

اللهم لا سهل إلا ما جعلته سهلًا وأنت تجعل الحزن إذا شئت سهلًا Pediatric final wateen 20/5/2025

★Endocrine ::

Q1) Which of the following is correct regarding Rickets?

- 1. Craniotabes is the first sign in infants
- 2. Phosphate is the least important factor
- 3. Diagnosis and follow-up are based on imaging
- 4. Rickets in the first year is due to renal disease
- 5. Rickets in the first year is due to poor nutritional intake

Q2) All of the following are causes of hypocalcemia except:

- Hypoalbuminemia
- 2. Hyperphosphatemia
- 3. Hypermagnesemia
- 4. Hypoparathyroidism
- 5. Vitamin D deficiency

Q3) Which of the following statements is incorrect regarding congenital hypothyroidism?

- Most commonly caused by dyshormonogenesis
- 2. Maternal T4 protects neonates against congenital hypothyroidism
- 3. Screening detects elevated TSH in primary CH
- 4. Congenital hypothyroidism is more common in females
- 5. Early treatment prevents intellectual disability

Q4) In Type 2 failure to thrive (FTT), which investigation is least needed?

- 1. Karyotyping
- 2. LH and FSHV
- 3. Thyroid function tests (TFTs)
- 4. Blood and electrolytes

5. Celiac serology

Q5) A 5-year-old child with CAH presents with adrenal crisis. What is the best next step?

- 1. Start triple the oral corticosteroid dose
- 2. Administer IV normal saline
- 3. Give a stress dose of 100 mg hydrocortisone IV
- 4. Double the dose of oral corticosteroids
- 5. Start oral rehydration therapy

Q6) An 11-year-old obese male presents with acanthosis nigricans. All of the following are true except:

- 1. Initial therapy includes lifestyle changes
- 2. HbA1c >6.5% is diagnostic of diabetes
- 3. Insulin therapy (short and long acting) is the best initial treatment
- 4. This child likely has high levels of circulating anti-GAD antibodies
- 5. Obesity is a major risk factor for insulin resistance

Q7) All of the following are true regarding obesity and insulin resistance except:

- 1. Waist circumference is used in diagnosis
- 2. Hip circumference is a reliable marker
- 3. Abdominal circumference helps in assessment
- BMI is not used in evaluating insulin resistance
- 5. Anthropometric measurements guide risk assessment

Q8) All of the following cause hypocalcemia except:

- 1. Vitamin D deficiency
- 2. Hyperphosphatemia
- 3. Hypoparathyroidism
- 4. Hypermagnesemia
- Hyperparathyroidism

Q9) Which of the following statements about cystic fibrosis-related diabetes is incorrect?

- 1. Treated with multiple daily insulin injections (MDI)
- 2. Insulin pump therapy is more appropriate
- 3. Oral hypoglycemics are ineffective
- 4. It usually appears during adolescence
- 5. Screening is done annually starting at age 10

Q10) Which of the following statements is false about growth spurts?

- 1. Male growth spurt occurs earlier than female growth spurt ✓
- 2. Female growth spurt typically precedes menarche
- 3. Peak growth velocity in males is higher than in females
- 4. Pubertal growth contributes significantly to final height
- 5. Growth hormone secretion increases during puberty

Q11) Regarding premature thelarche, which of the following is true?

- Bone age is usually normal or near normal
- 2. LH and FSH are always elevated
- 3. Requires immediate hormonal therapy
- 4. Associated with rapid progression to puberty
- 5. Almost always caused by CNS pathology

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★Heme::

Q12) A 2-year-old boy with Down syndrome is diagnosed with acute megakaryoblastic leukemia (AML-M7). Which of the following is TRUE?

- 1. AML-M7 in Down syndrome has a poor prognosis
- 2. AML-M7 in Down syndrome requires immediate bone marrow transplant
- 3. AML-M7 in Down syndrome is resistant to chemotherapy
- 4. AML-M7 in Down syndrome is not associated with GATA1 mutation
- AML-M7 in Down syndrome has a better prognosis

Q13) A newborn develops jaundice 12 hours after birth. Baby is A+, mother is AB+. Coombs test is negative. Labs: WBC 15,000, Hb 10, MCV 98, MCHC 38. What is the next best step?

- 1. Abdominal ultrasound
- 2. G6PD enzyme testing
- 3. Fragility test
- 4. Exchange transfusion
- 5. Reticulocyte count

Q14) A 5-year-old presents with petechiae and bruises. Platelet count is 11,000/µL. What is the initial management?

- 1. Splenectomy
- 2. Platelet transfusion
- 3. Steroids
- 4. Rituximab
- 5. Reassurance V

Q15) A 6-year-old child with ESRD on peritoneal dialysis presents with muscle weakness and ECG shows peaked T-waves. K+ is 7.8 mEq/L. What is the most important immediate step?

- 1. Sodium bicarbonate infusion
- 2. Sodium polystyrene sulfonate
- 3. Glucose 10% infusion
- 4. IV calcium gluconate V
- 5. Labetalol

Q16) All of the following can cause macrocytic anemia EXCEPT:

- 1. Folate deficiency
- 2. Vitamin B12 deficiency
- 3. Hypothyroidism
- 4. Liver disease
- Lead poisoning

Q17) A 6-year-old presents with a salmon-pink rash and hepatosplenomegaly. Most likely diagnosis:

- 1. Rheumatic fever
- 2. Kawasaki disease
- 3. Henoch-Schönlein purpura
- Systemic-onset Juvenile Idiopathic Arthritis
- 5. Viral exanthem

Q18) Which cytogenetic abnormality is associated with a good prognosis in ALL?

- 1. t(9;22)
- 2. t(4;11)
- 3. t(12;21) 🗸
- 4. t(1;19)
- 5. t(8;14)

Q19) A patient has prolonged aPTT. A 1:1 mixing study corrects the result. What is the most likely diagnosis?

- 1. Factor VIII inhibitor
- 2. Lupus anticoagulant
- 3. Factor VII deficiency
- 4. Factor XI deficiency V
- 5. Von Willebrand disease

Q20) X-ray shows a sunburst periosteal reaction. What is the most likely diagnosis?

- 1. Ewing sarcoma
- Osteosarcoma
- 3. Osteoid osteoma
- 4. Osteochondroma
- 5. Giant cell tumor

Q21) A child presents with aniridia. This finding is most commonly associated with:

- 1. Neuroblastoma
- Wilms tumor
- 3. Retinoblastoma
- 4. Medulloblastoma
- 5. Craniopharyngioma

Q22) A 13-year-old girl reports heavy menstruation since menarche. Hemoglobin is 6.2 g/dL. No significant medical history. Most likely diagnosis:

- 1. Hemophilia A
- 2. Factor IX deficiency
- 3. Immune thrombocytopenic purpura

- 4. Von Willebrand Disease 🔽
- 5. Iron-deficiency anemia

Q23) A 3-day-old breastfed newborn presents with rectal bleeding. Born at home, no family history. Most likely cause?

- 1. Vitamin K deficiency bleeding 🗸
- 2. Necrotizing enterocolitis
- 3. Milk protein allergy
- 4. Hirschsprung disease
- 5. Hemophilia A

Q24) An infant presents with a triphalangeal thumb. CBC shows macrocytic anemia. What is the most likely diagnosis?

- 1. Fanconi anemia 🔽
- 2. Diamond-Blackfan anemia
- 3. Congenital hypothyroidism
- 4. Thalassemia major
- 5. Transient erythroblastopenia

Q25) A 3-year-old with severe dehydration and hypotension is being managed. Which statement about fluid therapy is correct?

- 1. Use colloids for fluid resuscitation in septic shock
- 2. Sodium bicarbonate should be given early
- 3. Correct hypernatremic dehydration over 12–24 hours
- In hypernatremic dehydration, correction should occur over at least 36–48 hours
- 5. Use G5W 0.18% N/S for fluid resuscitation

Q26) Which of the following coagulation factors is not affected by warfarin (vitamin K)?

- 1. Factor II
- 2. Factor VII
- 3. Factor IX
- 4. Protein C
- 5. Factor V V

Q27) A 6-year-old child presents with swelling in one joint, accompanied by redness, warmth, and limited range of motion. What is the most appropriate next step in management?

- A) Start oral NSAIDs and observe at home
- B) Order a routine outpatient rheumatology referral
- C) Start physical therapy
- D) Refer urgently to orthopedics V
- E) Discharge with reassurance

★Nephro::

Q28) All of the following cause albuminuria EXCEPT:

- 1. Henoch-Schönlein Purpura (HSP)
- 2. Amyloidosis
- 3. IgA nephropathy
- 4. Minimal change disease
- Tyrosinemia

Q29) A 7-year-old girl presents with suprapubic pain. She is afebrile and appears well. UA is positive for nitrites and leukocyte esterase. Renal ultrasound is normal. What is the best management?

- 1. Admit for IV cefotaxime
- 2. Admit for IV amikacin
- 3. Send home on oral ciprofloxacin
- Send home on oral cotrimoxazole
- 5. Send home on oral metronidazole

Q30) A 3-year-old child (15 kg) with isonatremic dehydration needs fluid maintenance. What is the appropriate fluid and rate?

- 1. 1250 mL/day of 0.9% NaCl
- 2. 1250 mL/day of D5W
- 1250 mL/day of 0.45% NaCl
- 4. 1000 mL/day of Ringer lactate
- 5. 1500 mL/day of 0.18% NaCl

Q31) All of the following are causes of hypocalcemia EXCEPT:

- Hypoalbuminemia
- 2. Hyperphosphatemia

- 3. Hypermagnesemia
- 4. Hypoparathyroidism
- 5. Vitamin D deficiency

Q32) A 6-year-old ESRD patient on dialysis presents with muscle weakness and ECG changes (peaked T-waves, prolonged PR). K+ = 7.8 mEq/L. What is the most immediate step?

- 1. Start IV calcium gluconate 🔽
- 2. Start sodium bicarbonate
- 3. Start sodium polystyrene sulfonate
- 4. Start glucose 10% infusion
- Start labetalol

Q33) A 3-year-old child presents with severe dehydration and hypotension. Which is correct about fluid therapy?

- 1. G5W 0.18% NaCl is the best for resuscitation
- 2. Colloids are preferred in septic shock
- 3. Sodium bicarbonate should be given early
- 4. In hypernatremic dehydration, correct over at least 36–48 hours V
- 5. 20 mL/kg bolus of G5W 0.45% NaCl is preferred for hypotension

Q34) All of the following about Acute Kidney Injury (AKI) are correct EXCEPT:

- 1. Most cases in developing countries are prerenal
- 2. Non-oliguric AKI can occur in neonates and some tubulopathies
- 3. ACE inhibitors precipitate AKI by blocking prostaglandins 🔽
- 4. AKI is classified based on creatinine clearance and urine output
- 5. Both hemodialysis and peritoneal dialysis are effective in AKI

Q35) Which of the following is NOT a complication of nephrotic syndrome?

- 1. Renal vein thrombosis
- 2. Hypertension
- 3. Hemolytic anemia 🔽
- 4. Growth retardation
- 5. Susceptibility to Streptococcus pneumoniae infection

Q36) Which of the following statements is correct about Post-streptococcal Glomerulonephritis (PSGN)?

- 1. Heavy proteinuria is universal
- 2. Complement levels (C3/C4) are always normal
- 3. Biopsy is required if hypertension is present
- 4. Pulse steroids are needed for low C3
- 5. It has a very good prognosis in most cases 🔽

Q37) Which of the following is true about nephrotic syndrome in children?

- 1. Diagnosis confirmed by urine protein >40 mg/m²/hr ✓
- 2. Minimal change disease causes 25% of pediatric nephrotic syndrome
- 3. OPV booster is required in new cases
- 4. Genetic mutations respond well to steroids
- 5. ASO titer >200 IU/mL confirms diagnosis

Q38) Which of the following is correct about IgA nephropathy?

- 1. Gross hematuria occurs 2 weeks after URI
- 2. Elevated serum IgA is required for diagnosis
- 3. 75% progress to ESRD
- Increased crescents on biopsy indicate poor prognosis
- 5. Low C3 level is characteristic early in disease

Q39) Which of the following statements about hematuria in children is incorrect?

- A) Hematuria associated with anemia is characteristic of urological causes of hematuria 🔽
- B) Glomerular hematuria is frequently associated with hypertension
- C) Hematuria originating from the 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

neonatology::

Q40) Which of the following is a diagnostic radiographic (X-ray) finding in Neonatal Respiratory Distress Syndrome (RDS)?

- 1. Ground-glass appearance with air bronchograms 🔽
- 2. Hyperinflated lungs with flattened diaphragms
- 3. Lobar consolidation
- 4. Cavitary lesions
- 5. Patchy infiltrates sparing the perihilar region

Q41) Which of the following is true about cephalhematoma?

- Does not cross suture lines and usually disappears within weeks
- 2. Crosses suture lines and resolves within days
- 3. Associated with significant neurological damage
- 4. Requires immediate surgical evacuation
- 5. Pulsatile and transilluminates

Q42) Which protein of pulmonary surfactant is essential for normal lung function, and its mutation can cause lethal neonatal lung disease?

- 1. SP-A
- 2. SP-B 🔽
- 3. SP-C
- 4. SP-D
- 5. SP-G

Q43) Which enzyme is primarily responsible for bilirubin glucuronidation in the liver?

- 1. Cytochrome P450
- 2. Lactate dehydrogenase
- 3. UDP-glucuronosyltransferase 1A1 (UGT1A1) 🔽
- 4. Glutathione S-transferase
- 5. Alanine aminotransferase

Q44) A full-term newborn is born through meconium-stained fluid but is vigorous. What is the next best step in management?

- 1. Intubation and tracheal suctioning
- 2. Continuous positive airway pressure (CPAP)
- 3. Chest compressions
- 4. Drying and stimulation 🔽
- 5. Endotracheal administration of artificial surfactant

Q45) Which of the following is FALSE regarding neonatal jitteriness?

- 1. It is usually stimulus-sensitive
- 2. It can be stopped by holding the limb
- 3. It is associated with significant autonomic changes V
- 4. No electro-cortical signature
- 5. It is characterized by rhythmic tremors

Q46) Which component of the Apgar score does "reflex irritability" correspond to?

- 1. Muscle tone
- 2. Skin color
- 3. Heart rate
- 4. Grimace response V
- 5. Respiratory effort

Q47) Which of the following is NOT a recognized risk factor for early-onset neonatal sepsis?

- 1. Prolonged rupture of membranes (>18 hours)
- 2. Maternal fever during labor
- 3. Maternal Group B Streptococcus (GBS) colonization
- 4. Endotracheal intubation after birth V
- 5. Preterm labor (<37 weeks gestation)

Q48) Which of the following drugs affects bilirubin binding to albumin?

- 1. Ampicillin
- 2. Gentamicin
- Ceftriaxone
- 4. Paracetamol
- 5. Vancomycin

Q49) Which condition is most likely to cause conjugated hyperbilirubinemia in a neonate?

- 1. Physiological jaundice
- 2. Breast milk jaundice
- 3. Hemolytic disease of the newborn
- 4. Biliary atresia 🔽
- 5. Crigler-Najjar syndrome



Q50) A child presents with acute gastroenteritis. All of the following are true EXCEPT:

- 1. Oral rehydration is the cornerstone of treatment
- 2. Monitor for signs of dehydration
- 3. Most cases are viral and self-limited
- 4. Use zinc supplementation in management

5. Treat the patient with anti-diarrheal drugs 🔽

Q51) All of the following cause hypocalcemia EXCEPT:

- 1. Hypoalbuminemia
- 2. Hyperphosphatemia
- 3. Hypoparathyroidism
- 4. Vitamin D deficiency
- 5. Hypermagnesemia 🔽

Q52) Which of the following cannot be caused by Hepatitis A?

- 1. Acute hepatitis
- 2. Fulminant hepatitis
- Chronic hepatitis
- 4. Jaundice
- 5. Self-limited infection

Q53) Which of the following is TRUE about Turner Syndrome?

- 1. Caused by trisomy of X chromosome
- 2. Advanced maternal age is a risk factor
- 3. Associated with increased risk of VSD
- 4. Universal short stature
- 5. Increased risk of neural tube defects

Q54) A 2-year-old male presents with 100 mL of rectal bleeding and a palpable abdominal mass. What is the most probable cause?

- Meckel's diverticulum
- 2. Intussusception
- 3. Anal fissure
- 4. Hemorrhoids
- 5. Gastroenteritis

Q55) A child presents with short stature, skin tags, fistulas, and aphthous ulcers. What is the most likely diagnosis?

- 1. Crohn's disease
- 2. Ulcerative colitis
- 3. IgA deficiency 🔽
- 4. Cow's milk allergy
- 5. Celiac disease

Q56) Upward slanted palpebral fissures are seen in which condition?

- 1. Turner syndrome
- 2. Noonan syndrome
- 3. Down syndrome V
- 4. Marfan syndrome
- 5. Prader-Willi syndrome

Q57) Which of the following features is associated with Down syndrome?

- 1. Café-au-lait spots
- 2. Webbed neck
- 3. Single palmar crease V
- 4. Broad thumbs
- 5. Tall stature

Q58) Which of the following is INCORRECT about Down syndrome?

- 1. Robertsonian translocation is the most common cause
- 2. It is the most common chromosomal syndrome
- 3. They are more likely to develop AML than ALL
- 4. Hypotonia is a common feature
- 5. Intellectual disability is typical

Q59) A 3-day-old breastfed baby presents with dark blood in stool. Physical exam is normal. What's the most likely diagnosis?

- 1. Cow milk protein allergy V
- 2. Necrotizing enterocolitis
- 3. Sepsis
- 4. Vitamin K deficiency bleeding
- 5. Hemophilia

Q60) In exclusively breastfed infants, which vitamin is likely to be deficient?

- 1. Vitamin A
- 2. Vitamin B12
- 3. Vitamin C
- 4. Vitamin D V
- 5. Vitamin K

Q61) All of the following contribute to GERD in pediatrics EXCEPT:

- 1. Supine positioning
- 2. Short esophagus
- 3. Low LES pressure
- Prone position
- 5. Liquid diet

Q62) Colostrum is low in which of the following?

- 1. Immunoglobulins
- 2. Protein
- Total fat
- 4. Vitamin A
- 5. Minerals

Q63) A child with gastroenteritis has acidic stool. What is most likely malabsorbed?

- 1. Protein
- 2. Fat
- Carbohydrates
- 4. Water
- 5. Electrolytes

Q64) Which of the following is INCORRECT about allergy?

- 1. Asthma and eczema are type I hypersensitivity
- 2. Eczema most commonly affects extensor areas in infancy V
- 3. Allergic rhinitis may lead to nasal polyps
- 4. Milk allergy is the most common allergy before age 3
- 5. Urticaria onset in children is usually acute

Q65) All of the following are TRUE EXCEPT:

- Vitamin E deficiency can lead to ataxia
- 2. Vitamin E deficiency can cause hemolytic anemia
- 3. Vitamin A deficiency causes night blindness
- 4. Vitamin D deficiency causes rickets
- Vitamin K deficiency causes scurvy

Q66) One of the following is INCORRECT regarding celiac disease:

- 1. It is an autoimmune condition
- 2. Increased risk in Down and Turner syndromes
- 3. Life-long gluten-free diet is required

- Anti-tTG IgG is the most specific for diagnosis
- 5. HLA-DQ2 and DQ8 are often positive

*exanthem::

تكرر مرتين ?Q67,68) Which of the following is WRONGLY matched

- 1. Measles Koplik spots
- 2. Rubella Forchheimer spots
- 3. Scarlet fever Strawberry tongue
- 4. Varicella Exudative conjunctivitis V
- 5. Erythema infectiosum Slapped cheek rash

Q69) Which of the following is FALSE regarding Scarlet Fever?

- 1. Strawberry tongue
- 2. Sandpaper-like rash
- 3. Fever and pharyngitis
- 4. Caused by group A Streptococcus
- 5. Vesicles on palms and soles 🗸



Q70) A 6-year-old child is found to have a murmur during a routine check-up. Further evaluation reveals an atrial septal defect (ASD). Which of the following is a constant feature of ASD?

- 1. Fixed split of the second heart sound
- 2. Loud P2 heart sound
- 3. Continuous machinery murmur
- 4. Diastolic rumble at the apex
- 5. Systolic ejection murmur at the left upper sternal border

Q71) A 4-month-old is feeding poorly, sweats during feeds, and has poor weight gain. On examination, he is tachypneic, has hepatomegaly, diminished pulses, and a murmur. Which of the following is NOT likely to cause this clinical picture of failure to thrive and congestive heart failure?

- 1. Large patent ductus arteriosus (PDA)
- 2. Large ventricular septal defect (VSD)
- 3. Truncus arteriosus
- 4. Complete atrioventricular canal defect
- 5. Secundum atrial septal defect 🔽

Q72) A 2-year-old is diagnosed with Kawasaki disease. Which of the following is NOT a risk factor for coronary artery disease (CAD) in Kawasaki disease?

- 1. Fever lasting more than 16 days
- 2. First-degree heart block V
- 3. Cardiomegaly
- 4. Age <1 year
- 5. Male gender

Q73) All the following are true regarding Multisystem Inflammatory Syndrome in Children (MIS-C) EXCEPT:

- The risk of ICU admission was higher in Kawasaki disease patients than in MIS-C patients
- 2. Cardiac involvement is more common in MIS-C
- 3. COVID-19 positivity is higher in MIS-C (75.5%) than Kawasaki disease (20%)
- 4. It is an inflammatory syndrome that resembles Kawasaki disease
- 5. It is linked to SARS-CoV-2 (COVID-19) infection.



Q74) Which of the following statements about croup is INCORRECT?

- All cases of stridor should be admitted
- 2. Barking cough is a hallmark feature
- 3. Nebulized epinephrine is used in severe cases
- 4. Most cases are caused by parainfluenza virus
- 5. Systemic steroids are the mainstay of treatment

Q75) A 10-year-old child with a history of asthma presents with an acute exacerbation. Which of the following is NOT used in the acute management of asthma exacerbation?

- 1. Short-acting beta agonists (SABA)
- 2. Inhaled corticosteroids
- 3. Magnesium sulfate
- 4. Systemic corticosteroids
- 5. Leukotriene receptor antagonist V



Q76)Which of the following is NOT an indication for neuroimaging in seizure disorders?

- A) Partial onset seizures
- B) Complex febrile seizures V
- C) Neonatal seizures
- D) Persistent altered mental status
- E) New focal neurological deficits.

Q77)Which statement about febrile seizures is INCORRECT?

- A) They typically occur between 6 months and 5 years of age
- B) Complex febrile seizures last more than 15 minutes
- C) Complex febrile seizures are a risk factor for recurrence 🔽
- D) They are associated with an increased risk of epilepsy
- E) Intracranial infections must be excluded to diagnose febrile seizures.

Q78) Which of the following statements about ADHD and Autism Spectrum Disorder (ASD) is INCORRECT?

- A) ADHD is characterized by a communication defect 🔽
- B) Autism Spectrum Disorder involves restricted and repetitive behaviors
- C) ADHD is more common in boys than girls
- D) Autism Spectrum Disorder includes social communication deficits
- E) ADHD can be managed with stimulant medications.

Q79) Which of the following clinical findings is MOST inconsistent (mismatched)?

- A) Duchenne muscular dystrophy Gower's sign
- B) Becker muscular dystrophy No calf hypertrophy 🔽
- C) Myotonic dystrophy Distal muscle weakness

D) Duchenne muscular dystrophy – Onset before age 5					
E) Becker muscular dystrophy – X-linked recessive inheritance.					
Q80) Which of the following is NOT a treatment option for epilepsy?					
A) Dorsal rhizotomy 🗸					
B) Ketogenic diet					
C) Vagal nerve stimulation					
D) Surgery					
E) Antiepileptic medications.					
Q81) Which statement regarding cerebral palsy (CP) is NOT true?					
A) Diagnosis is primarily clinical					
B) Normal development rules out CP					
C) CP is a disorder of movement and posture					
D) CP has a progressive course 🗸					
E) It results from early brain injury.					
Q82) A 12-year-old obese girl presents with papilledema, normal CSF, and normal brain imaging. What is the most likely diagnosis?					
A) Migraine					
B) Acute meningitis					
C) Pseudotumor cerebri 🗸					
D) Hydrocephalus					
E) Cerebral abscess					
Q83) Which of the following statements about headache is INCORRECT?					
A) Tension headache – Daily frontal pain					
B) Cyclic vomiting – A complication of migraine 🗸					

C) Morning headache – May suggest a posterior fossa tumor D) Migraine – Involves serotonin pathways

Q84) A newborn has severe respiratory distress, scaphoid abdomen, and absent breath sounds on the right. What is the most likely diagnosis?

- A) Meconium aspiration
- B) Congenital diaphragmatic hernia 🔽
- C) Bronchopulmonary dysplasia
- D) Pneumothorax.

Q85) Which CSF finding is incorrectly matched with its diagnosis?

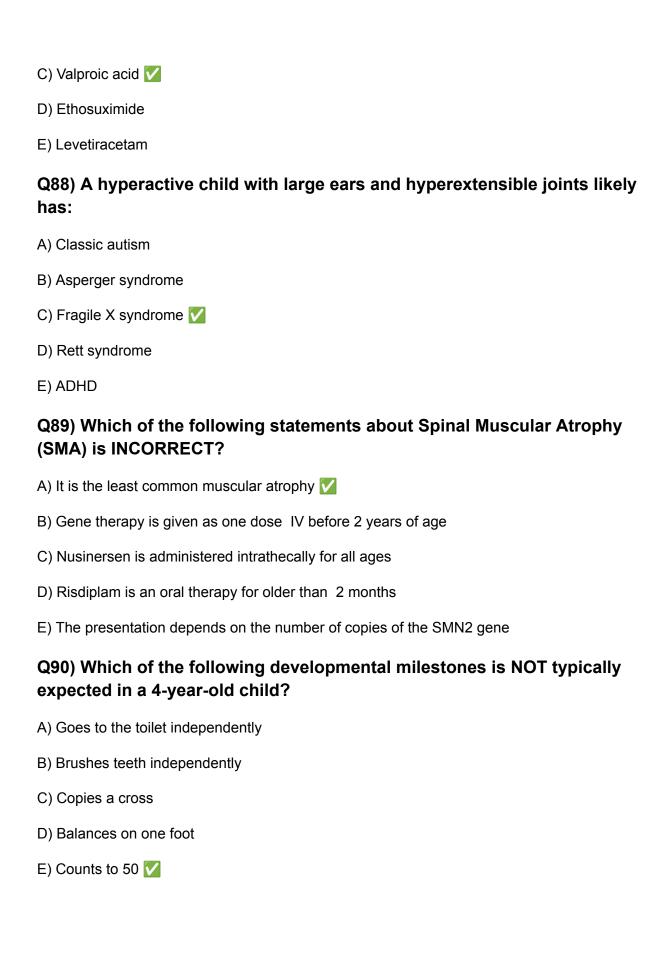
- A) GBS Elevated protein, normal cells
- B) Bacterial meningitis Neutrophils ↑, Glucose ↓, Protein ↑
- C) TB meningitis Lymphocytes ↑, Glucose ↓, Protein ↑
- D) Viral meningitis Lymphocytes ↑, Glucose normal
- E) GBS Low protein, lymphocytes ↑ ✓

Q86) A child who can hold a spoon should have all of the following developmental skills EXCEPT:

- A) Symbolic play
- B) Holding a cup with one hand
- C) Kissing parents
- D) Saying 10 single words
- E) Kicking a ball V

Q87) Which antiepileptic drug is most commonly associated with hepatotoxicity, weight gain, and hair loss?

- A) Phenytoin
- B) Carbamazepine



Q91) A 3-year-old child is diagnosed with bacterial meningitis, and CSF culture reveals gram-positive diplococci. What is the most appropriate initial empirical antibiotic therapy?

- A) Ampicillin alone
- B) Ceftriaxone and vancomycin V
- C) Vancomycin alone
- D) Gentamicin and ampicillin
- E) Oral amoxicillin

Q92) Which of the following statements about Oral Polio Vaccine (OPV) and Inactivated Polio Vaccine (IPV) is INCORRECT?

- A) Both OPV and IPV contain all 3 serotypes of poliovirus V
- B) OPV is administered orally
- C) OPV provides better intestinal immunity compared to IPV
- D) IPV is given by injection
- E) OPV can cause vaccine-associated paralytic polio.

Q93) Which of the following statements about the rotavirus vaccine is correct?

*مش كثير متأكدين من الصيغة بس هيك كانت الفكرة

- A) RotaTeq is given in 2 doses
- B) RotaRix requires 3 doses for full immunization
- C) RotaRix is included in the national immunization program in Jordan 🔽
- D) RotaTeq is given as a single dose at 6 months
- E) RotaRix is administered via intramuscular injection.

