 - ST segment depression
 - prolongation of P-R interval
 - appearance of U wave* xxx**
 - widening of QRS interval
82. Seizures in acute renal failure can result from all the following, except:
- hyponatremia
 - hypertension
 - cerebral hemorrhage
 - hypercalcemia xxx**
 - uremia
83. Indication of dialysis in Acute Renal Failure includes all the following, except:
- severe acidosis
 - severe hyperkalemia
 - fluid overload
 - hypotension xxx**
 - heart failure
- 84.- In T.B. meningitis one is incorrect:
- peak age is less than 5yrs and within 6 months of the primary infection
 - initial presentation with; low grade fever, headache and subtle personality changes
 - CSF shows increase lymphocytes
 - glucose is low with protein is high in CSF
 - acid fast bacilli are usually detected in CSF xxx**
- 85.- Signs and symptoms of active T.B. disease include all the following , except:
- productive cough > 3 wks duration
 - blood with sputum
 - night sweat
 - loss of appetite
 - increase weight* xxx**
86. In Failure to thrive, choose one correct statement:
- is most commonly due to organic cause
 - is most commonly due to lack of calories xxx**
 - usually requires a battery of laboratory tests to determine the cause
 - documentation of caloric intake is not required to rule out underfeeding
 - responds to feeding if the cause is organic

- 87.- A child with moderate malnutrition following a chronic diarrheal illness is likely to have all the following, except:
- greater fall in height centile than of head circumference centile
 - muscle hypotonia
 - low total body potassium
 - loss of skin turgor xxx**
 - iron deficiency anemia
- 88.- Which of the following statements regarding the most proper interpretation Of positive reaction to tuberculin (Mantoux) test in a 9 yrs old child is:
- suffering from active tuberculosis
 - immune to invasion by tubercle bacilli
 - susceptible to invasion by tubercle bacillus
 - in need for BCG vaccination
 - sensitive to tuberculo- protein* xxx**
- 89.- Prolonged indirect hyperbilirubinemia occur in all of the following, except:
- Galactosemia
 - Criggler – Najjar syndrome
 - breast milk jaundice
 - intravenous alimentation. xxx**
 - hypothyroidism
- 90.- In ABO incompatibility all the following are true, except:
- is the most common isoimmune hemolytic disease of the newborn
 - women of blood group O account for the vast majority of ABO incompatibility
 - microspherocytes are usually seen on the peripheral blood film
 - usually it does not occur in the first pregnancy * xxx**
 - baby direct comb's test is usually negative
- 91.- All the following signs may be present in infant with developmental dislocation of the hip, except:
- limitation of abduction of the hips
 - asymmetrical thighs fold
 - absent femoral pulses xxx**
 - ortolani or Barlow maneuver is used clinically to diagnose
 - crying due to pain on movement of the limb
- 92.- Foreign body in the respiratory passages can cause all the following, except:
- atelectasis
 - unilateral pulmonary hyperinflation
 - mediastinal displacement to the opposite side* xxx**
 - wheezing
 - recurrent chest infection
- 93.- Following near drowning episode a child may develop all the following except :
- reduced intracranial pressure xxx**
 - gross electrolyte imbalance
 - cardiac arrhythmias
 - hypothermia
 - respiratory distress
94. In nephrotic syndrome all the following statements are true except:
- hyperlipidemia is common
 - abdominal pain may be a symptom of hypoalbuminemia
 - renal biopsy is routinely indicated* xxx**
 - there is increasing clotting tendency
 - in more than 75% of the cases has at least one relapse within 1 year

95. - all the following are true about brucellosis, except:
- a. cows and goats are the common source of infection
 - b. can be transmitted from one person to person xxx**
 - c. fever, sweating and poor appetite are common features
 - d. joint pain is common in children
 - e. course of treatment is 4- 6 weeks

96. the following are characteristic of salicylate poisoning, except:

- a. hypoventilation* xxx**
- b. hyperglycemia
- c. hyperthermia
- d. dehydration
- e. tinnitus

[1] Scars in the kidney are best revealed by which one of the following studies:

- a) Renal ultrasound.
- b) Intravenous urogram (IVP).
- c) DMSA renal scan. xxx**
- d) CT scan.
- e) Magnetic resonance imaging.

[2] Factors responsible for the development of bone disease (renal osteodystrophy) in children with chronic renal failure include all the following except:

- a) Chronic metabolic acidosis.
- b) Deficiency of active Vitamin- D.
- c) Hypophosphatemia. xxx**
- d) Hyperparathyroidism.
- a) Negative calcium balance.

[3] All the following are manifestations of chronic renal failure except:

- a) Vomiting.
- b) Impaired sensation.
- c) Dysphagia.
- d) Muscle weakness. xxx**
- e) Poor appetite.

[4] All the following are correct about post Streptococcal acute glomerulonephritis except:

- a) Most patients develop C3 complement depression at presentation.
- b) Hematuria occurs in more than 95 % of patients.
- c) Nephrotic range proteinuria may persist in up to 10 % of patients.
- d) Rapidly progressive glomerulonephritis (RPGN) may occur at presentation. xxx**
- e) Pulmonary edema may develop in some patients.

[5] All the following are correct statements in children with minimal change nephrotic syndrome except:

- a) All patients in relapse respond to steroid therapy within a 4-week steroid course.
- b) Microscopic Hematuria occurs in up to 50% of patients . xxx**
- c) 10% of patients have mild hypertension.
- d) 90% of patients outgrow their illness by puberty.
- e) Cyclosporine-A is helpful in patients with frequent relapses.

[6] After an episode of upper urinary tract infection (pyelonephritis), which age of the following is most at risk of developing renal scars:

- a) Neonates.
- b) 5 year.
- c) 7 years. Xxx**
- d) 10 years.
- e) Adolescents.

[7] Which one of the following is used in the management of symptomatic hyponatremia (e.g convulsions):

- a) 0.18 % saline.
- b) 0.3 % saline.
- c) 3 % saline.
- d) 10 % saline.
- e) **20 % saline. xxx**

[8] In post-streptococcal acute glomerulonephritis, all the following are correct except:

- a) Gross hematuria usually resolves in 1-2 weeks.
- b) Hypertension improves within 4- weeks.
- c) **Microscopic Hematuria may persist for up to one year. xxx**
- d) Low C3 levels may persist up to 6 months.
- e) Microproteinuria may persist up to 6 months.

[2] Which of the following statements is untrue about mumps infection

- a) **Mumps is the most frequent cause of parotitis in under five children**
- b) The average age of incidence of mumps is higher than with measles and whooping cough
- c) The disease tends to be more severe in adults than in children, with more complications
- d) The course of the illness may be prolonged if the two parotid glands are not affected at the same time
- e) Mumps infection occurs less regularly than measles and chicken pox

[3] Which of the following is untrue about manifestations of puerperal sepsis?

- a) **Usually there is fever (37.5 °c or more),**
- b) Offensive profuse vaginal discharge,
- c) Local pelvic pain and
- d) Slowing of the involution of uterus
- e) Non of the above

[4] Which of the following is the commonest late manifestation in an infant borne with asymptomatic congenital toxoplasmosis?

- a) Epilepsy
- b) Mental retardation
- c) **Chorioretinitis**
- d) Ventricular septal defect
- e) Non of the above

[6] Which of the following is recommended for treatment and prevention of Varicella infection?

- a) no antibiotics, no vaccination
- b) no antibiotic, antiviral agent to prevent complication
- c) **no antibiotic, one vaccination in childhood**
- d) antibiotic, no vaccination in childhood
- e) no antivirals, two vaccinations in childhood

[7] Which of the following vaccine is included in the national immunization program For children, in Jordan, to prevent meningitis?

- a) IPV
- b) DPT
- c) MMR
- d) **HiB**
- e) Non of the above

- [8] Which of the following is recommended regarding routine prenatal care?
- a) the number of routine MCH visits be significantly reduced for women at low risk
 - b) focus should be on the total health and well-being of the family including medical, psychological, social, and environmental barriers affecting health
 - c) provision of systemic health care start long before pregnancy because it was proved to be beneficial to the physical and emotional well-being of the prospective mother and child
 - d) All of the above**
 - e) B and C only are true
- [9] Which of the following is true about cerebrospinal meningitis?
- a) This is a disease under the international surveillance by WHO
 - b) The prevalence increases during spring and summer months
 - c) The disease is common in Mid South American countries
 - d) A single case of meningitis in Jordan is considered as epidemic
 - e) Non of the above**
- [11] Which of the following is not true about meningococcal meningitis?
- a) percentage of carriers during inter-epidemic period is 70 – 80%**
 - b) Indirect contact through contaminated articles is negligible mode of transmission
 - c) It usually occurs among children and young adults
 - d) Non of the above
 - e) B and C
- [13] Which of the following is common complication of rubella
- a) encephalitis
 - b) pneumonia
 - c) gastroenteritis
 - d) thrombocytopenic purpura
 - e) Non of the above**
- [15] Mumps infection is clinically non-apparent in approximately:
- a) 10 – 20 % of the cases
 - b) 30 – 40 % of the cases**
 - c) 50 – 60 % of the cases
 - d) 70 – 80 % of the cases
 - e) Non of the above, as mumps infection is usually clinically apparent
- [17] In mumps swelling of the salivary glands reaches its maximum in -----, and subsides over ----- . Complete.
- a) 5 days, 12 days (respectively)
 - b) One week, one week (respectively)
 - c) Two weeks , one week (respectively)
 - d) One week, two weeks (respectively)**
 - e) Non of the above
- [19] Which of the following about mumps is true:
- a) The child usually suffer from earache, and pain and stiffness on opening the mouth after the swelling of the glands become enlarged and tender.
 - b) As mumps is a generalized disease, it has many common serious Complications
 - c) Autumn and winter are seasons of greatest prevalence
 - d) All of the above
 - e) Non of the above**

- [21] Which of the following is true about mumps
- a) Complications of mumps occur more in young children and teen ages than in infants and adults
 - b) Orchitis is a serious hazard in males suffering from mumps, as it usually leads to sterility
 - c) Pancreatitis, although rare, it is a serious and usually fatal condition
 - d) All of the above
 - e) **Non of the above**
- [22] Which of the following is not a classical finding in the Prodromal stage of Measles?
- a) Fever
 - b) **Bright pink Maculopapular rash, which begins at the hair lines**
 - c) Cough, sneezing and running nose
 - d) Conjunctivitis
 - e) Koplik spots
- [24] The incidence of encephalitis in measles is about:
- a) 1 %
 - b) 3%
 - c) **1 / 1000**
 - d) 3 / 1000
 - e) Non of the above
- [25] Which of the following is true about rubella infection
- a) it more common among females
 - b) The disease is prevalent in spring and summer seasons
 - c) **The disease is universally endemic except in remote and isolated communities**
 - d) The average incubation period is 10 days
 - e) Non of the above
- [26] Congenital rubella syndrome occurs in ----- of infants born to women who acquire rubella during the first trimester of pregnancy. Complete
- a) 1-7 / 1000
 - b) 1-5 %
 - c) 10-15 %
 - d) **20- 25%**
 - e) Non of the above
- [27] What is (are) the most common manifestation of rubella syndrome among an infant born to a mother who caught infection during 36 month of pregnancy?
- a) Cardiac defects
 - b) Eye defects
 - c) **Deafness**
 - d) Neurological defects
 - e) All of the above
- [28] Which of the following immunization combinations would be acceptable for administration to a pregnant lady?
- a) Td and MMR
 - b) **Hepatitis B and meningococcal**
 - c) Varicella and rubella
 - d) Meningococcal and measles vaccine
 - e) Non of the above

[31] Which of the following is used to describe epidemics of measles in a community with low herd immunity to measles?

- a) Cyclic, with secular trend
- b) point source, with secular trend
- c) propagative with cyclic trend**
- d) Point source with cyclic trend
- e) Non of the above

[37] Which of the following is untrue about risk factors for occurrence of puerperal sepsis?

- a) hemorrhage
- b) prolonged labor
- c) malnutrition
- d) preeclampsia
- e) non of the above**

[38] Which of the following is not an indication for vaccination against meningococcal meningitis

- a) International travelers to endemic areas
- b) Military recruits
- c) To abort community outbreak
- d) Newly born children in endemic areas**
- e) First year university students

Use the following responses to answer questions 39-40

- a) EPI
- b) Breast feeding
- c) Growth monitoring
- d) Family planning
- e) All of the above

[39] The most important measure to reduce infant mortality is -----**B**

[40] the most cost effective technology available to reduce infant mortality ----- **C**

Others , من هون للأخر الاسئلة مش محلولة

- [9] Children with steroid-resistant nephrotic syndrome are at risk of developing all the following except:
- Pneumococcal bacteremia.
 - Iron deficiency anemia.
 - Trace element deficiency.
 - Intravascular depletion.
 - Bleeding diathesis.
- [10] Five-year old boy with history of urinary tract infection is referred to you for assessment of his condition. Initial work up revealed a hemoglobin of 7 gm/dl, and a serum Creatinine of 2 mg/dl. All the following investigations may be helpful except:
- Renal ultrasound.
 - Voiding cysto-urethrogram.
 - Intravenous urogram (IVU).
 - Blood gas analysis.
 - Urine analysis.
- [11] One of the following is considered to be a benign finding during pediatric age:
- Atrial fibrillation
 - Ventricular premature contractions
 - Sinus arrhythmia
 - Supraventricular tachycardia
 - First degree heart block
- [12] One of the following clinical pictures is most suggestive of a cardiac abnormality
- a newborn baby with central cyanosis which disappeared on oxygen
 - a newborn baby with a heart rate of 170 beats /minute
 - a 7 month old baby who weighs 5 kg and has a respiratory rate of 50/ minute
 - a 2 month old baby who gets cyanosed on excessive crying
 - a 12 year old who presented with chest pain that increased on exercise
- [13] A 2 week old baby is found to have a harsh pansystolic murmur over left lower sternal boarder associated with a thrill. The family were very annoyed as the pediatrician who examined him at birth reassured them that the heart was normal. The most likely diagnosis is:
- atrial septal defect
 - aortic valve stenosis
 - pulmonary valve stenosis
 - ventricular septal defect
 - innocent murmur
- [14] All the following are likely presentations of patients with Tetralogy of Fallot except:
- tachypnoea and periorbital edema
 - hypercyanotic spells
 - failure to thrive
 - mild cyanosis at rest
 - an accidental heart murmur
- [15] In addition to unexplained fever for more than five days, the following are considered criteria for diagnosing Kawasaki disease , except:
- cervical lymphadenopathy
 - skin rash
 - hyperemic eyes
 - red mouth and tongue
 - large joint arthritis

[16] All the following statements are true regarding Rheumatic carditis , except:

- a) the most commonly affected valve is the aortic valve
- b) pancarditis is not a common presentation nowadays
- c) occurs in 50-60% of patients who have acute rheumatic fever
- d) unusual to coincide with Sydenham's chorea
- e) might need treatment with systemic steroids

[17] All the following might be effective in stopping an attack of Supraventricular tachycardia quickly , except:

- a) valsalva maneuver
- b) iv digoxin
- c) iv adenosine
- d) cardioversion
- e) ice bag on the forehead

[18] A 4 day old baby presented with severe cyanosis , and did not have any murmurs. His echocardiography revealed the diagnosis of transposition of the great vessels and a small patent ductus arteriosus. The most helpful step in the acute management of this baby in a peripheral hospital is:

- a) doing balloon atrial septostomy
- b) giving oxygen 10 l/min by nasal canula
- c) starting prostaglandin E1
- d) putting the patient on mechanical ventilator
- e) rushing the patient to surgery

[19] The most common type of atrial septal defects is:

- a) septum primum defects
- b) sinus venosus defects
- c) secundum defects
- d) coronary sinus defects

[20] In cases of heart failure during infancy resulting from large left to right shunts, the most important medication to use is:

- a) digoxin
- b) frusemide
- c) captopril
- d) carvedilol
- e) spiranolactone

[31] A 15kg baby is mildly dehydrated. The body water deficit is:

- a) 1000mls
- b) 1200mls
- c) 750mls
- d) 500mls
- e) 75mls

[32] What is the fluid replacement for maintenance of a 3kg neonate in the first 24 hours of life?

- a) 50mls
- b) 100mls
- c) 150mls
- d) 200mls

[33] The APGAR score of a neonate who is blue in colour with irregular respirations, weak cry, pulse of 84, floppy with slight flexion is:

- a) 1
- b) 2
- c) 3
- d) 4
- e) 6

[34] Caloric requirements by the beginning of the second week of life are:

- a) 60 cal./kg
- b) 80 cal./kg
- c) 100 cal./kg
- d) 120 cal./kg
- e) over 140 cal./kg

[35] At what age in children is the Hb level at its lowest.

- a) Neonate
- b) 3 months
- c) 6 months
- d) 12 months
- e) 24 months

[36] Epiglottitis

- a) Is not usually associated with a high fever
- b) Produces a characteristic barking cough
- c) Is confirmed by depressing the tongue and observing the characteristic supraglottic oedema
- d) Necessitates elective endotracheal intubation
- e) Is associated with Mycoplasma bacteremia

[37] Acute bronchiolitis is

- a) restricted to infants with an atopic predisposition
- b) most frequently caused by respiratory syncytial virus
- c) an indication for erythromycin therapy
- d) an indication for bronchodilator therapy

[38] One of the following is correct about mycoplasma pneumonia infection

- a) Typically produces a pneumonia with widespread crepitation
- b) Is responsive to amoxicillin
- c) Is a recognized cause of meningoencephalitis
- d) Usually shows normal chest x-rays
- e) Does not have any complication and resolved spontaneously

[39] Which of the followings is not correct in bronchial asthma

- a) More prevalent in boys
- b) More strongly associated with house dust mite than any other allergen
- c) Characterized by nocturnal cough
- d) May be associated with a barrel shaped chest
- e) Characterized by apnoeic attacks

[40] Recognized presenting features of cystic fibrosis include all the followings except

- a) neonatal small bowel obstruction
- b) persistent stridor
- c) rectal prolapse
- d) bronchiectasis

[41] Standard management of cystic fibrosis includes

- a) Severely restricted fat intake
- b) Multivitamin supplementation
- c) Residential schooling
- d) Exemption from physical education

[43] All of the following are correct regarding nocturnal enuresis except

- a) Nocturnal enuresis is the involuntary loss of urine that occurs only at night
- b) Children are not considered enuretic until they have reached five years of age
- c) To establish the diagnosis, a child of five to six years old should have two or more bed-wetting episodes per month.
- d) Wetter children have not been found to have an increased incidence of emotional problems.
- e) **About 0 percent of children are bed wetter over all the world xxx**

[75] The common cause of regurgitation in a normal young infant is:

- a) Pyloric stenosis
- b) Gastro-esophageal reflux
- c) Constipation
- d) Lactose intolerance
- e) Faulty feeding technique

[76] The most likely reason for the extra chromosome in down's syndrome is:

- a) Anaphase lag
- b) Translocation
- c) Non disjunction
- d) Oogenesis
- e) Fragmentation

[77] Which of the following is the earliest sign in newborn with sepsis:

- a) Reluctant of feeding
- b) Hyperirritability
- c) Respiratory distress
- d) Stiff neck
- e) Jaundice

[87] The drug of choice for a child with pneumococcal pneumonia is:

- a) Penicillin
- b) Streptomycin
- c) Chloramphenicol
- d) Sulpha drugs
- e) Erythromycin

[91] The preferred definition for prematurity is:

- a) An infant weighing less than 2500 grams
- b) An infant with a head circumference of 35 cm
- c) An infant born less than 37 weeks of gestation
- d) An infant missing vernix

[92] The anterior fontanel normally is closed by the age of:

- a) 3 months
- b) 6 months
- c) 10 months
- d) 18 months
- e) 24 months

[93] A child can usually roll over by age:

- a) 4 weeks
- b) 12 weeks
- c) 16 weeks
- d) 38 weeks
- e) 40 weeks

[94] Peritonsillar and retrotonsillar abscesses are almost caused by

- a) Group A beta hemolytic streptococci
- b) H. influenzae
- c) Staphylococcus
- d) Rhinoviruses
- e) Pseudomonas aeruginosa

[95] Concerning bronchial asthma, one of the following is true

- a) Involves only the small airways
- b) Females are more affected than males
- c) Have onset only after the age of 3 years
- d) The prognosis for young children is generally very bad
- e) The obstruction is more severe in expiration

[96] All of the following are true about brucellosis except:

- a) Cows and goats are the common source of infection
- b) Ampicillin is the drug of choice
- c) Fever, sweating and poor appetite are common feature
- d) The course of treatment is 4-6 weeks
- e) Joint pain is a common feature in children

[97] Oral replacement solution in infant with gastroenteritis is

- a) Half strength milk
- b) Plain water
- c) Salt and glucose added to the water
- d) Salt added to the water
- e) Plain water

[98] One of the following is correct regarding brucellosis:

- a) Rarely transmitted from person to person
- b) Can be transmitted by milk and milk product
- c) It is mainly an occupational disease
- d) It is a world wide disease mainly in third world countries
- e) All of the above

[99] Antibiotic prophylaxis are indicated in all of the following except:

- a) Rheumatic fever
- b) Brucellosis
- c) Malaria
- d) Recurrent UTI
- e) Splenectomy

[100] All of the following are included in the management of cystic fibrosis except:

- a) Pancreatic preparations
- b) Regular physiotherapy
- c) Vitamins supplementation
- d) Gluten free diet
- e) Low fat diet

1. Therapy of a "blue" or "tet" spell could include all of the following EXCEPT
 - a) epinephrine
 - b) knee-chest position
 - c) oxygen
 - d) morphine
 - e) sodium bicarbonate
 - f) phenylephrine
2. A 4-month-old infant is noted to have a grade 4 holosystolic murmur that is harsh over the left parasternal border. Results of both the chest radiograph and ECG are normal, and the child is otherwise asymptomatic. The most likely cause of this murmur is
 - A. large VSD with 3:1 shunt
 - B. an ASD secundum defect
 - C. a small VSD
 - D. pulmonic stenosis
 - E. pink tetralogy of Fallot
3. The initial treatment of choice for a symptomatic patient with isolated pulmonic stenosis is
 - A. closed surgical blade valvotomy
 - B. open surgical valvotomy
 - C. balloon catheter valvuloplasty
 - D. Blalock-Taussig shunt
 - E. valve replacement
4. A 12-year-old female is noted to have a blood pressure of 170/110 mm Hg during a routine grade physical examination for school sports participation. She is asymptomatic but has been noted to have a grade 1-2/6 short systolic murmur at the left sternal border. The next important step in her evaluation should include
 - A. chest radiograph
 - B. ECG
 - C. funduscopic examination
 - D. lower extremity blood pressure
 - E. a tilt test
5. The most common clinical manifestation of VSD is :-
 - A. sign of congestive heart failure in the first week of life.
 - B. Small septal defect with left-to- right shunt.
 - C. Cyanosis .
 - D. Chronic bronchitis.
 - E. Moderat left – to –right shunting at arterial level.
6. For each of the following questions (2&3) one or more of the answers is correct , select :
 - A. if only 1,2,3 are corret.
 - B. if if only 1,3 are corret
 - C. only 2,4 are corret
 - D. if only 4 is corret
 - E. all are correct
7. Factors that are thought contribute to maintaining the patency of the ductus arteriousis are:-
 - A. increased pulmonary vasicular resistance secondary to hypoxia.
 - B. high arterial oxygen tension.
 - C. prostaglandin.
 - D. Acetylcholine

8. In VSD :
- A. the murmur is generally harsh and of plateau type .
 - B. the smaller the VSD , the greater the likelihood of spontaneous closure .
 - C. a mid-diastolic rumble may occur.
 - D. R- to- L shunting of blood is not part of the natural course of the disease.

9. all of the following may give rise to Eisenmenger,s syndrome except :

- A. ASD
- B. VSD
- C. PDA
- D. isolated coarctation of aorta
- E. Endocardial defect .

10. the cardiac defect associated with maternal rubella infection is :

- A. Aortic valve stenosis .
- B. pulmonary valve stenosis.
- C. PDA.
- D. VSD
- E. dextrocardia and pulmonic stenosis .

All of the following are acyanotic child may have increased pulmonary marking on X-ray ,except:

- A. ASD
- B. VSD
- C. PDA
- D. Endocardial cushioning defect
- E. Pulmonary stenosis.

11. All are mechanisms of increase risk of infections in minimal lesion nephrotic syndrome , except:

- A. Loss of immunoglobulin
- B. Loss of Properdin factor B
- C. Decreased perfusion of the spleen
- D. Loss of opsonization factors
- E. leukopenia

12. Pneumocystis carinii pneumonia is caused by:

- A. protozoa
- B. rickettsia
- C. virus
- D. bacteria
- E. none of the above

13. Long term outcome in healthy children who survive staphylococcal pneumonia is usually:

- A. recurrent spontaneous pneumothorax
- B. chronic respiratory failure
- C. chronic lung abscess and empyema
- D. persistent pneumatoceles
- E. complete resolution

14. Over a period of a day a 4 month old infant developed tachypnea, chest recession, widespread wheezes, CXR showed hyperinflation. Which of the following is correct?

- A. viral studies would show rhinovirus in 25% of cases
- B. the baby has a chance of > 20% of becoming asthmatic later in life
- C. steroids will decrease the mortality rate
- D. you can assure the family that the critical period of his illness will not last >48hrs
- E. adrenaline nebulizer is the state of art in the treatment

15. ITP, one is correct:

- A. often follow a viral infection
- B. typically has chronic course
- C. is characteristically associated with moderate splenomegaly
- D. requires splenoectomy in more than 20 % of cases
- E. associated with decrease megakaryocytes on bone marrow exam

16. 11 month-old girl presents to your office with fever (39.c) for the last 2 days. 3 hrs ago she started to to have vomiting and decrease oral intake, she looked tired and ill. Her exam reveals no focus and moderate to severe dehydration. you suspect UTI. Her urine culture is positive at 24 hrs, the most likely organism , is:

- A. klebsiella
- B. coli
- C. staph. Aureus
- D. proteus
- E. enterococcus

17. After treating her infection, what investigation(s) needed?

- A. no test are needed
- B. renal U /S
- C. VCUG
- D. DTPA
- E. renal U /S & VCUG

18. an 4-year old boy presented with his mother with abnormal posturing of the hands, the mother stated that his hands turned into a claw shape, first time noticed by his teacher in the day care center for mental retarded kids. This is his photo you were surprised by his funny looking and laughing.



In your cardiac exam, you heard a systolic murmur, you conclude that he has at most:

- A. VSD
- B. subvalvular aortic stenosis
- C. supra valvular aortic stenosis
- D. ASD
- E. critical pulmonary stenosis with right sided aortic arch

===

1. In the majority of children, the anterior fontanel is closed by:

- A. 8 months
- B. 10 months
- C. 12 months
- D. 14 months
- E. 18 months*

2. All of the following statements about cephalhematoma are correct EXCEPT:
- A. May cause anemia.
 - B. May cause hyperbilirubinemia.
 - C. It crosses the suture lines.*
 - D. Aspiration is contraindicated.
 - E. It is subperiosteal bleeding.
3. Complications of birth asphyxia may include any of the following EXCEPT:
- A. Convulsions.
 - B. DIC.
 - C. NEC.
 - D. Pulmonary hypertension.
 - E. Retrolental fibroplasias.*

1-Which of the following vaccines that routinely be given at school entry

- a) Pertussis vaccine
 - b) D.P.T.
 - c) MMR vaccine.
 - d) D.T.
 - e) All of the above.
2. Which of the following is considered as emergency school-health condition;
- a) Malnutrition
 - b) Acute tonsillitis
 - c) Epileptic fit
 - d) arasitic infestation
 - e) -All of the above.
3. Which of the following is not performed routinely as screening test of schoolchildren;
- a) Spinal deformities
 - b) Acuity of vision
 - c) Acuity of hearing
 - d) I.Q.
 - e) Anthropometric measurements
4. Which of the following schoolchildren groups need x-rayfor T.B.investigation;
- a) All school children
 - b) All private school students.
 - c) All public school students
 - d) Only suspected cases
 - e) Non of the above
6. The following are the objectives of comprehensive medical examination except;
- a) Detection of common health problems
 - b) Case finding
 - c) Base-line reference for child health
 - d) Health promotion of schoolchildren
 - e) Appportunity of heath education
7. Which of the following diseases essentially need chemo-prophylaxis;
- a) Bilharziasis
 - b) Diabetes mellitus
 - c) Rheumatic fever
 - d) Measles
 - e) Hepatitis

8. Which of the followings is considered the most important promoting factor of health;

- a) Recreation
- b) Sedentary life
- c) Proper water supply
- d) Exercise
- e) Adequate nutrition

9. Which of the following vaccines that routinely be given at school;

M.M.R.

- a) D P T
- b) Pertussis vaccine
- c) D.T.

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1- All about febrile convulsion one true except :

- a. Incidence 3-4% of young children
- b. Peak age of onset 14-18 month
- c. EEG is mandatory because it is abnormal in 50% it cases
- d. 50% of children have recurrent attack
- e. Usually it is tonic clonic

2- Characteristics of innocent murmur include all except :

- a. Diastolic
- b. No thrill
- c. Musical
- d. Grade one
- e. Normal ECG and chest X-Ray

3- Which of the following finding in the newborn require treatment

- a. A scrotal hydrocele
- b. Mastitis neonatorum
- c. An erupted tooth
- d. Absent femoral pulses
- e. Mongolian spots

4- One of the following is a contraindication of DPT vaccination :

- a. Prematurity
- b. URI upper respiratory infection
- c. History of febrile seizures
- d. Bronchial asthma
- e. Sever reaction to a prior dose of DPT

5- The premature newborn is predisposed to all except :

- a. RDS respiratory distress syndrome
- b. MAS meconium aspiration syndrome
- c. Hypoglycemia
- d. IVH – Intraventricular hemorrhage
- e. Apnea

7 – Polyhydroamnios may be associated with all of the following except :

- a. Duodenal atresia
- b. Esophageal atresia
- c. Renal agenesis
- d. Trisomy 21
- e. Hydrocephaly

- 8 – All are true regarding stridor in a 24 month old except :
- May be caused by hemophilus influenza type B infection
 - May be the result of parainfluenza viral infection
 - Rarely lasts more than 3 days
 - Salbutamol nebulizer is very effective in the management
 - May be caused by foreign body
- 9 – All about measles are true except :
- Koplik spots are pathognomonic
 - Incubation period is 14-21 days
 - Complications include pneumonia and otitis media
 - The highest infectivity is before the rash appearance
 - Active is very effective
- 10- The most serious problem of acute diarrhea is :
- Frequent bowel motion
 - Poor appetite
 - Dehydration and acidosis
 - Tenesmus
 - Blood has in the stool
- 11- Regarding diagnosis of All, all are true except :
- Initial symptoms are usually non-specific
 - Diagnosis can be excluded in normal blood film
 - Wbcs count may be as low as 3000/mm
 - Bone pain is an important clue to diagnosis
 - Splenomegaly is found usually
- 12- The life expectancy of thalassemic child optimally treated by hypertransfusion and regular desferrioxamine therapy is :
- 21-5 years
 - 6-10 years
 - 11-15 years
 - 16-25 years
 - Nearly normal life expectancy
- 13- Regarding brucellosis, all are true except
- The treatment course is 4-6 weeks
 - The bone marrow is the most productive source of culture
 - Antibodies respond in class M, which appears 2-3 weeks after infection and persist for life
 - May involve the central nervous system
 - Human to human transmission is very rare
- 14- All are recognized complications of HMD hyaline membrane disease except :
- BPD bronchopulmonary dysplasia
 - Delayed closure of ductus arteriosus
 - Pneumothorax
 - Polycythemia
 - IVH intraventricular hemorrhage
- Regarding Down syndrome, all are true except :
- It is trisomy 21
 - Mental retardation in most cases
 - Endocardial cushion defects are the most common cardiac defect
 - Hypotonia is presented in only one third of cases
 - Is the most common chromosomal abnormality at conception

- 16- The first sign of salicylate poisoning in children is usually :
- A. Hyperpyrexia
 - B. Hyperventilation
 - C. Convulsion
 - D. Coma
 - E. Diarrhea
- 17 - Physical examination of a 5 year old child with history of recent skin infection reveals tachycardia, Bp = 180/120 mmhg, urine = cola coloured, which one of the following is the best drug to administer I.V:
- A. Digoxin
 - B. Diazoxide
 - C. Furosemide
 - D. Propranolol
 - E. Verapamil
- 18- A typical attack of bronchial asthma may consist of each of the following except:
- A. Marked dyspnea
 - B. Expiratory wheezes
 - C. Bradycardia
 - D. Restlessness
 - E. Attacks of cough
- 19- The least amount of reaction which would be considered a definite positive reaction to PPD testing in children is :
- A. Any reaction
 - B. Over 5 mm induration
 - C. Over 5 mm erythema
 - D. Over 10 mm erythema
 - E. Over 10 mm induration
- 20 – Evaluation of every child who has enuresis should include initially, all of the following except :
- A. Family history
 - B. IVP
 - C. Routine urine analysis
 - D. Urine C/S
 - E. Blood sugar
- 21- Splenomegaly is expected in all of the following except :
- A. Hereditary spherocytosis
 - B. ITP
 - C. Von Willebrand disease
 - D. Thalassemia
 - E. Hb-H haemoglobin disease
- 22- On routine examination of a newborn a soft fluctuant mass was detected in the right parietal area, it does not cross the med. line, mostly it is ;
- A. Caput succedaneum
 - B. Cephalhematoma
 - C. Cystic hygroma
 - D. Encephalocele
 - E. Lipoma
- 23- Which one of the following is the most common cause of thrombocytopenia in children ?
- A. Drug reaction
 - B. Idiopathic thrombocytopenic purpura
 - C. Infection

- D. Henoch –Schnelein purpura
E. Leukemia
- 24- Which one of the following is an advantage of breastfeeding ?
A. An early return of normal menstrual cycles
B. A lower incidence of cervical cancer
C. A decreased incidence of asthma and ear infections in the infant
D. A decreased chance of postpartum endometritis
E. A lower incidence of ovarian cancer.
- 25- Which one of the following is a sign of adequate breastfeeding ?
A. Infant's weight returns to the birth weight by eight to 10 days.
B. Infant continues sucking without pauses
C. Infant has wet diapers at least six to eight times a day
D. Infant wants feedings three to four times a day
E. Infant wants feedings ten to twelve times a day.
- 26- All of the following are correct regarding the criteria for the diagnosis of CP except :
A. Non progressive disorder
B. Decreased tendon reflexes
C. Abnormal movements and posture
D. Persistence of none primitive reflexes
E. Abnormal tone
- 27- Neonatal presentations of cystic fibrosis include all except
A. Meconium illness
B. Elevated immunoreactive trypsin
C. Obstructive jaundice
D. Bilateral pulmonary infiltrates
E. Positive sweat test
- 28- Concerning neonatal polycythemia, the true statement is :
A. It refers to $HB > 18$ gm
B. Trisomy 21 is a predisposing factor
C. Capillary PCV is usually $<$ venous PCV
D. There are no long term complications
E. Total exchange transfusion is the treatment of choice
- 29- A 3 years old child is able to do all except :
A. Goes up stairs, one foot per step
B. Draw a triangle
C. Can copy a circle
D. Build a tower of cubes
E. Can speak 4 words phrases
- 30- Regarding hepatitis B virus , all one true except :
A. HBV is an oncogenic virus
B. Most infections are asymptomatic
C. It is a sexually transmitted disease
D. Antibody to core antigen is always an evidence of immunity
E. Vertical transmission carries the highest risk of chronic infection
- 31- The proper management for infant whose testicles are absent , the urethra opening in the perineum would be:
A. Reconstructive surgery of urethra
B. Genetic study for sex identification
C. Leave him until adolescence
D. Give him testosterone
E. Give him gonadotropin

32- Vaccine are available now for all except :

- A. Rotavirus
- B. Varicella
- C. Hepatitis A
- D. Hepatitis C
- E. Yellow fever

33- Human milk differs from cow's milk in all except :

- A. Contain less sodium
- B. Contain less phosphorus
- C. Contain more protein
- D. Contain more lactose
- B. Better iron absorption

34- The approximate mean weight for a healthy 7 year old boy is :

- A. 30 Kg
- B. 25 kg
- C. 21 kg
- D. 17 kg
- E. 12 kg

35- The most important clinical feature in childhood hypothyroidism is :

- A. Delay in dentition
- B. Growth failure
- C. Muscular hypotonia
- D. Progressive developmental regression
- E. Sexual immaturity

36- In which one of the following situations, a child should not receive the indicated live virus vaccine :

- A. MMR for a child who has symptomatic AIDS
- B. Oral polio for a child whose parent is receiving chemotherapy for cancer
- C. MMR for a child with severe asthma
- D. MMR for a child who had leukemia that is in remission who has been off therapy for two years
- E. Oral polio for child whose mother is pregnant

37- Tetralogy of fallot is associated with all except :

- A. Cyanosis
- B. FTT
- C. Bacterial endocarditis
- D. Hypovolemic lungs
- E. Heart failure

38 – Regarding idiopathic nephritic syndrome, all are true except :

- A. Usually oedema appears when serum albumin falls below 2.5g/dl
- B. 8 more common in boys
- C. Serum cholesterol and triglyceride are normal
- D. Infection is the major complication of nephrosis
- E. Prednisolone is the drug of choice

39 – The most common chromosomal trisomy is :

- A. Trisomy 8
- B. Trisomy 13
- C. Trisomy 18
- D. Trisomy 21
- E. Trisomy 5

- 40 – All about congenital heart disease are correct except :
- A. The congenital defect which do not require antibiotic prophylaxis is ASD
 - B. A bicuspid aortic valve occurs in about 70% of patient with coarctation of the aorta
 - C. Most VSD close spontaneously
 - D. Patients with PDA always have diffuse clubbing
 - E. Pulmonary stenosis can be caused congenital rubella
- 41- Regarding congenital hypertrophic pyloric stenosis one is true :
- A. Usually manifest at birth
 - B. Very difficult to diagnose
 - C. Usually associated with eosinophilic gastroenteritis
 - D. Associated with recurrent UTI
 - E. Better treated surgically as soon as the diagnosis is established
- 41- The most common cause of vomiting of the following in infancy is :
- A. Medication
 - B. Gastroenteritis
 - C. Adrenogenital syndrome
 - D. Inborn error of metabolism
 - E. Pyloric stenosis
- 42- Pulmonary edema may be caused by each of the following except :
- A. Acute glomerulonephritis
 - B. Hydrocarbon aspiration
 - C. Hypervolemia
 - D. Right ventricular failure
 - E. Left ventricular failure
- 43- All of the following indicate a complex febrile seizure except :
- A. Age < one year
 - B. Family history of febrile seizure
 - C. Recurrent attacks in 24 hrs
 - D. Focal seizure
 - E. Last more than 15 minute
- 44- 24 month old child can do all except :
- a. Climb up upstairs one step at a time holding
 - b. Built a tower of 5 cubes
 - c. Can kick a ball
 - d. Can draw a square
 - e. Know 20 words
- 45- All are true regarding Duchenn muscle dystrophy except :
- a. An X-linked disease
 - b. Had increased CPK level
 - c. The patients commonly die because of respiratory muscle involvement
 - d. Muscle biopsy help in diagnoses
- 46- Immunoglobulins are the drug of choice
In G6PD deficiency all are true except
- a. Inherited as X-linked
 - b. Significantly impairs the pentose phosphate shunt
 - c. Result because of accumulation of glycogen in the liver
 - d. Predisposes to hemolytic anemia
 - e. E. Predisposes to neonatal jaundice

47- Regarding hirschprung disease all are true except :

- a. Males are effected more than females
- b. Is the most common causes of neonatal obstruction of the colon
- c. It results from obsence of ganglion cells in the bowel wall
- d. Intermittent attacks of intestinal obstruction may be associated
- e. The most common involved part of lowel is the terminal ileum

48 – All of the following drugs could be used as anticonvulsant therapy in neonatal priod except :

- A. Diapozam 0.25mg/ kg. I.v.
- B. Phenytoin 10mg/ kg i.m
- C. Rectal paraldehyde
- D. Phenobarbitone 20 mg/ kg i.v
- E. Carbamazepine 10 mg / kg orally

49 – subdural effusion most commonly accompanies meningitis caused by one of the following

- A. E. Coh
- B. Hemophilus influenzae
- C. Neisseria meningitides
- D. Streptococcus pneumonia
- E. Staphylococcus aureus

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Mutah 6th QQ 2007 –pediatric neurology:

1-Regarding migraine in children all of the following statements are true except :

- a-Ibuprofen is indicated for prophylactic treatment**
- b-Sumatriptan is effective in the acute treatment**
- c- Ergotamine is contraindicated in hemiplegic migraine**
- d-Fenflurazine is effective for prophylactic treatment**
- e-No need for treatment in children**

2- Regarding attention deficit hyperkinetic disorder in children all of the following statements are correct except :

- a-Prevalence in children is 3-8%**
- b-All symptoms disappear at adulthood**
- c-School adaptation is needed**
- d-Medical treatment is indicated if there is school failure**
- e-Symptoms appear before seven years of age**

3-A 5 year old child presented to you with difficulty to stand from sitting position.He has calf hypertrophy.which one of the following statements is TRUE

- a-Calf hypertrophy is pathognomonic for duchenne disease**
- b-Global developmental delay rules out the diagnosis of muscle dystrophy**
- c-In duchenne disease CPK is high since birth**
- d-Becker disease is inherited in autosomal recessive pattern**
- e-The prognosis for the child described above is good**

4-A 10 months old infant presented to you for routine developmental assessment .You expect him to do all of the following except :

- a-Sits alone**
- b-Waves bye**
- c-Pulls to stand**
- d-Has pincer grasp**
- e-Speaks 5 specific words**

5-when examining a 2 months old infant you expect to find all of the following reflexes except :

- a-Moro reflex**
- b-Palmar reflex**
- c-Plantar reflex**
- d-Parachute reflex**
- e- Rooting reflex**

6-All of the following statements regarding metabolic disorders in children are true except:

- a-Dysmorphic features rule out the diagnosis of metabolic disorders**
- b-History of unexplained deaths in siblings raise the possibility of metabolic disorders**
- c-Most metabolic disorders are inherited in an autosomal recessive pattern**
- d-Organomegaly is suggestive of lysosomal storage disorders**
- e-antenatal diagnosis is possible for several metabolic disorders**

7-all of the following statements regarding phenylketonuria are true except :

- a-It is a lipid storage disorder**
- b-There is no acute clinical symptoms**
- c-Phenylalanine restricted diet is mandatory**
- d-Autosomal recessive inheritance**
- e-Leads to mental retardation if not treated**

8-Regarding autism in children all of the following statements are true except :

- a-Delay in qualitative social interactions**
- b-Delay in verbal and non verbal communication**
- c-Decrease imaginative activity**
- d-Symptoms appear in the first months of life**
- e-Mental retardation is frequent**

9-A 9 month old male child presented to you with hypotonia , which one of the following signs indicates that the hypotonia is due to upper motor neurone disorder(choose one correct) :

- a-Hypotonia in infants is always a sign of upper motor neuron disorder
- b-Exaggerated deep tendon reflexes
- c-Positive babinski sign bilaterally
- d-Absence of cerebellar signs
- e-Intact cranial nerves

10-A 6 month old child presented to you because of weakness , upon examination you found severe hypotonia , power was 1/5 , and the deep tendon reflexes were absent , there were also fasciculations in the tongue .The most likely diagnosis in this infants is :

- f. cerebral palsy
- g. myasthenia gravis
- h. werding hoffman disease
- i. congenital muscle dystrophy
- j. metabolic disorder

11- Which one of the following statements regarding cerebral palsy in children is true(choose one correct):

- f. pertussis vaccine is contraindicated
- g. patients cognitive function deteriorate with time
- h. deafness worsens with time
- i. tetraplegic cerebral palsy patients carry the worst prognosis
- j. the majority of patients have mental retardation

12- A 12 month old child presented to you in the emergency room with history of uprolling of eyes and generalized tonic clonic seizures .His temperature was 38 degree Celsius , and he had very hyperemic throat .Which one of the following statements is true :

- a-Lumbar puncture is not indicated
- b-The child is at greater risk to develop epilepsy in the future
- c-The child is at greater risk to develop recurrent febrile convulsions
- d-The child should be started on antiepileptic treatment
- e-the child should receive diazepam daily for one year

13-all of the following statements regarding epilepsy in children are correct except:

- a-Epilepsy is more common in children than in adults
- b-One third of patients do not respond to medical treatment
- c-Vagal nerve stimulation is a palliative treatment in epilepsy
- d- West syndrome carries a good prognosis in most patients
- e- Syndromic classification permits prediction of prognosis

14- regarding hearing development in children all of the following statements are correct except :

- a-Hearing development is excellent since birth
- b-Hearing is the dominant sense in the first 10 months of life
- c-Babies start to turn to the source of noise at 7 months of age
- d-Babies who do not turn to source of noise are not necessarily deaf
- e-Hearing assessment is mandatory for all developmentally delayed children

15-Babies are able to see and differentiate the different colors by the age of :

- a-At birth
- b-3 months
- c-6 months
- d-9 months
- e- one year