

Pediatrics

Pediatrics 6th year 2018

Respiratory

1. Not associated with recurrent pneumonia in different regions:
 - foreign body aspiration*?
 - chronic aspiration syndrome
2. Clinical picture of bronchiolitis, baby in ER with signs of respiratory distress, what is your action: give O₂
3. Wrong about asthma: FEV/FVC > 80%
4. Picture of mild persistent asthma: SABA and daily inhaled CSs
5. what is wrong about CF: I guess the answer was restrictive picture early in disease (I think it's obstructive picture, not sure though)
6. 3 year old Child had lobar pneumonia, started on abx, he improved for some days then he came back with pneumonia presentation, CXR showed cavity: (Acute pneumonia followed by a sequel of cavitation), what is the most likely causative agent?
 - staph.aureus*?
 - mycoplasma pneumonia
 - strep.pneumonia

I think they mean by cavitation (pneumatocele), Which is caused mostly by staph.aureus (this was my answer), But the "lobar" pneumonia is confusing as it is mostly caused by s.pneumonia.
7. You are in ER, parents brought their baby (infant) with respiratory distress signs, The most accurate way to assess oxygenation:
 - Hb
 - pulse oximetry?
 - arterial blood sample*
8. Child with barking cough,... (Presentation of croup) next step:
Nebulized epinephrine and Systemic dexamethasone*

Hematology/oncology

9. Most common cause of isolated thrombocytopenia : ITP
10. What is wrong about iron deficiency anemia: TIBC is decreased
11. 12 year old girl with asymptomatic abdominal mass, you suspected a tumor, what is most likely tumor: Wilms tumor
12. Wrong combination about tumors:
 - retinoblastoma = white pupillary reflex
 - neuroblastoma = hematuria*

13. Child had infection, treated with trimethoprim/sulfamethoxazole, he developed hemolytic anemia, what is the cause:
- G6PD*
14. One of the following doesn't increase the risk of leukemia:
- Bartter syndrome**
 - Ataxia telangiectasia
 - Down syndrome
 - Fanconi anemia (not sure if it was written anemia or SYNDROME, because fanconi syndrome doesn't increase the risk)
 - Myelodysplastic disorders

neurology

15. 3 year old child doesn't respond to name or commands, good eye contact, stares at his hands, stereotyped hand movements, no symbolic play dx?
- cerebral palsy
 - autism spectrum disorders
 - Deafness*
 - Normal
 - kernicterus
- (There should be more things to diagnose autism not only social/communicative problems and stereotypical behavior (although they are the most important). You should have at least one of these too beside the stereotypes: insist on sameness, sensory sensitivities and obsessional (restricted) interests.)
16. Which of following has best prognosis:
- becker dystrophy*
 - duchenne dystrophy
 - myotonic dystrophy
17. Wrong about ADHD:
- occurs in 10% of school age group
 - sx at least for 6 months to establish dx
 - can be diagnosed before age of 6 years
 - most of patients show improvement by age of 18
18. Wrong about Erb duchenne:
- limited to C5 and C6 ** (it may involve C7)
 - spares hand grasp
 - associated with forearm weakness

19. Associated with cerebral palsy:
- brain parenchymal injury*
 - bronchopulmonary dysplasia
20. 2 year old patient, says 100 words but not sentences, tip toes, has weakness in his left arm, can scribble when given a paper, was premature and was admitted to the NICU as a baby, most likely cause of his developmental delay:
CP*
21. All are types of neonatal seizures except:
- Tonic seizures
 - Clonic seizures
 - Myoclonic seizures
 - Subtle seizures
 - Absence seizures*
22. All are considered classifications of migraine except:
- Migraine with aura
 - Migraine without aura
 - Probable migraine
 - Chronic migraine
 - Secondary migraine*
23. All are causes of muscle fatigability except:
- Transient neonatal MG
 - Congenital MG
 - Eaton Lambert syndrome*?
 - Pyridostigmine?
24. Wrong about autism spectrum disorders :-
- EEG not needed if no seizure
 - Recurrence risk is negligible if no cause identified*
 - No relation to immunizations
 - No evidence of benefits of dietary intervention

Immunology/genetics

25. Increased risk with advanced paternal age?
- New mutation in Autosomal dominant **
 - Uniparental disomy
 - Mitochondrial
26. Associated with delayed cord separation due to omphalitis :
- Phagocytic cell defect**
 - Complement deficiency

27. Associated with increased susceptibility to fungal infx:
T-cell defect?
28. Wrong about ornithine transcarbamylase deficiency? X-linked dominant
29. Anaphylactic reaction due to peanut ingestion:
IM epinephrine
30. All are true except :-
Retinoic acid is safe early in pregnancy
31. All are associated with inherited metabolic disorders except :-
-Cardiac decompensation
-situs inversus*?
-sudden infant death syndrome SIDS?
32. Wrong about FMF:
-It is restricted to Mediterranean region* (I think this is the answer. It rarely happens in other regions but it still could happen)
-It is not a disease of exclusion of other causes

Neonatology/general

33. All of following considered normal finding in newborn except:
- mongolian spot
- leukocoria*
- mottled skin
- erythema toxicum
- acrocyanosis
34. What is APGAR score for baby immediately crying after birth, flexed upper and lower limbs, blue feet but pink under the tongue, HR 102, he was sneezing when you carried her to mother:
9*
35. Child walks into clinic accompanied by his parents, he threw his ball to you when you asked him to do, and when you threw it back he reached to catch it but his balance disturbed and he fell down, then he managed to rise alone while he is laughing and smiling to parents. He could put 2 cubes together. He was able to draw a line:
- 12 months*?
- 15 months?
36. Mother put her baby gently on the examination table, baby smiles to you but made no voices, hands closed:
2 months*

37. Mother put her baby on the exam table, she pulled her foot to mouth, when mother showed her a mirror she grasped it and enjoyed looking at her mirror image:
- 6 months*
 - 9 months
38. One of the followings is consistent with physiologic jaundice:
- Total bilirubin increases with a rate of less than 5 mg/dl from the 2nd day to the 5th day
39. You suspect child abuse in:
- Subdural hemorrhage with a history of minor trauma*
- frontal head bruises
40. Not a part of newborn screening:
- FMF**
 - G6PD
 - Phenylketonuria
 - Hypothyroidism
 - Galactosemia
41. Preterm newborn on expressed breast milk, developed hypophosphatemia, Alkaline phosphatase was high, calcium was normal, what is the cause:
- iatrogenic hypophosphatemia
 - osteopenia of prematurity
 - vit d deficiency
42. Of following types of shock, which is m.c in children:
- septic shock*
 - anaphylactic shock
 - tension pneumothorax
 - pulmonary embolism
43. Post-term neonate, with meconium aspiration presentation, all of the following could be found on X-ray except:
- Air bronchogram **
 - fine infiltrates
 - hyperinflation
44. 3 year old child admitted to ICU after being diagnosed with shock, what of following would not support your dx:
- capillary refill time 5 seconds
 - urine output decreased
 - systolic blood pressure 120*?
 - irritable and crying
45. You have attended preterm delivery, baby was tachypnic and had retractions, managed by nasal CPAP, after 2 hrs, he still have respiratory distress, admitted to NICU, what is

the underlying mechanism of this illness:

- surfactant deficiency* (I think it is a case of RDS not TTN, supported by being preterm and presence of retractions)
- residual pulmonary fluid

46. You suspected neonatal sepsis and ordered some tests, what of following is abnormal and diagnostic of sepsis:

- I:T ratio is 40% *

47. A case of ARDS which doesn't contribute to hypoxia

- quantitative Surfactant deficiency
- V/Q mismatch
- Intrapulmonary shunting
- High A-a gradient
- Pulmonary hypertension

48. About neural tube defect:

- Failure of rostral end of neural tube to close

49. While consulting a first-time mother, she asked you about similarities between breast milk and regular formula, you would tell her that they are similar in which of following:

- same vitamin d content
- same protein content
- same oligosaccharide content?
- same sugar content*

50. Wrong mismatch:

- vit E def - hemolytic anemia
- Vit D def - rickets
- Vit C def - gingivitis
- Vit b12- megaloblastic anemia
- vit A def – alopecia*

51. mother was given corticosteroids antenatally : doesn't reduce post natal growth

GI

52. Wrong about Hirschsprung disease :

- Encoporesis is common *
- Dx before the age of 3 yrs

53. Chest xray with oral contrast for newborn with excessive salivation:

- Esophageal atresia

54. Least appropriate mgt in GER in neonate: PPI*

55. NG tube for nutrition, complication? Hypophosphatemia

56. In evaluation of a child with chronic pancreatitis, you screen for all following except:
- low calcium level*
 - high calcium level
57. School aged child presented with rectal bleeding, all of following could be true except:
- anal fissure could be a cause
 - you should exclude milk protein allergy*
58. In evaluation of a child with recurrent abdominal pain, you can do all of following except:
- celiac disease screening
 - serum H.pylori antibodies*?
 -
59. Not true in management of neonatal cholestasis:
- change to MCTs containing formula
 - Ursodeoxycholic acid can be used
 - Urine culture should be done
 - U/S after age of 4 months*
60. Fever + bloody diarrhea, most likely organism:
- Shigella*
 - salmonella

endocrine

61. Clinical picture of DKA (labs and sx), initial mgt:
- Insulin bolus then insulin infusion
 - IV NS **
62. A case of low T4 and Normal TSH, cleft palate, what is the most common cause:
- Central Hypothyroidism*
 - thyroid dysgenesis
63. Not in Vitamin D deficiency Reckits:
- High Ca-Cr ratio*
64. 14 year old boy with short stature and delayed puberty, bone age is delay, growth velocity is normal, what is next step?
- Reassure (it is constitutional short stature)
65. Child presented to ER with shock, scrotal hyperpigmentation, Na 120, k 6, hypoglycemia, hypotension (case of adrenal crises), you do all of following except:
- emergency injection of glucocorticoid
 - fludrocortisone
 - IV normal saline

- IV 5% dextrose
 - kyxalate*
66. 7 year old male presented with pubic hair (tanner staging 3), axillary hair and acne, testicular volume prepubertal size, no FHx of precocious puberty, most likely cause:
- adrenal cancer*
 - testotoxicosis

Nephrology

67. A case of a child presented with hypokalemia, metabolic alkalosis, high urine Cl- (60), and normal blood pressure:
 Bartter syndrome*
 Liddle syndrome
68. patient took Gentamicin for infection, developed hematuria, muddy casts and had no fever or elevation in inflammatory markers, the most likely cause is:
 -ATN*
 -PSGN
69. Hyponatremia 121, seizure, vomiting, less wet diapers, low serum osmolality high urine Na and osmolality, treatment :-
 Fluid restriction
 Diuretics
 3% hypertonic Saline **
70. Child with Steroid dependent nephrotic syndrome developed pyelonephritis(abdominal pain, fever..) Next step:
 3rd generation cephalosporin*
71. Not with prerenal AKI :
 High FENa**
 High BUN/Cr
 High urine osmolality
 Fluid loss
72. 7 year old boy with recurrent hematuria, his uncle has renal failure, his father complains of renal stones, what is the most likely dx: (I can't remember the rest of question)
 -IgA nephropathy
 -Alport syndrome
 -hypercalciuria
73. Girl with hx of recurrent UTI: do MCUG
74. Child with hypertension, you do all of following for investigation except:
 - echocardiogram
 - U/A and urine culture

- renal U/S
 - thyroid function test
 - renin aldosterone levels
75. u give for CKD all the following as a treatment except:
- Erythropoietin
 - BiCarb ?
 - ACEI ?
 - 1 alfa Vit d
 - CaCO₃
76. question about hypernatremia Na 170, management:
- 0.45 NS over 24 hrs
 - 0.45 NS over 48 hrs
 - 0.18 NS over 24 hrs
 - 0.18 NS over 28 hrs

Infectious/vaccinations

77. Not a live vaccine:
- MMR
 - Rota
 - Hep A*
78. Not contraindication for MMR vaccine:
- previous febrile seizure*
79. Which is not true about OPV in comparasion with IPV:
- can cause polio in 1/1000 vaccinated children*
80. Not transmitted by feco-oral route:
- polio
 - rota
 - Hep B*
 - Hep E
81. M.c.c of neonatal sepsis at term:
- S. Pneumonia
 - Staph aureus
 - Lestieria
 - S. Agalactia*(it is another name for GBS -.-)
82. True combination about rash and its cause:
- varicella = maculopapular?
 - measels = vesicular
 - purpura = meningococccemia?

83. Recurrent pyelonephritis resistant to amoxicillin:
We give Azithromycin *
84. Not for MRSA: Imipenim
85. Neonatal sepsis: Ampicillin+Amikacin
86. 1 year child came to take MMR vaccine what other vaccine he can take not in international program? Varicella
87. Follow up after recovery from meningitis :-
Hearing assessment
88. Picture of infectious mononucleosis (boy with fever and sore throat with exudate, No runny nose, developed a rash after amoxicillin):
- no need for antibiotics

Cardiology

89. ECG for 12 y/o with recurrent episodes of palpitations and SOB during the last 2 months, dx:
-SVT*
90. Not of major criteria of Rheumatic fever: Fever*
91. What is the aim of mgt of Kawasaki with IVIG: to prevent coronary artery aneurysm
92. correct about cardiomyopathy: dilated cardiomyopathy is systolic
93. All of following could be an innocent murmur except:
- 4 month old baby with 2/6 systolic murmur associated with fever
- child with 2/6 diastolic murmur** (it is never diastolic)
- other choices were 2/6 murmur in different ages
94. Case of acute rheumatic fever, what would you see on echocardiogram: mitral regurgitation
95. 1 week old baby who with pallor and mottled skin, S3 gallop.. picture of HF, most likely dx: VSD
96. 5 month old baby with cyanotic spells (for 2 months) occur while he is crying, systolic ejection murmur on left parasternal, other signs: TOF

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Infectious diseases

- 1- Not in Jordanian vaccine programme – pneumococcal vaccine
- 2- A contraindication of a vaccine – anaphylactic reaction to that vaccine
- 3- Contraindicated if a brother (household resident) has leukemia and is on chemo – OPV
- 4- Not an adverse effect of MMR – encephalopathy
- 5- Mother has hepatitis B surface antigen, give to neonate in 12 h – immunoglobulin and vaccine in different injections
- 6- Most common cause of pediatric skin and bone infections – S aureus
- 7- Vancomycin is added to emperic therapy of post-neonatal meningitis to cover – resistant S pneumoniae
- 8- Wrong about pediatric pneumonia – S pneumoniae is most common cause of neonatal meningitis
- 9- First line for neonatal pertussis – azithromycin
- 10- Wrong about otitis media – clindamycin is first line
- 11- Wrong about beta hemolytic streptococci – has 10% resistance to penicillin
- 12- Child with painful, pale rash of the extremities and mouth, extending to tongue, palate and buccal mucosa, most likely cause – coxsackie virus A
- 13- A child with a high fever, lasting 3 days, resolved at fourth day followed by maculopapular rash, mostly – roseola infantum
- 14- Child with joint swelling and holosystolic murmur, true – mostly affects mitral valve
- 15- Not a complication of varicella infection – subacute sclerosing panencephalitis

Neonatology

- 16- Empirical therapy for neonatal sepsis at 2 days of age – ampicillin and gentamycin
- 17- Most common cause of neonatal sepsis – group B streptococcus and E coli
- 18- Not a useful test in neonatal sepsis at 2 days – urine culture
- 19- A sign in a newborn that does not require further investigation – Mongolian spots
- 20- Apgar score of a newborn with vigorous cry, heart rate 150, cried when bottle withdrawn, flexed arms and legs and tongue cyanosis – 7
- 21- Born at 37 weeks, clear amniotic fluid, in respiratory distress after birth requiring CPAP and intubation, most likely cause – respiratory distress syndrome
- 22- Born at 39 by caesarian section, shortness of breath in 2 hours, clear amniotic fluid, wrong about him (TTN) – the onset of this condition is usually after 24 hours
- 23- Wrong about cephalohematoma – resolves in 2 days

Gastrointestinal system

- 24- Wrong about hepatitis A – is appropriate for all ages
- 25- 2 month old with constipation, unlikely cause – celiac disease
- 26- 8 weeks with bleeding per rectum of 2 weeks, not a relevant question – family history of IBD

- 27- 13 years with recurrent abdominal pain, not a relevant question – drug history of penicillin allergy
- 28- Formula if choice for child with cow's milk protein allergy – casein hydrosylate formula
- 29- Not a means of nutrition for a child with poor suckling – feeding with parenteral maintenance fluids
- 30- Not a useful study in an 8 month child with recurrent vomiting and infrequent bowel motions – abdominal US (?)
- 31- Should be supplied if exclusive breast feeding – vitamin D
- 32- Exclusive breast feeding is recommended for at least – 6 months
- 33- Not a cause of recurrent pancreatitis – hypocalcemia

Endocrinology

- 34- Average length of full term infants at birth - 50cm
- 35- Not a cause of acquired growth hormone deficiency – sino-optic dysplasia
- 36- Not a cause of peripheral precocious puberty – supracellar arachnoid cyst
- 37- Not seen in adrenal insufficiency secondary to steroid withdrawal – normal ACTH
- 38- True about DKA – most common cause of mortality is cerebral edema
- 39- Wrong about type 1 DM – should be encouraged to decrease physical activity
- 40- Child at 5 months, birth weight 3.2, length 50cm and head circumference 35cm. True about her now – weight is around 6 kg
- 41- Not a risk for neonatal hypoglycemia – term
- 42- Not seen in renal osteodystrophy – low serum phosphate
- 43- Wrong about male puberty – peak growth velocity in G3

Neurology

- 44- True about global developmental delay – it is rare to identify the cause
- 45- Child that laughs out loud, developmental age – 4 months
- 46- Child that speaks 8 words, points to body parts when told, uses spoon, most likely age – 21 months (?)
- 47- Child at 10 months, cannot sit alone, has spastic lower limbs, had birth asphyxia, wrong – his motor deficit will improve with time
- 48- It is recommended to screen for autism between – 18-24 months
- 49- Wrong about ADHD – most children become normal by the age of 18
- 50- Does not distinguish headache – happens during school time
- 51- A likely cause of tongue fasciculations – type 0 spinal muscular atrophy
- 52- Not in the management of acute-subacute Guillain-Barre syndrome – Steroids
- 53- A sign of child abuse – Presence of associated injuries
- 54- Not a risk factor for child neglect – mother concerned about her child
- 55- Wrong about simple febrile seizures – focal neurological deficits
- 56- Age of at which can see colours – birth (the doctor said babies see all colours and shapes at birth, Internet says 5 months)
- 57- Age at which turns head for noises – not sure (internet says 5 months)

Genetics and metabolism

- 58- Wrong about birth defects – 2% of newborns have birth defects
- 59- Wrong about metabolic screen of newborn – second-generation sequencing is the standard of care (?)
- 60- Not a likely manifestation of an inborn error of metabolism – cyanotic heart disease
- 61- True about inborn errors of metabolism – fatty acid oxidation disorders are a risk factor for sudden infant death syndrome
- 62- Not a risk factor for developmental dysplasia of the hip – polyhydramnios (?)
- 63- Not a risk factor of cleft lip/palate – prenatal injury
- 64- Completely differentiates autosomal dominant from X linked inheritance – male-to-male inheritance

Hematology and oncology

- 65- Wrong about hemophilia A – deficiency of factor 9
- 66- First line for acute ITP with mild purpura and platelets at 50k – **no treatment**
- 67- Not in iron deficiency anemia – low total iron binding capacity
- 68- Wrong about Wilm's tumour – can present in the mediastinum
- 69- Not in tumor lysis syndrome – hyponatremia

Nephrology

- 70- A urine test diagnostic of UTI – pyuria with positive culture
- 71- A child with a seizure, cola coloured urine, headache and periorbital edema, had a sore throat one month ago, mostly seen in the urine analysis – numerous RBC casts with 3+ protein
- 72- A child with bloody diarrhea, followed in a week by oliguria, hypertension, moderate dehydration, anemia, low platelets and high creatinine. Not in the management – aggressive fluid replacement with 7% deficit
- 73- A child with ascites, periorbital edema, scrotal edema, low albumin, proteinuria, management – prednisone, albumin, furosemide
- 74- A child with RBC casts and proteinuria, not in the initial work up – spot urine calcium/creatinine ration
- 75- 10 kg child with diarrhea, thirst, no signs of dehydration, 24 hour fluids - 1500ml
- 76- Child with lethargy, sunken eyes and depressed fontanelle, with hyponatremia, low urine sodium, most likely cause – gastroenteritis
- 77- Not a cause of child hypertension – renal tubular acidosis
- 78- Cannot present with hypokalemia – congenital adrenal hyperplasia
- 79- Not in renal azotemia – fractional excretion of Na is low

Immunology and allergies

- 80- Wrong about IgA deficiency – autosomal recessive
- 81- Wrong about DiGeorge – hypercalcemia is severe
- 82- Wrong pair – Pneumocystis carinii pneumonia/b cell deficiency

- 83- Child with lower limb and buttock petechia, abdominal pain and joint swelling, normal coagulation profile, mostly – Henoch-Schenlein purpura
- 84- Wrong about asthma – most children with recurrent wheezes continue to have asthma in adulthood
- 85- Not seen in asthma – weight loss
- 86- Not a risk factor for persistence of pre-school wheezes – penicillin allergy

Respiratory system and critical care

- 87- Child with inspiratory stridor, barking cough and hoarseness, wrong – nebulised bronchodilators are the mainstay of treatment
- 88- Wrong about viral bronchiolitis – usually needs a chest x ray to confirm diagnosis
- 89- Most common cause of pediatric shock – hypovolemic
- 90- The mechanism of decreased cardiac function on hemorrhagic shock – decreased preload
- 91- Most common cause of pediatric hypoxia – ventilation perfusion mismatch
- 92- Not diagnostic of cystic fibrosis – low immunoreactive trypsinogen in the serum
- 93- Not seen in cystic fibrosis – low serum immunoglobulin
- 94- Not an anatomical difference in neonates that makes them more susceptible to respiratory failure – no sure (cephalad and anterior trachea?)

Cardiology

- 95- Neonate with cyanosis, mostly – transposition of great vessels
- 96- Child with respiratory distress, fatigue, sweating, displaced apex beat, hepatomegaly and soft systolic murmur at left sternal border, mostly – VSD
- 97- Wrong murmur – systolic murmur, heard at apex, radiates to axilla, of mitral valve stenosis
- 98- Child with systolic ejection click and midsystolic murmur, radiates to suprasternum, prominent and displaced cardiac apex beat, true – ECG would show LVH
- 99- Heart rate on ECG – 75
- 100- Wrong about child circulation – 160 heart rate in a crying 6 month old child is within normal

Pediatrics 6th year 2017

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1- A 12 year old girl came with her parents to your clinic for Hepatitis B workup . They brought their labs with them which are: bilirubin 0.8 , albumin ~3.5 .

HbsAg positive, HbsAb negative, core antibody positive. Which of following is true?

- the patient has hep B infection
- the patient is a carrier
- the patient is immunized
- no infection

2-Which of the following is not a cause of hypoglycemia in a newborn :

- infant of diabetic mom
- hyperinsulinemia
- small for gestational age
- hypothyroidism*
- adrenal insufficiency

3-Most common cause of congenital hypothyroidism is :

- thyroid dysgenesis*
- central hypothyroidism
- thyroglobulin ...etc
- enzyme defecincy

4-What is the outcome of a child with Minimal change disease when he gets 16 years old:

- he will mostly recover
- he will have persistent protinuria
- renal impairment
- he will have relapse

5-Baby can stand alone, through objects upon commands, GA: 12 month

6- Wrong match:

Circle: 2y

Triangle: 5 years

Cross: 3 years**

7-. Wrong match:

Refer to self using "I" .. 4 years**

8-A child with pharyngitis and penicillin allergy , what would you give him :

- azithromycin*
- cephalosporin
- vancomycin

9-What is the mechanism of action for cephalosporin :

- PBP
- cell wall permeability
- protein subunit 50
- protein subunit.30
- DNA ..etc

10-What of the following have no effect on pseudomonas :

Ceftriaxone

11-What of the following have no effect on MRSA ?

Meropenem?

12-According to DKA management protocol , what of the following is an indication to give sodium bicarb :

- sodium bicarb less than 10
- life threatening hyperkalemia *
- high urea level
- shock responsive to inotropes

13- a child with mild systolic murmur might have any of the following except :

- a.aortic regurge ?
- b.pulmonary stenosis
- C.innocent murmur
- d.ASD
- E.mild anemia

14- among the following what is not likely to give a right ventricular heave :

- a.pulmonary htn
- b.pulmonary stenosis
- c.tetralogy of fallot
- d.pericardial effusion*

15-a child with systolic murmur heard on left sternal border and displaced impulse has:

- a.VSD *

16-a child with large ASD , what is the correct statement:

- a. He might get Eisenmenger in late childhood
- B.he might get paradoxical embolism
- c. Even if he asymptomatic we should surgically repair it

17- not a live attenuated vaccine :

- a.Hepatitis A *
- B.MMR
- c.Varicella
- d.BCG

18- Rota vaccine schedule in Jordan :

- a. 1,2,3 months
- b. 2,3,4 *
- c. 2,4,6

19- Increase Maternal age is not a risk factor for :

- down
- turner *
- edward
- patau

20- epilepsy difficult to respond to pharmacological to :

Lennox gaustaut

21- A Child with typical history of pyloric stenosis , what is wrong about it :

- a.equally affects male and female *
- b.Siblings of affected have higher risk having it
- c.surgically treated

22- a 10 month old infant with hx of acute gastroenteritis , he has mild dehydration . What to do :

- a. Continue breast feeding and regular diet *
- b. Stop breast feeding and give ORS for 48 hours
- C. Keep NPO

23- a child with hx of recurrent vomiting'also pyloric stenosis' .. what is likely to be his labs :

- a.PH 7.5 , CL 80 , "hypochloremic metabolic alkalosis"

24-which is not effective to manage gastroesophageal reflux in an infant:

- a.parents stop smoking

b. تَدشِيه

c. H2 receptor blocker *

d. Thicken formula

25-comparing breastmilk and standard cow milk formula , what is wrong :

a. have the same carbs amount

b. same protein components

c. Same amount of vitamin D *

d. same fat component

26-Patient 8 months old , hb is 5 , hbf is 90% hbA2 2.5 has :

Alpha major

Beta thalasemia major

Persistent hemoglobinemia

Blackfan diamond

Aplastic anaemia

27- First to improve after iron replacement :

Appetite*

Reticulocytosis

28- Patient of minimal change who has hypoalbuminemia and generalised edema what not to give:

Albumin and furosimide

Steroids

ACEI *?

salt restriction

29- All is true about Kawasaki except :

Fever of 5 days

Non purulent conjunctivitis

Majority will develop CAD if not treated *?

Desquamation occurs in the subacute phase

30- The onset of temper tantrum -.-

1-2

2-4 *?

4-6

3-6

31- Least likely to occur in a 2 month baby with bronchiolitis:

- Acute respiratory failure requiring mechanical ventilation
- Apnea requiring ventilation
- Reactive airway disease in adulthood ?

-it usually takes many weeks for recovery?

-secondary bacterial pneumonitis

32-Febrile patient with meningeal signs and papilledma and left sided weakness, what to do :

- Give antibiotics as soon as possible
- CT scan*

(There are two indications to do CT here (papillediema and focal neurologic deficit). The CT is done to rule out space occupying lesion causing increased intracranial pressure. If no mass is found then we do LP THEN give abx. If mass was found we give abx right away Cuz LP is CI in this case because of risk of brain herniation)

33- how to best differentiate between complex partial seizure and absence seizure :

- a. EEG *
- b. Brain MRI

34-True about autistic spectrum ..etc :

- a. Rett is not included

35:a hx of child with hypotonia at birth and now leg spasticity , a hx of difficult labor, what is true :

- a. His motor symptoms will improve as he ages
- b. He will get epilepsy
- c. He will get GDD

36- all true about physiologic jaundice except:

- indirect hyperbilirubinemia
- in the 2nd or 3rd day
- peak bilirubin 10
- non blanching rash*

37- One is absolute CI for giving a cellular pertussis vaccine:

Anaphylaxis to eggs

Anaphylaxis to prior whole cell vaccine*

Convulsions within 3 days

Shock after vaccine

38- What is false about acetaminophen poisoning:

Measure plasma level at 4 hr

Use ipecac to induce emesis*

Causes liver toxicity

Asymptomatic patient isn't safe

(Inducing vomiting with syrup of ipecac has no role in paracetamol overdose because the vomiting it induces delays the effective administration of activated charcoal and oral acetylcysteine)

39- Wrong about vitamin D deficiency:

- low PTH *

- low calcium

- low phosphate

40- Pt with typical presentation of Kartagener, What is true:

PPD is diagnostic

Diagnosis is only made with bronchoscopy

Electron microscope can confirm diagnosis*

41- Patient with phenylalanine metabolic problems what not to do:

Genetic testing

Checking if it's malignant hyperphenylalaninemia

Give phenyl alanine free diet immediately*

42- 12 year old who is training had chest pain on the left side with tenderness

And normal ECG what to do next:

Reassure it's muscular pain

Chest x ray

Echo for excluding pericardial effusion

43- Male with signs of precocious puberty (puberty testicles size)..what the best next step:

Hypothalamic-pituitary MRI*

Check 17 hydroxyprogesterone ...

44- You were in NICU and suspected neonatal sepsis, what would mostly confirm your diagnosis?

- neutrophils in CSF > 50 %
- I :T ratio of 40% ??
- number of platelets

45- true about criteria for JIA :

- Below 6 years
- Disease for ≥ 6 wks *
- Progression determined by presenting one month after diagnosis

46- What not to use in anaphylaxis?

Theophylline *?

Beta 2 agonist

Antihistamine

Corticosteroids

47- What is wrong in normal examination of newborn?

- the skin is of high fragility and extensibility*
- protrusion of fingertips from the nail base in post term could be normally present
- erythema toxicum appears in the first 1-3 days ..
- pastular melanosis could be present at birth on the back, neck, chin, and extremities

48- A child has proteinuria on routine screen

What is the next step:

Kidney biopsy

Complement level

Morning urinalysis

Renal US

Morning UA*

49- Wrong about neonatal resuscitation:

- positive pressure ventilation is the first step
- age of viability in Jordan is 28 weeks
- PPV is indicated when HR is less than 60 *

50- Pneumonia with X-ray showing pneumatocele, which is the organism that is most likely to be the cause?

- streptococcus pneumonia
- staphylococcus aureus**

51- a woman with mucopolysaccharidoses "hurler" wants to marry a man with Hunter . What is their chance having a child with any mucopolysaccharidoses ?

- a. Negligible *? PS: "hurler is AR ,Hunter is Xlinked"
- b. $1/2$
- c. $1/4$

52- a couple had a child with cleft palate , then the second child came also with cleft palate , what is their chance having the third child with it :

- a. Not changed *?
- b. Doubled
- c. Zero

53- the "two hit " hypothesis for cancer origin explains :

- a.?
- b.It explains why RB happens bilaterally if familial and unilaterally if sporadic*
- c.?

54- a couple had a child with cystic fibrosis , what is their chance having the next baby with cystic fibrosis ?

- a. $1/4$ *?
- b. $1/2$

55- Wrong about RDS:

- characteristics; tachypnea, nasal flaring, grunting, retractions
- bad complication occur 5-7 days after treatment (something like that)
- presents minutes after birth
- breath sounds may be normal*?

56-a child with HTN , hematuria , edema , proteinuria +4. Low complements.

What is the diagnosis :

- a. PSGN
- b. MPRGN*?
- c. IgA nephropathy

57- a child with pharyngitis , he took antibiotic , came with renal impairment . Urinalysis shows eosinophils. What is the diagnosis :

- a. Interstitial nephritis ?
- b. PSGN

58- What supports the dx of IgA nephropathy :

- a. RBC casts *
- b. Low complements

59- 4 year old has been ill for 5 days with fever of 39 presented to ER looks ill and bp 80/50:
what is not appropriate in her initial management?

Capillary refill?

ABG

Glucoccheck

iv bolus saline

IV ceftriaxone?

60-a cause of hypovolemic hyponatremia"hx of headache and dehydration" and high sodium in urine :

Cerebral salt wasting

61-A cause of hypovolemic hyponatremia(another question):

Adrenal insufficiency

62-Found in adrenal crisis:

High renin

63- A child with panhypopituitarism

What is not found:

High urine osmolarity

64- You diagnosed an infant with sickle cell disease , what you will do next :

- a. Splenectomy
- b. Give pneumococcal vaccine
- c. Start regular blood transfusion
- d.iron chelatio
- e. Give amoxicillin prophylactic*?

65- wrong about meconium aspiration :

- a. Pneumothorax is a common complication
- b.on xray there is air bronchogram*?
- c. Happens in term and postterm babies

66- Wrong about celiac disease:

- IDA association

- IgA deficiency
- elevated antitransglutaminase
- vit d deficiency
- negative HLA DQ2/DQ8 *

67-Not used in maintenance therapy of constipation:

- mineral oil
- lactulose
- miralax
- sorbitol
- bisacodyl

68- Short girl with decreased growth velocity but normal bone age .Unlikely to be the cause of her short stature:

Familial short stature

Constitutional*

GH deficiency

69- # wrong about lower gi bleeding :

Most cases need colonoscopy

70- # not a normal neurological finding :

a.babinski positive in 2 year old child*??

71- Most common onset age in temper tantrum

3-4

3-6

2-4*?

Infancy

72- a child with hx suggestive of roseola " high fever subsides then a rash appeared " , what is the causative agent :

HHV-6

73- a child with hemophilia A, was taking prophylactic factor VIII came with spontaneous knee hemarthrosis , what is the most likely cause :

-unwitnessed trauma

-he developed inhibitor to the factor*

74- Diagnose enteroviral meningitis?

ELISA

Westron

Viral Culture

PCR*

77-False about muscular dystrophies:

Elevated CPK

Genetic testing widely available

Curative treatment found for some types*?

Some patients have developmental delay

78-Not considered a primary headache:

Migraine

Tension

Cluster

Psychiatric*?

Cough associated

79-

80-GDD.. what is true:

MCC is genetic

All 4 components should be affected

Almost always no cause is identified*?

Chromosomal scan is not indicated if no dysmorphic features

81-Preterms are at risk of all of the following except:

ADHD*??

Hypothyroidism

GDD

Hypoglycemia

82-Infant of diabetic mother, all true except:

Increased risk of oligohydramnios*??

Hypoglycemia is due to hyperinsulinemia

83- The most common sign of child abuse:

- bruises

84- Bartter syndrome ..unlikely to have:

Low urinary chloride*?

High serum bicarbonate

Hypokalemia

85- What is the developmental age for a child who sits with pelvic support, prefers mother and enjoys mirrors:

- 4 months

- 5 months

- 6 months *

- 9 months

- 11 months

86- Not a cause of hypokalemia:

- Bartter syndrome

- rhabdomyolysis *

- distal RTA

87- Wrong about distal RTA:

- hyperchloremia

- positive urine anion gap

- hypokalemia

- urine pH could be less than 5.5 **

88- Urine anion gap equation:

- Sodium + potassium - chloride

89- Child with hypopituitarism ..unlikely to see:

High urine osmolality *

Low FSH LH

low TSH

Low GH

90- Newborn of positive Hep B mother .what to give?

Immunoglobulin and vaccine *

Vaccine only

..

91- Wrong about N meningitidis:

The commonest clinical manifestation is meningitis

Gram negative diplococci

Aminoglycoside is the treatment**

Can cause adrenal insufficiency

Contacts of meningitis patients should receive chemoprophylaxis

*

92- Case of epiglottitis (child brought to ER with toxic appearance, sat on chair leaning forward, 38.5 temp) , what is wrong:

- hemophilus influenza is the most common cause
- thumb sign on x-ray
- you may have to restrain the child trying to examine his throat *

93- Wrong about obstructive shock:

- increased systemic vascular resistance
- increased afterload
- increased preload
- increased CO *

94-Not a cause of left shift in oxygen hemoglobin dissociation curve:

- alkalosis
- 2,3 DPG deficiency
- fever *
- increased carbon monoxide

95- What's wrong about atopic dermatitis :

Intense pruritic

eosinophilia

Associated with asthma

Extensor surfaces spared in infants *

96- Annual influenza vaccine not indicated in:

Older than 60

Child with asthma

Pregnant

Young adults

Pediatrics 5th year 2017 thanks to Lana Al-sabe' and others

Developmental:

1. At 10 months can do all except? Plays a simple game
2. At 3 years can do all except? Uses scissors
3. Walks up and downstairs alternating feet? 36mo
4. The reflex that stays for life? Parachute

GI:

5. 3 mo.. FTT type I (only wt < 3rd percentile) mostly due to?

CF*

Hypothyroidism

Celiac

6. Functional constipation wrong?

Rarely associated with fecal impaction

7. Celiac disease what is true? Biopsy is gold standard

8. Upper GI bleeding case and I think the hx was suggestive of portal HTN.. cause?

Esophageal varices

9. Not a common cause of GI bleeding in infants? IBD

10. True about Wilson? Inability to excrete Copper

11. Wrong about NASH?

- Most common hepatic disease

- Most are symptomatic*

- pts are advised to lose weight

12. A girl complains of abdominal pain around the umbilicus... relieved with defecation, no red flags? IBS

13. 6 months old patient vomiting since birth with FTT all can cause his condition except :

- GER

- malrotation*

- duodenal web

- annular pancreas

Neonatology:

14. HR=140 (2), regular breathing(2), very active&sneezing(2), lips, hands and feet are blue(not all blue so he takes 1 not zero), some flexed some extended(1)... APGAR? 8

15. Wrong about breast milk? Sucrose

16. Physiological jaundice one is true ? rate < 5 in 2nd-4th day of life

17. Wrong about TTN?

- Hypercapnia and met acidosis are common*
- Most common cause of resp distress
- Mostly with C/S
- Occurs in terms and preterms
- Occurs due to prolonged resorption of lung fluid

18. Wrong about RDS?

- risk decrease with maternal diabetes*
- Reduce lung volume on CXR
- may occur immediately after birth

19. GA= 39 week, ROM.... Presents with tachypnea after 1 day mostly due to?

- Sepsis*
- Meconium aspiration

20. Wrong about grunting?

Only heard via stethoscope*

Expiration against partially blocked epiglottis

Mostly due to RDS

21. All associated with severe prematurity except?

TTN*??

Anemia

Gestational diabetes

22. a newborn can do all except:

- eye fixation
- Smells perfume

23. Most common cause of hypoxia in children ?

V/Q mismatch

24. Cyanosis + LOS when falling down or getting angry?

Breath holding spells*

trauma induced epilepsy

vasovagal attack

25. Cannot be evaluated during newborn physical exam?

Ambiguous genitalia

bifid uvula

Choloboma

Umbilical vessels

CoA*

26. The only concerning sign in a 17 day neonate?

- Erythema toxicum
- Breast engorgement
- Jaundice*

27. Laryngomalacia.. all true except?

Aggravated by GERD

Inspiratory stridor * (although it's the m.c.c of inspiratory stridor in infants)

Very common after surgery

Infectious:

28. OPV is superior to IPV in all except? less risk of paralysis

29. Not to be given < 1 year? MMR

30. Hib schedule? 2,3,4

31. not side effect if vaccine was given before 2 years? generalized rash

32. Most vaccine causing seizures...DaPT?

33. Vancomycin level within therapeutic level but higher than accepted what to do?

- increase the interval between doses*
- decrease the dose
- do nothing

34. Sore throat caused by Group A strep what to give? Amoxicillin

35. Sore throat + splenomegaly + lymphadenopathy? EBV

36. Staph aureus causes all of the following except?

Skin infx

Bone infx

Central line infections

Hospital acquired pneumonia

UTI*

37. A case of gastroenteritis + watery diarrheamost common cause? I think it's rotavirus

38. Meningitis cause according to each age?? mesh metzakre eza kan fe hek so2al

Immuno & allergy:

39. A case of anaphylaxis by peanuts next step?

IM epinephrine

40. similar q .. pt gets collapsed what not to do? ventilate with ambu bag

41. angioedema ? C1 esterase

42. Wrong answer?

Recurrent staph infections – agammaglobulinemia (staph infx are ass. with CGD not B-cell immuno-def.)

Onco & hemato:

43. Found in Wilm's tumor ?

Club foot, cataract, aniridia*, TOF

44. AML + predictive factor?

Trisomy 21*/ Fanconi anemia/ Ataxia telangiectesia

45. Isolated thrombocytopenia?

Anti-platelets antibodies* / bone marrow biopsy/ blood film

46. IDA most common cause? low Diet

47. Hb = 11.5... MCV=75 ..Normal

48. best method to eliminate hypoxia?

-increase in Hb from 8 to 10

-increase O2 sat*

Neuro:

49. True about tension headache?

Most common headache in children*

throbbing in nature

ass. with photophobia

more in the morning

can be induced by mild exercise

50. True about Autistic spectrum disease?

Incidence is increasing globally*

age<3yrs,

Risperidone is not effective,

Rett is included

-I think the answer is A because in DSM-V age was replaced by "early developmental period"

51. true about ADHD?

Decrease attention span*

age > 18 mo, (wrong > 12mo)

duration > 2yrs (wrong > 6mo)

52. True about Absence seizure?

Characteristic EEG*

Poor prognosis

53. Most common cause of language delay (otherwise normal)? Deafness

54. 10y/o.. seizure for 5 mins + temp 38 axially .. true answer?

-2nd attack in 40%*

-this is a case of febrile convulsion

-start anti-epileptic drugs

-anti-pyretics prevent seizure

-pt has 10 times risk of epilepsy

55. Jitteriness.. all true except?

-occurs when active

-Can occur in a normal child

-can be interrupted by holding the extremities-

-elicited by sensory stimuli

-Associated with eye abnormalities*

56. Not lower motor neuron lesion?

-myopathy*

-peripheral neuropathy

-anterior horn cell

-NMJ

-Transverse myelitis

57. spinal cord disease which one has the worst prognosis... SMA type1 ?? mo metzakre al ajwebe

58. spina bifida all true except? dunno the answer kan fe folic acid prevents 70% of cases?

Endocrine:

59. Calculate MPH?? father= 173.. mother= 160? 173

60. A case of DKA... Glu>300, Ph<7.03, bicarb =very low, positive ketones, true?

-Give long acting insulin

-This is moderate DKA

-1st step subcutaneous insulin

-Potassium may be high, low or normal*

61. Not seen in CAH?

Hypertension*/ hypekalemia/ hyponatremia/ hypoglycemia/ met acidosis

62. wrong about obesity.. mesh metzakr sho also2l bezzabt

- BMI > 85th*
- Can be caused by Prader willi

63. True about puberty?

Delayed in male > 13

Central precocious puberty in females is mostly due to brain tumor.....

64. Doesn't require further evaluation

Female 14 y/o with decreased rate of growth than the preceding year

Rheumato:

65. typical case of KAWASAKI (fever, leukocytosis, lymphadenopathy, conjunctivitis..)

66. Not a major criteria in rheumatic fever?

Janeway lesion*, erythema marginatum, arthritis, subcutaneous nodules, chorea

67. Neonatal mortality in SLE mostly due to? Congenital Heart bloc

Cardio:

68. V-tach? Check the pulse

69. Wrong about chest compressions? Stop every 30 sec to check the pulse

70. all can cause systolic murmur except? Mitral stenosis

71. Cyanosis + Systolic murmur over the left sternal border? Pulmonary stenosis

72. Failed to gain wt, displaced apical beat, loud systolic murmur over the LSB, clear chest ?

VSD / TOF / truncus arteriosus ... I think VSD because in TOF the lungs are black

73. A girl presents with HF with a typical picture of VSD (same as previous q)... her HF is due to? VSD

74. Asymptomatic, gaining wt, systolic murmur over LSB not radiating, S2 splitting?
ASD

Respiratory:

75. Not a common cause of wheeze... heart failure?

76. Not used in ttt of acute asthma exacerbation?

SABA, systemic corticosteroids, Mg sulfate, anti-cholinergic, mast cell stabilizers*

77. Wrong about chronic cough... Asthma can be excluded in absence of wheeze is wrong

78. Can be assessed at home? PEF

Nephro:

79. Not seen in nephrotic syndrome?

Polyuria*, spont peritonitis, thromboembolism

80. Not seen in chronic kidney disease?

Alopecia, hyperkalemia, enuresis*

81. Not use in ttt of hyperkalemia? Calcium

82. All can be seen in hypokalemia except?

Confusion*, paralytic ileus, muscle paralysis, U wave, polyuria

83. Hematuria + HTN after 10 days of URTI ? PSGN

84. Young girl with HTN and recurrent UTI, her HTN is due to? Renal scarring

85. NAGMA, Normal albumin, high protein and glucose in urine? Fanconi Syndrome

86. m.c.c of UTI (cant remember the age)E.Coli???

87. purpuric rash around the ankle cant remember the rest..most imp test to follow her up? Urinalysis

88. AKI following acute gastroenteritis caused by ? dehydration

89. Not 1st line in a child with GN? I think Complement level

90. fee so2al azen jawabo U/S is initial mng

Genetic:

91. what goes with AD rather than X-linked? At least 1 evidence of Male-Male inheritance

92. couple counseling regarding consanguinity... Which is true?

-Ask about severity of CF

-Ask about severity of spina bifida

-Ask about degree of relationship*??

93. PKU which is true...

94. Missense mutation? AD

General:

95.Femoral fracture, 14kg... fluid management? 50mL

96.Knee pain,limping, no hx of trauma, no tenderness, no swelling, externally rotated?

I think Slipped capital femoral epiphysis

97.Wrong about child neglect? It's the least common

98.Child abuse? Bruises

99.suicidal iron ingestion .. best method to determine its level??

Gastric lavage/LFT*/KFT/CBC

100.Acute gastroenteritis + septic shock, Na= 170..all can be done regarding fluid management except (hypovolemic hyponatremia) ?

-Overcorrection should be corrected by decreasing the flow rate.

-Rapid decrease in Na will decrease the needed fluid

-Correction over 24hrs

2016 5th year exam

1. 13 year old boy recurrent vomiting with streaks of blood, epigastric tenderness, the rest of exam is normal, all of the following can cause this Except:

- Mallory Weiss tear
- Gastritis
- gastric ulcer
- esophageal Varicies*
- Duodenal ulcer

2. H pylori can cause all of the following in children except

- Gastric ulcer
- gastritis
- Iron def. anemia
- Celiac disease*
- Nodular stomach on endoscopy

3. Best test used for rotavirus

- Antigen test*
- PCR
- stool analysis
- Stool culture
- Rota antibody

4. A child came to the ER, his BP was 200/100, what is the correct answer

- large sized cuff gives falsely higher readings
- small sized cuff gives falsely lower readings
- large sized cuff gives falsely lower reading*
- width of cuff >60% of arm length

5. All in bronchiolitis except?

- Wheezing
- Fever
- Dry cough
- tachypnea
- decreased air on CXR*

6. a boy ingested iron, what to tell mother:

- its ok since there is only 4 pills missing from the bottle
- reassurance since it only causes stomachache (wrong, it can actually kill u)
- abdominal X-ray * (according to uptodate, we do it to see if there is any pills left that are not absorbed yet)
- desferoxamine is not used in acute toxicity

7. Physical child abuse most commonly manifest as:

Bruises

8. A preterm newborn noticed to have grunting 2 hrs after birth, the most possible cause:

- surfactant deficiency*
- meconium aspiration

9. Wrong combination:

Copies a triangle at 3 years

10. Wrong combination:

- Hops on one foot : 4 years
- Names heavier object at 3 years *

11. A 6 year old girl brought to clinic by her mother, she speaks 6 words, point to body part, eats with spoon, runs stiffly, her developmental age is:

- 15 months
- 18 months*
- 24 months
- 30 months
- 36 months

12. The reflex that stays for life:

Parachute

13. Wrong about thalassemia minor:

- High HbA2
- Mild anemia
- Normal or increased Fe
- Microcytic hypochromic
- Extramedullary hematopoiesis causes atypical facies*

14. Wrong about IDA:

- PICA
- Common 4-6 mo of age*
- Causes developmental and intellectual disability

15. True about vit D deficiency rickets:

- normal calcium levels.?? (this is the most likely answer)
- High phosphate.

- Low phosphatase kinase
- high urine calcium to creatine ratio??

16. euvolumic eunatremic:

- Peritonitis*
- SIADH
- Ascites

17. 6 yr old boy immigrant to Jordan from unstable country, all of the following are on Jordan vaccination program except:

- HiB*??
- HepB
- OPV
- IPV*??
- DTaP

18. Vaccine can be given newborn:

HepB

19. Vaccine not given at 4 months:

Varicella

20. Not associated with galactosemia:

- E.coli sepsis
- alkalosis*
- cataract
- renal disease

21. Na 135, K 2.8, HCO₃⁻ 10, nephrocalcinosis, what's the diagnosis:

- Gitelman
- Bartter
- distal RTA*
- Fanconi syndrome

22. Not given in adrenal crisis:

- IV hydrocortisone
- ventoline nebulizer *
- kayexalate Resin
- Fludrocortisone
- Normal saline

23. A child with GERD, What is your advice?

- 1-thicken the formula*
- 2- PH monitoring

24. Male volume of testes 3cc (normal) .tanner stage 2 pubic hair ..all may cause premature pubarche in his case except :

- Accidental testosterone exposure
- Non classical CAH
- adrenal adenoma
- Tumor in cns *? (most likely answer, the testes would be enlarged first followed by pubarche (it causes premature puberty))

25. ECG which is wrong:

- tall R wave in V1 goes with RVH
- tall R wave in V6 goes with LVH
- PR prolongation goes with 2nd degree heart block* (it goes with 1st degree, second degree have either progressive prolonging then drops (mobitz 1) or normal (mobitz 2))
- narrow complex and rate of 250 goes with SVT
- P waves 110/min and QRS 45/min goes with 3rd degree heart block

26. asx 5 yo male, on physical he had S2 splitting, a systolic murmur on left upper sternal border, CXR was done and found enlarged RA, increased pulmonary marking, dx is:

- ASD*
- pulmonary HTN
- VSD
- TOF

27. Most imp prognostic factor in NICU dilated cardiomyopathy:

- increase EF from 28% to 32%*
- increased UOP rfrom .8 to 1.2 ml/kg/hr
- increase o2 sat from 94 to 98
- decreased RR from 40 to 24

28. A child with Kawasaki for 8 days (showed features of it), what is the most consistent sign:

- thrombocytopenia
- long PR interval??
- aneurysm on echo??

29. Wrong combination of murmur

- coarctation diastolic murmur interscapular*
- PDA murmur

30. 3 months baby ..failure to thrive with hyperbilirubnemia on regular formula ..mother wants to change the current formula .what's the best choice for his condition:
(its probably galactosemia, others say cholestatic jaundice...no one knows)
-soya فول formula
-lactose free?
-Peptide formula
-Amino acids
-MCT formula* (pt with direct hyperbili can't absorb regular fat (LCT), mct dont need micelle formation)

31. Horner syndrome with supramediastinal mass on CXR :
-Acute leukemia (T-ALL would present as obstructive symptoms (dyspnea, SVCS) not horner's)
-Neuroblastoma* (can affect paraspinal sympathetic ganglion)
Rhabdomyosarcoma

32. Child with fever 38, developed generalized tonic clonic seizure>5min which is true:
-he is more likely to have a recurrence when he gets febrile*
-likely to develop epilepsy
-fever not high enough to cause febrile seizure

33. CPK is high in all of the following except:
congenital myopathy (central cord problem)*

34. Temper tantrum which is wrong:
-rare before 1 yr age
-pts usually cry
-swing arms
-likely to subside after age 10

35. Patient with TOF was doing well, gaining weight, feeding well, now is having more cyanosis for 2 months with decreased O2 sat from 84 to 78% .. systolic Murmur on lower left sternal border increased, what could be the reason for the drop in O2 sat?? ?
-Infection
-VSD got smaller
-Pulmonary obstruction became more**
-Progressive Polycythemia

36. kan fe so2al eno Least commom micoorganism to cause pneumonia in 2 month age

- mycoplasma* ?
- GBS
- Staph
- E.coli
- Klebsiella

37. Wrong match about rashes:

- Purpura is vasculitic rash
- Cafe au' lait is macular
- Molluscum conagiosum is papulo-vesicular
- Petichae is sand paper like*
- Urticaria is wheal

38. Not a contraindication to breast feeding :

- Breast abscess
- HIV in Jordanian mothers
- Active genital herpes*
- Severe psychoses
- Active TB

39. Neonatal resuscitation all true except

- 90% don't need resuscitation
- You should not start chest compression untill you ventilate
- Adrenaline can be give IV or endotracheally
- Give 0.9% NS as fluid
- All newborns are sent to radiant warmers and have their pulse and RR checked**

Explanation: only those who are not term, not breathing, or don't have good tone should be place under radiant warmer for further evaluation .

40. Physiological jaundice is characterized by:

- 1-Rate of increase is less than 5 mg/dl/day *
- 2-occur in the first 12 hrs
- 3-direct bilirubin <2 mg/dl

41. 48 hour old infant presented with jaundice -ve coombs test ..birth wt 3.4 ..wt at 48 hour is 3.1 dx

- ABO incompatibility
- Rh incompatibility
- Physiological jaundice
- Breast milk jaunduce
- Breat feeding jaundice**

42. The least factor to contribute for tissue perfusion?

- 1-PaO₂*
- 2-Hemoglobin
- 3-O₂ saturation
- 4- cardiac output
- 5- systolic blood pressure

43. Incidental Hematuria in a child during school screening, with family history of gout, stones ..you start with following tests except:

- Urine analysis
- kidney ultrasound
- Spot calcium uric acid oxalate
- Audiometry for ears*
- Serum creatine

44. Wrong about JRA

- Age less than 16
- duration of the disease 6 wks
- Type of the disease determined by articular involvement in the 1st 6months
- Male who have poly articular type develop chronic Uveitis *
- Synovitis is characterized by hypertrophy and hyperplasia.

45. Not a cause of direct hyperbilirubinemia AT 2 MONTHS OF AGE :

- 1-Alagille
- 2-biliary atresia
- 3-hypothyroidism
- 4-UTI
- 5- Wilson* (explanation: Wilson manifests at 4 yr age)

46. Not present in behcet disease

- Oral ulcer
- Genital ulcer
- Malar rash*
- DVT
- Uveitis

47. Atopic Dermatitis, what is wrong:

- Common on flexors in adults
- * Common on face in child more than infants

48. Allergic rhinitis, whats wrong:

- red mucosa *

49. B cell markers :

- CD19*
- CD56
- CD3

50. case of staph aureus osteomyelitis .severe pneumococcal infection pneumothorax :

-CGD *

-Leukocyte adhesion deficiency

51. treatment of Xlinked agammaglobulinemia :

IVIG

52. useful tests for testing T cell immunity :

PPD skin test*

53. Guillain Barre:

-IVIG*

-Steroids

54. 1 year cough which worsen at night or with exercise, diagnostic tool ?

a. spirometry*

b. chest x-ray

55. HTN with proteinuria DOC:

-ACEI*

-Beta blockers

-hydralazine

56. A child 10 kg , hypotensive , delayed capillary refill , after giving bolus of NS , what is the fluid requirement he needs?

1- 1000

2-1500

3-2000*

4-3000

57. otitis media, wrong:

-if tympanic membrane is red, it is enough for diagnosis*

-usually abnormal tympanogram

58. Not found In acute renal injury after shigella infection has caused HUS :

-Elevated liver enzymes

-Pericarditis *

-proteinuria and hematuria

-schistocytes

-thrombocytopenia

59. -What is true about celiac disease :

1-occur in both genders at any age

2-treated by diet*

3-risk doesn't increase in siblings

4-diet should be continued until puberty

5-diagnosed by a blood test

60. Not a cause of chronic renal failure :

-RTA *

-Alport

-Structural abnormalities

-Neurogenic bladder

61. Wrong about FMF

- Self-limiting attacks.
- Its AR
- Pluritis is more common than arthritis *
- Colchicine used to prevent the attack
- Patient are prone to develop renal amyloidosis

62. Seizure and paroxysmal non-epileptic episodes differentiated by ?

- EEG ?
- Hx and physical *?

63. One yr old child ,growth chart showing type 3 failure to thrive with low Ht,Wt,HC
, most likely cause:

- 1-celiac
- 2-hypothyroidism
- 3-TORCH *

64. Doesn't cause depression in children -.-

- illness and diseases
- drug abuse
- post vaccination*

65. Wrong about epiglottitis:

- a. fever 39
- b. drooling
- c. absent cough
- d. preceded by coryza*

66. Not a complication of nephrotic syndrome

- Acute spontaneous peritonitis
- Infection
- Hyponatremia
- Sagittal sinus thrombosis
- Hypocalcemic seizure *

67. Acute bronchial asthma, all except;

- a. In early stages there is decrease in Pco₂
- b. Hypercapnia and respiratory acidosis in all stages*

68. One of the following is AR

- Achondroplasia
- Hemophilia A
- G6PD
- Homocystinuria **

69. Most common site of resistance:

- a. epiglottis
- b. bronchioles
- C. trachea

d. mouth and nasal passage

e. bronchi

70. All can be cause of hypernatremia except:

-Diabetes insipidus

-Salt poisoning

-Psychogenic polydipsia*

-Gastroenteritis

71. Patient with kernicterus, most common type of cerebral palsy:

1. diplegic

2. Quadriplegic

3. Choreathetosis*

72. Patient with tongue fibrillation:

a. muscle denervation *

b. neuropathy of hypoglossal nerve

73. Most common cause of UTI?

1- Proteua

2- Enterococcus

3- E.coli *

74. -Abnormal red reflex could be seen in all except:

1- Rubella

2- Retinoblastoma

3- Retinopathy of prematurity

4- conjunctivitis*

75. One is alarming in newborn:

-Mongolian spot

-Diastolic murmur*

-Erythema toxicum

76. Photophobia..sonophobia throbbing headache and aura is :

-Common migraine

-Classical migraine*

77. Not included in the DSM.V

Asperger syndrome*

ADHD

78. Age for ADHD according for DSM V:

-2 yrs

-3

-6

-8

-12*

79. -Gestational Diabetes could be associated with all except:

1-Congenital cardiac anomalies *?

2- Macrosomia

3- Hyperinsulinemia

4- oligohydramnious*?

80. -Post term baby is defined as GA more than:

1- 38 wks

2- 39

3 - 40

4- 41

5- 42*

81. A child with type 1 DM, on insulin, had otitis media, came to ER, moderately dehydrated, glucose=450, ketones +ve in urine, HCO₃- 21, PH 7.36, which is wrong in management:

- Treat him according to DKA protocol* (not DKA, pH>7.30)

- SC insulin and IV fluid

- Abx

- Measure glucose frequently

- Measure ketones till infection is gone

82. Not seen in Down syndrome:

-DM

-Celiac

-DI*

-Congenital hypothyroidism

83. Not seen in congenital hypothyroidism:

Hypertonia

84. Hemophilia A is characterized by all of the following except:

1-Presents with Hemarthrosis

2-Needs replacement if Factor 8

3-Increase bleeding time*

4-Increase PTT

85. Most common malignancy in children:

Neuroblastoma

2-Leukemia*

3-Wilms

4-Rhabdomyosarcoma

86. -Tumor lysis syndrome is associated with all of the following except :

1-Hypocalcemia

2-hyperphosphatemia

3-Hyperkalemia

4-Hyperuricemia

5-Hypoglycemia*

87. Neonate with septic shock, all would help in supporting cardiovascular function except:

- Diuretics to increase UO*?
- Mechanical ventilation
- Antibiotics
- Nutritional support
- Preload augmentation

88. 10 year old female with short stature, Bone age= 8, normal growth velocity, the most likely cause:

- a. Idiopathic short stature
- b. Constitutional delay of growth and puberty *
- c. low growth hormone

89. . 3 years old female with constipation the m.c.c is:

- a. Hirshprung
- b. Functional *
- c. Cystic fibrosis

90. Most common antigenic component milk :

- a. carbohydrate
- b. protein *
- c, Vitamin
- d. fat

91. Wrong about measles

Vesicular rash*

92. Not true about OPV

Not given to patients taking inhaled corticosteroids*

93. All true about rota infection except

- Osmotic diarrhea *
- Has polymorphonuclear cells in stool
- Main cause of dehydration

94. All of the following suggest extraglomerular cause of hematuria, except:

- a. normal RBCs shape
- b. No Cast
- c. presence of clots
- d. Protein dipstick +3 *
- e. Bright red urine

95. Patient with smoky urine, BP 140/90, hematuria and proteinuria , RBC cast:

- a. PSGN *
- b. urolithiasis
- c. urinary infection

96. Wrong about ITP:

- Steroids decrease chronic cases*?
- Excellent prognosis even without therapy?

97. a newborn crying weakly, HR 110, sneezes when suctioned, pink body blue face, arms flexed legs extended, APGAR score:

- 6
- 7**
- 8

98. All of following are true about HSP except

- doesn't cause nephritis.*
- it is a disease of small to medium vessels

99. A child with chronic cough for 1 year, with history of prolonged jaundice and failure to thrive: what's the cause:

- cystic fibrosis**
- GERD
- Kartagener
- Asthma

100. All causes HAGMA except:

- urea cycle defect**
- organic acidemia
- renal failure
- DKA

2016 - 6th year exam

1- Best way to diagnose gastroesophageal reflux in an infant:

- Hx and P/E*?
- pH impedance probe
- 24 hr pH probe

2- All of the following are part of the initial septic workup in a 7 days infant except:

- LP
- CXR * (I think this is the answer)
- Blood Cx
- Urine Cx
- CBC

3- A child was on antibiotics and presented with renal injury, normal CRP, normal kidneys on U/S, high urinary Na, the most probable problem is:

1. Sepsis
2. Hypovolemic renal injury
3. Drug induced interstitial nephritis
4. ATN
5. Obstructive uropathy

4- All of the following lab findings are consistent with renal injury except:

- 1- FeNa >4%
- 2- Normal BUN/Cr ratio
- 3- High urinary Na
- 4- High urine osmolality (500)**

5- What is the most common side effect of DTaP vaccine?

- a) Pain and induration at the site of injection
- b) Anaphylaxis reaction
- c) Seizure
- d) Fever

6- ttt of choice for autistic spectrum disorder is :

1. IVIG
2. Dexamethasone
3. Respirdone
4. Atomoxetine
5. Carbamazepine

7- Not criteria for ADHD:

1. Impulsivity
2. Hyperactivity
3. Inattention
4. Stereotyped behavior*
5. Should be < 12 years

8- Which of the following is wrong in SLE:

1. Oral ulcers
2. Photophobia
3. High ANA
4. High Anti-dsDNA
5. High complements**

9- One of the following is wrong about PEDIATRIC dermatomyositis :

1. Distal muscle weakness*
2. Heliotrope rash
3. Elevated muscle enzymes

10- ... all of the following are present in scleroderma except :

1. Tight skin
2. Difficulty swallowing
3. Digital ulcers
4. Telangectasia
5. Chronic diarrhea*

11- Empiric ttt of neonatal sepsis is

1. IV gentamicin
2. IV ampicillin
3. 1+2
4. IV vancomycin
5. IV cefuroxime

12- most likely presentation of child abuse

- A. Subdural hematoma
- B. Hepatic rupture
- C. Water hot burn
- D. Spiral fracture
- E. Bruises **

13- the most likely age group to be PHYSICALLY abused is :

- A. School age adolescence
- B. Newborn
- C. Infants

D. Toddlers

14- A child who was evaluated for his jaundice was found to have biliary atresia , all of the following regarding his mgt is true except :

1. Order special formula diet
2. Order special vitamins
3. Send him home and FU in 2 weeks

15- A neonate born with pustules over his body , on further examination these pustules contain eosinophils only without bacteria , the most likely diagnosis is :

1. Erythema toxicum neonatorum**
2. transient pustular disease of newborn
3. Eczema

16- A child presented with new onset diarrhea , it was guaiac +ve and leukocyte +ve , no history of recent Abx use ,if you did a stool analysis, the most likely organism to be isolated :

1. C.diff
2. Giardia lamblia
3. Salmonella enteritidis
4. Vibrio cholera

17- 5 years old male presented with fever of 7 days duration , with bilateral conjunctivitis , cervical LAP , his platelet count was 800,000 , ESR was 50 , most likely diagnosis is :

1. Kawasaki **
2. Acute rheumatic fever
3. Scarlet fever
4. IE

18- A 7 day child presented to ED , you suspected neonatal sepsis , you would order all of the following except :

1. Urine culture & U/A
2. CBC
3. CXR*??
4. Blood culture
5. LP

19- a mother brought her child to hospital for evaluation , she is afraid he's not growing well , on evaluation the child skips and draws a triangle and walks alternating foot , you will said to mom that child age is :

- A. 2 years
- B. 2.5 years
- c. 3 years
- D. 4 years
- E. 5 years**

20- One of the following combinations is wrong :

- A. 18 months draws horizontal line**
- B. 4 years draws crosses
- C. 4 years draws square
- D. 5 years draws triangle

21- One of the following combinations is wrong

- A. 1 week : social smile
- B. 10 months : wave bye bye
- C. 10 months : plays peek-a-boo
- D. 12 months : points toward object

22- You are in the nursery, upon evaluating child primitive reflexes you are unlikely to look for:

- A. Moro
- B. Grasp
- C. Tonic neck
- D. Truncal incurvation
- E. Parachute**

23- Of the following neuropathies, the one with the best prognosis is:

- 1. Diabetic neuropathy
- 2. Vit B12 def.
- 3. Klumpke
- 4. GBS

24- Child presented with irritability , fever 103.4 & obtundation , you did LP which revealed increased WBC with lymphocyte predominance , which of the following investigation is correct :

- 1. Bacterial culture
- 2. PCR to diagnose HSV
- 3. Viral culture of CSF

4. Viral blood culture

25- A child was presented to clinic after drowning, all of the following could contribute to worsening of Resp. Condition except:

1. ARDS
2. Infection
3. Acute bronchospasm
4. Pleural effusion due to vocal cord spasm that lead to upper airway obstruction

26- Which one of the following will be presented with bilateral ptosis at birth :

1. Congenital myasthenic syndrome
2. Myotonic dystrophy

27- A child presented to clinic with fever and joint pain and difficulty walking , on PE there is knee swelling and a palpable purpura on his legs , his WBC 8000 , his platelets 500,000 , ESR 40 ,the MANS :

1. Start him on corticosteroids
2. Start him on ibuprofen
3. Refer him for renal Bx
4. Start him on IVIG

28- A patient with hematuria and dysuria , all of the following would be helpful in diagnosis except :

1. BUN/Cr
2. Spot protein:Cr ratio
3. Spot Ca:Cr ratio

29- The most common antigen responsible for hemolysis (Rh incompatibility)

1. C
2. E
3. D**

30- A child with TSH 10 , T4 3 which is low , one of the following is wrong :

1. it is most likely due to thyroid agenesis or dysgenesis during embryological development
2. Patient most likely will require lifelong thyroxine
3. Early ttt prevents development of MR
4. Thyroid screening is routine in Jordan
5. It is autosomal recessive

31- In galactosemia , all are true except :

1. Cholestatic jaundice
2. sepsis
3. Cataract
4. Sucrose free diet**
5. Recurrent episodes of vomiting

32- A child was presented to emergency with BP 190/140 , drug of choice is :

1. Enalapril
2. Captopril
3. Propranolol
4. Na nitroprusside
5. Valsartan

33- In patient with renal cause of AKI , one is wrong :

1. Normal BUN/Cr
2. High FENa (4)
3. High urine osmolality (500)**
4. High urine Na

34- All of the following arrhythmia can be managed by shock(defib or dc cardioversion) except :

1. V.fib
2. V.tach
3. PEA*
4. SVT
5. A.fib

35- Patient with RDS , all of the following are true except :

1. Prematurity is an important risk factor
2. Due to surfactant deficiency
3. It can present after 24 hours of life**
4. Present with grunting
5. Nasal CPAP is a preferred modality for respiratory support

36- Which one of the following will not help you in your dx of congenital GH deficiency?

1. Neonatal hypoglycemia
2. Neonatal hyperbilirubinemia
3. Micropenis

4. Low birth weight
5. Cleft palate

37- Term infant APGAR was 5 then 7 , on PE absent bilateral red reflex , what is the underlying cause :

1. retinal hemorrhage
2. retinal detachment
3. cataract
4. conjunctivitis
5. corneal trauma

38- In child with hx of epilepsy , what antibiotic should not be used for meningitis ?

1. cefuroxime
2. Ceftriaxone
3. cefotaxime
4. Meropenem
5. Vancomycin

39- One of the following drugs and its use in CKD is wrong

1. EPO : anemia
2. GH : short stature
3. Calcium carbonate with meals : hypocalcemia
4. NaHCO_3 : metabolic acidosis
5. 1-alpha hydroxylase vit D : hyperparathyroidism

40- One of the following combinations is wrong :

1. Botulinum : descending paralysis
2. GBS : ascending paralysis
3. Nemaline myopathy : proximal weakness
4. Werdnig-Hoffman : proximal weakness
5. Myotonia dystrophica : distal weakness

41- Transfusion of blood m.c problem ... febrile non-hemolytic reactions

42- FTT with Hypokalemia and acidosis >>> Fanconi ??!

43- Salicylate overdose : uncoupling of the oxidative phosphorylation

44- Case of Fever , night sweats , weight loss with painless cervical lymph nodes involvement (2 nodes) ? bx

45- Asphyxia in 28 wk GA. What is the pattern of CP?

- 1) hemiplegic
- 2) diplegic**

3) chorioathetotic

4) ataxic

46- a case 6 months old infant with fever tachypnea and wheezes what is the responsible organism RSV

47- DKA IV Bolus Fluids then Continuous insulin infusion

48- Mitral stenosis murmur: Apical diastolic murmur with presystolic accentuation

49- Correct about fetal circulation: Foramen ovale -right to left shunt

50- Pt was previously healthy suddenly presents with stuttering following by aphasia on EEG epileptic activity was shown, what's the most likely Dx:

-West syndrome

-Landaue kleffner *

- Lennox gastaut

51- sore throat , dysphagia , Breathlessness immature HPCs (Blasts) which cell lineage they represent :

-B cell

-T cell

-Monocyte

-Neutrophil

52-All of the following associated with sudden cardiac death except:

-AS Pulmonic stenosis *

-Long QT HOCM

-coronary artery malformation

53- Pt with picture of epiglottitis what to do:

-ENT consultation for tracheostomy * (i think this is the answer)

-Intubation under controlled setting

54- Most common inherited bleeding disorder: VWD\

55-All of the following are true about anorexia nervosa except:

-Hypokalemia

-Hypomagnesemia

-Low cortisol *

-Low gonadotropins

56- Associated with NF1: Optic glioma

57- Which of the following is wrong: Do ambo bag ventilation in a patient with congenital diaphragmatic hernia

58- All are causes of mydriasis except:

- Morphine*
- Cocaine
- Atropine

59- What is the most common cause of acquired sensorineural hearing loss?

60- Not random test for short stature ?! GH

61- Not done in patient with refractory constipation ?! stool study

62-All of the following are part of the initial workup for a child with constipation, except:

-- Urine analysis - Blood tests - Stool tests --

63-The most common sign characteristic of increased intracranial pressure :

- Early morning headache
- Vomiting

64-Dilated cardiomyopathy case, all of these are indicators of improvement except :

- 1) oxygen sat from 93% to 98%
- 2) capillary refill from 5 to 3 sec
- 3) UOP from 0.5 to 1.2ml
- 4) pulse volume is bigger
- 5) lactate is decreasing

65-A case of cephalohematoma, there was a presentation not a direct dx. What is wrong?

- 1) will go by 1 day **
- 2) hyperbilirubin
- 3) over one bone
- 4) may calcify after that

66-Not associated with tension headache: Photophobia?

67-Case of status epilepticus , what is wrong?

- 1- associated with 5% mortality rate
- 2-can cause focal neurological deficits
- 3- you should intubate and ventilate the patient

68-Something not related to Mg deficiency :

- 1) seizures
- 2) cardiac arrhythmia
- 3) muscle weakness
- 4) hypocalcemia
- 5) hyperkalemia

69-7 yr old boy with day time urine incontinence :

- 1) enuresis
- 2) zinc deficiency
- 3) b12 deficiency
- 4) hypertonic

70-A child with incontinence for 2 months during daytime, what is the most likely diagnosis:

- Enuresis
- Overactive bladder

71-Question about neonatal shock , which is wrong :

- 1- hypotension is a requirement for the diagnosis
- 2- in septic shock there is increased SVR

72-VSD question: which of the following indicates that the size of VSD is decreasing: - the murmur is getting louder?!

73-True about rheumatic fever: There should be an evidence of positive Group A beta hemolytic strept in swab and positive ASO

74-Case of asthma exacerbation u administer albuterol and the o2 sat improved but not much , what is your next step?? Steroid

75- The neurological disease that can not be detected antenatally ???transverse m.

76- All of the following are indicators of pathological jaundice except : Liver edge palpable 1cm below the costal margin???

77- What is wrong about measles: The most common complication is encephalitis

78- All associated with dermatomyositis except: Distal muscle weakness

79- Case of HSP. Asks about the treatment.

- Ibuprofen * (i think this is the correct answer).
- Steroids

80- false about phenylketonuria: breastfeeding is contraindicated

81-All of the following cause hyponatremia except :

- Congenital adrenal hyperplasia
- Gastroenteritis
- Vomiting
- Nephrotic syndrome

82- case of metabolic alkalosis with hypokalemia, hypochloremia and low urine chloride asking about the cause : pyloric stenosis ?

83-4 year old male child with painless bleeding per rectum of 3 months duration , you suspect him to have juvenile polyp what is the most appropriate test for diagnosis: Colonoscopy

84- All of the following are seen in allergic rhinitis, except?

- red nasal mucosa *
- otitis media
- atopy (or atopic dermatitis)

85- most common cause of lung empyema ? SP

86- A 3 kg infant is undergoing a surgery tomorrow what is his maintenance fluid: 300 ?

87- Test of choice to detect posterior urethral valve: MCUG ?

88- Test of choice to detect renal scarring ?? DMSA scan

89- most common cause of adrenal insufficiency in pediatrics ?

- CAH
- Steroids withdrawal

90- case of epiglottitis. What's the wrong statement? - Settle the child down and examine his throat (something like that).

91- a case about type 1 FTT, asking about the wrong statement :

- It's the most common type
- non organic cause
- cannot be caused by vomiting*

92- A drug that is not given in the treatment of meningitis : ceftriaxone

93- 13 year old obese female, hypertensive The most likely skin finding is ?
Acanthosis Nigricans

94- Wrong regarding pneumococcal vaccine: The unconjugated polysaccharide vaccine can be given to children less than two years of age

fifth
Pediatrics Exam 2015 ~~Sixth~~ Year

1. Failure to thrive, an indication for admission are all the following except:
 - a) moderate malnutrition *
 - b) parental anxiety
 - c) severe illness
 - d) failure of OPO)6 months
2. CAH due to 21 alpha hydroxylase deficiency associated with all the following except :
 - a) Hyperkalemia
 - b) Hyponatremia
 - c) Metabolic acidosis
 - d) Hypoglycemia
 - e) HTN* cause it's volume depletion and hypotension
3. Which is wrong about acute diarrhea
 - a. Lactose free formula shortens the course
 - b. One month duration*
4. Wrong about tetanus:
 - a. Whole cell bacterium vaccination
5. Advice for parents with a child who's failing to gain weight
 - a) Don't force feed him
 - b) Eating while doing what he loves
6. Wrong about shigella:
 - a) Carriers are minority
 - b) Minimal person-to-person transmission
7. All occur in neonatal shock except: heart rate < 160
8. True about rheumatic fever: caused by GABHS
9. When is IV albumin indicated in nephrotic syndrome
 - a) Periorbital swelling
 - b) Albumin 2 MG/ dL
 - c) Albumin 1.6 mg/ dL
 - d) Scrotal edema *
 - e) Hypervolemia

10. Most serious complication of nephrotic syndrome: peritonitis
11. A 3 year old presented with eye edema (MCD) most likely seen under microscopy → normal findings
12. all of them cause vitamin B12 deficiency except
 - a) vegetarian
 - b) malabsorption*
 - c) short bowel syndrome
 - d) gut milk * (not sure)
 - e) intrinsic factor deficiency
13. wrong about cause of Kawasaki:
 - a) polycythemia*
 - b) thrombocytosis
 - c) WBC: in the urine
14. All cause pulse pressure except: mitral stenosis
15. X-linked? Which is? Increased CPK? Duchenne muscle dystrophy
16. Not a high risk for UTI → antenatal hydronephrosis
17. Common cause of unconjugated hyperbilirubinemia jaundice?
Breastmilk jaundice
18. Wrong about measles? No long term complications
19. Hib vaccine which is wrong? Cannot be conjugated with out toxoids
20. All of the following are microcytic hypochromic anemia except? Sick cell
21. Which of the following not a cause of precocious puberty?
 - a) Hypothyroidism
 - b) Anorexia nervosa *

22. Wrong about hypertension? Most cases need exogenous surfactant administration

23. True about precocious puberty in a male child

- a) Most cases are due to a CNS pathology
- b) Congenital gravis

24. All of the following are true about Addison's disease except

- a. Cortisol level peak at 4 pm
- b. Size of testicle at puberty 4 cm
- c. Renin*

25) the most common cause of malignancy in children:

- hematopoietic malignancy (ALL).

26) social smile:

- 2 months.

27) child at one year talks:

- 3 words.

28) tongue fasciculation found in all except:

- Duchene muscular dystrophy.

29) main defect in autism:

- Social communication aspect.

30) drug used in ADHD:

- Methylphenidate.

31) one is true in dx of global developmental delay:

- EGG is not needed if there is no hx of seizures.

32) pic of tuberous sclerosis (ash half spots) in west syndrome dx is:

- Tuberous sclerosis.

33) A/W microdeletion :

- William syndrome.

34) X-linked dominant:

- hypophosphatmic rickets.

35) all used to treat cow's milk allergy exept:

- a) lactose free.
- b) soya based. (50% cross allergy)
- c) hydrosylated.
- d) partially hydrosylated.
- e) amina acid.

36) wrong about epiglottitis:

- Gradual onset with progression.

37) hepatitis A vaccine , which is wrong:

- a) recommended to give after the age of 12 months.
- b) usually asymptomatic in those less than 3 months.
- c) you can get it from cat feces.***

38) mumps vaccine, which is correct:

- a) more severe in young children than older children.
- b) most common complication is aseptic meningitis.
- c) can't be given to thalassemic patients.

39) wrong about neuroblastoma:

- Arises from metanephric blastoma.

40) wrong about varicella vaccination:

- Safe to give in pregnancy .

41- One of these cases doesn't need any workup and further evaluation:

- a- 14 years old female, Tanner stage 5 who's growing less than last year

42- Wrong about vancomycin ----- discoloration of the teeth

43- wrong about TOF ----- cardiomegaly on cxr

44- All of the following are correct about vWF except:

- a- Autosomal dominant
- b- Normal PT
- c- Prolonged aPTT
- d- Bleeding into joint and muscle **

45- 3 years old child, constipation- do reassurance and MCC in this age is
FUNCTIONAL CONSTIPATION

46- All of the following are causes of lower GI bleeding for 4 years old:

- a- Juvenile polyps
- b- Celiac disease **
- c- Meckle's diverticulum
- d- Constipation

47- Fetal circulation true:

- a- Blood moves from pulmonary artery to aorta through ductus arteriosus

48- Mechanism of heart failure in patient with large VSD at present and O2 sat.=96%

- a- Pulmonary hypertension and RF failure

49- Mitochondrial DNA disorder: Leigh's Disease

50- 15 Kg child came with 5% dehydration, calculate maintenance + deficit that should be given to him in 24 hours:

- a- 1350mL
- b- 2000mL **
- c- 2250mL

51- A 4.5kg infant to diabetic mother had convulsions. Your diagnosis?

- a. Hypoglycemia
- b. Hypoxic Seizure [due to increase risk of RDS]

الإجابة ولا وحدة فيهم، صار في معركة

52- Pt has recurrent ear infections, sinusitis, and dextrocardia. Kartagener syndrome... best diagnostic test

- Ciliary Bx

- 53- A patient had an exacerbation of Asthma, managed with Albutamol 3 times, improved, but his PO2 only slightly increased, the next step in management is?
- Systemic steroids
- 54- Case of suspected mal-rotation. What is the best diagnostic test?
- a) U/S
 - b) Upper GI barium series
 - c) pH probe
- 55- Management of vaginal bleeding in a 4 day neonate is?
- Reassurance
- 56- A drug not used in the management of kernicterus is?
- 57- True about Rota Virus?
- Vaccination is a live attenuated vaccine.
- 58- ECG showing flattened t wave in patient with projectile vomiting. What is your diagnosis?
- Hypokalemia
- 59- Hepatitis A diagnosis is made by?
- IgM
- 60- True about Down syndrome?
- Increased susceptibility to ALL
- 61- Case of Diabetic Ketoacidosis. Management?
- First we give bolus of normal saline, then IV insulin.
- 62- A child being treated for DKA, his sugar dropped to 240 and he is still showing signs of DKA. The next step in management is?
- Give dextrose 5% (prevent hypoglycemia)
63. Normal AGMA -----> Diarrhea
64. M.C.C of Fanconi Syndrome in childhood -----> Cystinosis

65. Low complement -----> subacute bacterial endocarditis GN

66. A case of polyuria, polydipsia, hypochloremic hypokalemic metabolic alkalosis : Dx -----> Diabetes insipidus

67. Picture showing lower limb skin rash / Hx of abdominal pain / Hematuria :
Ddx -----> HSP

69. Glomerulonephritis symptoms after infection history -----> post streptococcal GN.

70. اهم ملاحظة انهم ما كرروا اسئلة !!!

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The End ...

Bakir Jaber

Pediatrics final examination

6th year medical students

2015

1- All of the following indicate improvement of heart failure except:

- drop of venous sat from 65 % to 30 % ?

2- 3 month old baby, poor feeding, tachycardia 170, tachypnea 60, diaphoresis, pansystolic murmur on the left sternal border, Takmelto ennu fee cardiomegaly w pulmonary congestion on CXR, w/ blood pressure 80/50 (normal).. What's the most likely diagnosis: CHF

-PDS

-Coarctation ✕

✓ VSD?

3- 4 year old, diagnosed with cyanotic heart disease in infancy, now has clubbing and plethora, on examination, the apex beat is in the 5th intercostal space, midaxillary line, with pansystolic murmur, NO right ventricular heave, ECG shows sinus rhythm with LAD, the most likely cause is : 5 Ts

✓ -tricuspid atresia with VSD?

-TOF cyanotic

-truncus arteriosus cyanotic

4- A child who collapsed and had a cardiac arrest after competitive sports, resuscitated by teacher, she said she occasionally has palpitations after exercise which of these doesn't fit the patient:

✕ -Mitral regurge ?

-Hypertrophic obstructive cardiomyopathy ✓

-Coarctation

-long QT ✓

-Aortic stenosis ? ✓

5- Which of these doesn't cause diastolic murmur:

-Aortic stenosis with aortic regurge ✓

-Pulmonic regurge ✓

✕ -Coarctation ?

-Mitral stenosis ✓

6- pt with migratory arthritis, systolic murmur, hx of sore throat 2 weeks ago (rheumatic fever case), all true except:

- ~~do~~ require high dose aspirin? ✓ *2v*
- ~~do~~ require antibiotic prophylaxis up to 5 year?
- +ve ASO
- mitral stenosis in adulthood

7- in a hypertensive child you should order all of the following except:

- Echocardiography →
- CT angio *Qube*
- Renal US →
- ✓ ~~do~~ TSH →
- Urine analysis →

8- All of the following can increase cyanosis in patients with TOF except:

- high altitude
- infection
- exercise
- ✓ ~~do~~ squatting*
- high altitude

9- All of the following are indication for admission for pneumonia except:

- mycoplasma pneumonia*
- age less than 6 months
- respiratory distress
- immune compromised

10-False about croup:

- most common after the age of 4 years

11- Epiglottitis, all true except:

- incidence in Jordan was decreased by vaccination
- Hib used to be most common cause
- Presents like bacterial tracheitis
- Treated with aminoglycoside*

12- False about Polio :

- IPV is contraindicated above age of 18
- OPV can be safely given to neonate*
- most cases are subclinical
- OPV protects the community

13- false about Rota:

- given to pts with hx of intussusceptions

14- Salmonella all true except :

- salmonella typhi is acquired by contact with dogs*
- S. Enteritidis is acquired from eggs
- it causes viremia in infants more than older children
- antibiotics are not routinely used for older children and adults
- invasive salmonella including osteomyelitis is more common in sickle cell patients

15- false about rubella:

- cause severe encephalitis

16- false about measles:

- prodrome is important to establish infection
- severe course in malnourished and immune compromised
- reported to cause encephalitis
- vaccine is contraindicated above the age of 25*

17- false about rubella:

- reinfection cause viremia ?
- after congenital rubella the virus remains in fetus for few months

18- false about tonsillitis:

- penicillin is less effective in treating GAS than azithromycin?

19- patient with gastroenteritis, hypotension and tachycardia, 20 Kg, calculate 24 hr water need:

- 3500*
- 1700

20- Diphtheria, all true except :

- vaccine is protein based
- use vaccine in patients who were infected
- vaccine is usually associated with encephalopathy

21- HBV, all true except :

- vaccine is composed of core antigen only*
- virus is highly infectious and remains stable
- can be safely given to newborn
- cases in infants are usually subclinical
- chronic infection may lead to hepatocellular carcinoma

22- B lactam antibiotics all true except:

- inhibit cell wall synthesis
- most are cleared by kidneys
- can be safely given intrathecally*
- major mechanism of resistance is lactamase

23- false about tetanus:

- vaccination is not given to immune compromised

24- Obesity may cause all of the following in a female except:

- delayed menarche ?
- Fatty liver disease
- insulin resistance
- psedotumor cerebri

25- 8 year old boy, with tanner 2 pubic hair, 6 cc testis... which is the most likely cause:

- atypical CAH
- adrenal tumor
- brain astrocytoma
- topical androgen exposure ?
- testotoxicity

26- Child was 12, bone age 8, short stature, wt on 5th percentile, growth velocity low : all of the following can be a cause except:

- hypothyroidism?
- Chronic kidney disease
- Constitutional
- Growth hormone deficiency

27- Child presented with ca 5 and parathyroid hormone 9 (NL 8-25) what is the most likely cause:

- hypothyroidism
- Vit d deficiency

28- Which of these found in secondary adrenal deficiency

- hyperpigmentaion
- Salt craving
- Low ACTH*
- Increase cortisol to ACTH stimulation test

29- In DKA, all true except:

- potassium is added to solutions
- insulin is given initially as bolus then by infusion
- HCO₃ is used in special cases
- mannitol is used for treatment of cerebral edema?

30-Not a finding in congenital hypothyroidism:

- Hypertonia

31-in pt with panhypopituitarism, all expected to be seen except:

- high prolactin?
- low GH
- low menarocorticoid
- high Na?

Normal cortisol

32- a 4 year old boy presented to the ER with dehydration and serum sodium of 120, urine osmolarity was high , these findings are consistent with:

- a. sanjad sakati syndrome
- b. SIADH
- c. CAH
- d. gastrointeritis
- e. dierutics

33- of the following adrenal conditions, what could lead to HTN in a child?

- 21-B hydroxylase deficiency
- 11 B hydorxylase deficiency*

34- Which is true about systematic onset juvenile rheumatoid arthritis:

- equal incidence in females and males

35- all of the following cause macroscopic hematuria except:

- benign familial hematuria ?
- IgA nephropathy
- hypercalcuria

36- Child presented with Microscopic Hematuria and proteinuria and Low C3 after 4 weeks of having an URTI. after receiving proper management, After 6 weeks, on F/U what would be the finding that indicate resolution of this child's condition:

- High C3 - Microscopic Hematuria - Proteinuria - High Cr.
- Normal C3 - No Hematuria - No Proteinuria .
- Normal C3 - Microscopic Hematuria - Proteinuria - Normal Cr.??

37- all of the following true about fanconi syndrome except:

- glucosuria with normal blood glucose
- urine ph of 7?
- caused by Wilson
- profound hypercalciuria?

38- All of the following causes metabolic alkalosis except:

- vomiting
- diuretic
- diarrhea

39- Patient with tonsillitis, 1 week ago, was given claforan (amoxicillin) and ibuprofen, presented with high creatinine, urinalysis show hematuria, pyuria, no proteinuria, most likely causes is :

- tubular interstitial nephritis ?
- poststreptococcal GN
- obstructive uropathy

40- indomethacin causes all except :

- liver toxicity *
- fluid retention
- renal impairment

41- Patient with low bicarbonate, low potassium, positive urine anion gap, all can be found except :

- normal phosphate level
- cystinosis
- ph of urine >7
- glucosuria ?
- hypercalciuria

42- Metabolic alkalosis except, may see diarrhea but not stool, see :

- bartter
- gitelman
- diuretic
- vomiting
- mineralocorticoid deficiency *

43- Patient with gastroenteritis, low sodium level, the most likely to be found in urine :

- FENa < 1% *
- polyuria
- urine osmolality < 300

44- Which is true about nephrotic :

- relapse occurs in 20%
- response to steroids occurs in 90%*
- tacrolimus used in steroid resistant cases
- prognosis is same in patients with relapses and patients with steroid resistance

45- patient with CKD stage 4, not any treatment, all can be found except :

- osteitis fibrosa cystica
- hyperphosphatemia
- metabolic acidosis
- anemia
- astatic bone disease*

46- All can be caused by hypokalemia except:

- arrhythmia
- muscle weakness
- areflexia
- seizures*

47- All can cause hypercalcemia except :

- immobility
- hyperparathyroidism
- tumor lysis syndrome*

48- all of the following increase the risk of UTI except:

Enuresis

- obstructive uropathy
- high grade VUR
- neurogenic bladder
- constipation

49- Child with Absence Seizures recently having generalized seizures. What drug to use:

- Valproic Acid

50- Which of the Following can be diagnosed using "FISH":

- Prader-Willi*
- NF-1

51- Cherry-red spot, with developmental delay caused by :

- Tay Sachs peroxysomal
- Neimann pick
- Beckwith wieldsman

Development

52-Start to run : 18 m

53-start laughing : 4 m

54-full head support : 4m

55- baby able to copy triangle at age of 5 y

56- Vision, all true except :

- visual fixation starts at birth

- visual acuity is 20/20 by age of 6 months

- discriminates colors at 3 months (aw 2)

- can follow bright object at birth

57-Clonus is normal up to which age ?

2 mo?

4 mo

6 mo

12 mo

58-Avoidance of what can lead to decrease of infantile botulism :

- honey

59-Child with Hx seizures bs on drugs, presents with new seizure and EEG during the ictal attack shows no abnormalities, next step;

Psychology consult

Increase drugs

Observe

60-Congenital myasthenia gravis, all except :

- can present in the neonatal period

- positive Ach receptor antibodies*

Presents with fatigue

- ACh esterase inhibitor used in treatment

- shows detrimental response on nerve stimulation tests

61- Sth about a child who when cries and becomes frustrated (I think it was breath holding spell) and asking about what to tell parents:

- Send the child to psychiatrist

- How to handle this benign condition

- See a neurologist

62- Duchane muscular dystrophy, all true except:

- calf pseudohypertrophy
- positive gower sign
- single gene inheritance
- autosomal inheritance*

63- ADHD is diagnosed before the age of :

- 7 years

64- all of these indications to use hyperbaric oxygen except:

- Air embolus
- Crush injury
- ischemic foot ulcer
- Autism*
- CO poisoning

65- which is not present in trisomy 18 Edward

- macrocephaly

66- Child presents with developmental delay, hepatosplenomegally, coarse features, joints stiffness:

- Tyrosinemia
- Hurler syndrome*
- Galactosemia

67-Which of these have trinucleotide expansion repeat:

- Huntington
- Down

68-Which of the following syndromes caused hypercalcemia:

- William Disease

69-Female child with hx of hemiplegic stroke, and family member with dislocated lense:

- Homocystinuria

70-Vitmain E deficiency causes all of the following except:

- Ataxia
- hemolysis
- peripheral neuropathy
- Hepatosplenomegaly ?

71- all of the following can be given in neonate except:

- paracetamol
- ceftriaxone *
- cefotaxime
- ibuprofen

72- all of the following are normal findings except:

- erythema toxicum
- Bulging fontanelles
- impetigo

73- all cause hypoglycemia except:

- premature
- Down syndrome
- Large for gestational age
- SGA

74- In fluids for newborns, all true except:

- sodium is not added on the first day
- dextrose 5% is the used solution*
- potassium is added to fluids
- fluids should be restricted in patients with PDA
- preterm infants have increased fluid requirements due to insensible losses

75- all of the following are indicated for treatment of ARD except:

- steroids*
- IV fluids
- oxygen
- surfactant
- mechanical ventilation

76- all true about NEC except:

- occur in baby not started on feeding
- x ray remains the gold standard
- NEC is not ass with significant morbidity/ sequel later in life. *
- Requires broad spectrum antibiotics

77- all may be used for treatment of hyperbilirubinemia except:

- phototherapy
- IVIG
- exchange transfusion
- steroids?

78- which is false about neonatal resuscitation:

- atropine is drug to treat bradycardia

79-all contraindications for breast feeding except:

- mother with HBV, infant vaccinated

80-all complications of prematurity except :

- delayed motor
- corneal ulcer

81- all of the following are indicated to treat direct hyperbilirubinemia except:

- change milk formula
- give urodoxycholic acid to improve bile excretion
- monitor pt for upper GI bleeding
- monitor for ascitis
- vitamin B and C supplements are important?

82-all of the following have etiology specific treatment except

- galactosemia ✓
- ⓧ alpha one antitrypsin
- biliary atresia ?
- tyrosinemia ✓
- hypothyroidism?~

83- which is the antigenic part of milk:

- ⓧ protein

84-patient with heart burn, epigastric tenderness, first visit, you do all of the following except:

- ⓧ schedule her for endoscope ?
- Give PPI
- recommend to change diet
- make full examination
- look for red flags

85- which is least likely to occur in pediatric celiac

- osteoporosis ?
- ⓧ constipation
- myopathy

86-which is false about acrodermatitis enteropathica:

- caused by severe zinc deficiency
- alopecia is common
- perianal dermatitis is characteristic
- diarrhea is unlikely **

87- what test you do to diagnose pt with juvenile polyp

- colonoscopy ?
- tagged RBCs
- radioisotope scan

88- which is the most common immuno deficiency:

- IgA immunodeficiency

89-T cell deficiency is most common to manifest at:

- early infancy*
- school aged

90-which is false about atopic dermatitis:

- occur on extensor surfaces
- pruritic
- increase risk of asthma and allergic rhinitis
- common present as diaper rash *
- IgE mediated sensitivity

91-all those medications used to treat anaphylaxis except:

- antihistamine
- steroids
- epinephrine
- theophylline?
- nedulized B agonist?

92-Cystic fibrosis can present with all of the following except :

- rectal prolapse
- insulin dependent DM
- hyperchloremic metabolic acidosis in periods of dehydration *

93-All true about hereditary spherocytosis except :

- may be asymptomatic without anemia
- may present with anemia and hyperbilirubinemia in infancy
- splenectomy doesn't cure hemolysis*
- AD inheritance

94-About iron deficiency anemia, all true except :

- iron should be added to breastfed infants from the 1st month of life*
- hypochromic microcytic RBCs
- ferritin reliably reflects iron stores in the absence of inflammation

95-ALL all true except:

- 85% are due to T cell defects*
- most patients have mutations
- clinical radiation can increase the risk

96-Child with abdominal mass that causes discomfort, on examination he has HTN, the most likely cause is :

- nephroblastoma
- neuroblastoma
- renal clear cell carcinoma
- hodgkin

97-Not a lab finding resulting from chemotherapeutic agents (i.e. Tumor lysis syndrome)?

- Hyperphosphatemia
- hyperkalemia
- hypocalcemia
- high Uric acid
- Hypernatremia ?

The end

(we are not sure of the answers, plz check them)



Pediatrics Exam
5th year, 2013/2014

Neurology:

1-Developmental miles stones:

Social smile : 2 months

Draw a circle: 3 years

Average age of walking: 9-15 months, 15-18 months ??

A one year old can speak: 3 words, plus mama and dada

2- which of the following is the most common cause of myopathy in children:

a- inflammatory ?

b- metabolic

c- endocrinopathy

d- dystrophy ?

3-A patient that develops sudden loss of tone followed by convulsion and accompanied by cyanosis, then after the attack he has anger and crying which is correct:

It will reaolve when he is 6 years old**

Thw treatment is phenobarbital

He has autistic features

Its pharmocoresistant

4-A patient with ADHD which is wrong:

High IQ**

it manifests before 7 years

5-A patient was born at 26 weeks and pt on ventialtor he has now spasticity in both his legs and doesnt speak except for two, born premature, which is correct:

a- he will loss sensation of the lower limbs

b- he cant move at all

c- his Motor function will improve with time**?

d- he will develop global developmental delay?

6-which of the following is true about global developmental delay:

a- most common cause is metabolic disorder**?

b- it means all four developmental milestones are delayed

c-

7-A child presented with sudden episodes of laughter, this type of seizures is known as:
gelastic

8-All of the following are red flags in child with headache except:

Duration 2-3 years

Occipital location**?

Increasing in frequency and severity

Specifically at morning with associated headache

9-Which of these isn't a lower motor neuron disease:

Myopathy**

NMJ diseases

Spinal cord**

Polio

Congenital dystrophies

10-Whats true about GDD:

Almost always a cause nt known

Delay in all milestones

Eeg not important

Mostly by metabolic ??

11-of the following are pervasive disorders except:
schizophrenia

Infectious:

1-otitis media all true except :

a-usually abnormal tympanogram ??

b- associated with allergic rhinitis

c- redness on the tympanic membrane is suff. for dx, **?

2-all of the following about rota virus except:

a- vaccine not given to contacts with leukemia**

b- no person to person transmission

c- vaccination is contraindicated above age of 8 months

d- vaccination is contraindicated to be given to pregnant

3-all of the following are transmitted by IgG across placenta except:

- a- thyrotoxicosis
- b- Rh isoimmunization
- c- HIV***
- d- myasthenia gravis
- e-...

4-pt with Hx of vomiting and diarrhea 6 times, has no signs of dehydration, his weight is 10 kg, what is his maintenance for 24 hrs:

- 1000 ml
- 1500 ml

5-all of the following can cross the blood brain barrier except:

- meropenim
- ampicillen
- gentamycin ?
- ceftriaxone
- cefotxitine

6-which of the following is used as intrapartum prophlaxis for group B strep:

- tinam
- ampicillin

7-which is wrong about hemophilus influenza type B:

- a- cause otitis media **
- b- vaccination not given to healthy child above 5 year old
- c- vaccination is not given under 6 weeks old
- d- antibodies against capsule are protective
- e-....???

8-about measles, wrong:

- measles vaccine given regardless of the age ??
- transmitted by contact only

9-a pregnant carrier for hepatitis B, what u do at birth:

give the child hepatitis B vaccine and immunoglobulin within 10 hours of birth

10-about pneumococcus vaccination, wrong:

- a- non conjugated not given less than 1 year old
- b- contraindicated under 6 weeks old
- c- contraindicated in pregnancy ?

11-All of the following cause PMNs in the stool except:

- A. rota virus
- B. Norwalk
- C. Giardia
- D. Ameoba
- E. Vibrio cholera

12-False about pertussis: bacteremia is common
It's only in reported cases

Nephrology:

1- All of the following are seen in RTA distal type except:

- A- hypokalemia
- B- hypercalcuria
- C- urine ph more than 5.5
- D- positive urinary anion gap
- E- hypophosphatemia**

2- all of the following cause hyponatremia except:

- A- diabetes insipidus**
- B- nephrotic syndrome
- C- gastroenteritis
- D-

3-All of the following cause hyperkalemia except:

- A- cyclosporine
- B- salbutamol **
- C- RTA type 4
- D-

4- All of the following are seen in hypernatremic dehydration except:

- A. doughy skin
- B. Signs of dehydration
- C. Fever
- D. Brain hemorrhage

5- in a pt with metabolic acidosis, u found low urinary chloride, all of the following can be the cause except:
barter syndrome

6- in a pt with nephrotic syndrome, all of the following are true except:

- A. spot protein to creatinine ratio 1 *
- B. Hypoalbuminemia
- C. Hyperlipidemia
- D. Microhematuria

7- pt with Hx of gastroenteritis, developed renal puffiness and ascites, no urine output since 24 hrs, labs showed normal creatinine, urea, and high fractional excretion of sodium, what would be your next step:

- a- start IV fluids **?
- b- dopamine
- c- restriction of fluid intake?
- d- dialysis
- e-...

8- Gastroenteritis, presented with high BUN and creatinine, became 20, 0.5 respectively after 2 days with fluid management, what's the most likely cause

- a- IgA nephropathy
- b- PSGN
- b- pre renal ARF***?
- d- ATN
- e- interstitial nephritis

9- all of the following are associated with hypertension except;
minimal change nephrotic syndrome

10- all of the following are seen in HUS except:

- a- uvities**
- b- jaundice
- c- colitis
- d- hematuria
- e-

11- pt with red urine, U/A showed RBC cells and casts, normal complement, urea, creatinine... what is the most likely cause:

- a- hypercalcuria?
- b- lupus nephritis
- d- IgA nephropathy **
- c- UTI

12- all of the following are true combination of medications used in treatment of CKD except:

- a- 11 hydroxylase vitamin D: hyperPTH ??
- b- sodium bicarbonate: metabolic acidosis
- c- calcium carbonate with meals: hypocalcemia **
- d- erythropoietin: anemia

- 13- a boy with high blood pressure reading for the first time, what would u do;
- a- this is essential HTN
 - b- this is secondary HTN
 - c- repeat the reading at another visit**
 - d- start pt on diuretics
 - e- has high risk of cardiac diseases

14- UTI, which is false:

- a- recurrent UTI result into renal scarring
- b- MCUG is not indicated after the first episode
- c- DMSA should be done during the 1st month **
- d- elevation of ESR suggest pyelonephritis more than cystitis

Hematology:

1-A patient has hypoplastic thumb, hyperpigmentation and ft he most likely has:
Blackford diamon
Fanconi anemia ***

2-pt with sickle cell disease, developed anemia with reticulocytopenia:

- a- aplastic anemia**
- b- hypersplenism
- c- hemolytic anemia

3-All of these associated with chromosomal breakage/ instability except:

- Klinefelter**
- Blooms syndrome
- Fanconi
- Xeroderma telangiectasia

4-A patient develops mucosal bleeding and petechia and other wise normal what does he have:

- Hemophilia A
- hemophilia B
- ITP**
- DIC

5-A patient has opsomyoclonus (dancing eyes...) its associated with:

- Neuroblastoma**
- Wilms
- Germinoma

6-A part of chromosome moving to another non homologous chromosome:
Translocation

7-antenatal ultrasound detection of all of the following increase likelehood of chromosomal abnormality except:

- a- monozygotic twins
- b- duodenal atresia
- c- hydrops
- d- increase nuchal skin translucency
- e- ...

8-all of the following occur more in down syndrome except:
cystic fibrosis

9-which of the following is autosomal recessive:

- a- homocystinuria**
- b- G6PD
- c- dystrophy
- d- hemophilia
- e- achondroplasia

Neonatology:

1-Wrong statement about Staph. Aureus --> Most common cause of early neonatal sepsis.

2-All present in breast milk more than cow's milk except :
Ca and phosphate

3-All suggest benefits of breastfeeding except :
Protect against bleeding (or hemorrhagic) disorder

4-One causes sensorineural deafness, microcephaly and hepatitis:

CMV**

Rubella

Syphilis

5-which of the following is true about neonatal screening:
normal cardiac examination at the delivery room doesnot exclude congenital heart disease

6-which of the following is true about APGAR score:

acral cyanosis is given 1***

baby must cry to be given 2 on breathing part

7-all of the following is true about phenyleketonurial except:

- a- autosomal recessive
- b- part of neonatal screening in Jordan
- c- affect are usually fair hair, blue eyes
- d- early treatment prevent mental retardation
- e- present in Acute intermittent coarse***

8-which is true:

- a- very low birth weight is < 1000 gm
- b- extremely low birth weight is < 700 gm
- c- ..

9-which of the following is most common cause of jaundice in the first 24 hours:
hemolysis**

- breast milk jaundice
- physiological jaundice

10-all of the following result in neonatal hypoglycemia except:

- hyperinsulinemia
- maternal diabetes
- breast milk feeding***

11-all of the following are seen in galactosemia except:

- cataract
- alkalosis**
- jaundice
- seizure
- metabolic acidosis

12-which of the following is not true about rubella infection

- a- associated with macrocephaly**
- b- highest risk of fetal transmission in the first 2 months
- c- associated with congenital heart disease

13-which of the following congenital infection is characteristically associated with microcephalus, hepatitis, and sensineural hearing loss:
CMV

14-which of the following is true about human milk:

- a- contains more vitamen A, C, E than cow's milk*?
- b- contains more calcium and phosphate than cows's milk*?
- c- contains more lactoferin than cow's milk
- d- contains more lactoalbumin than cow's milk
- c- contains more IgA than cow's milk

15-which is wrong about breast feeding:
increase risk of prepubertal malignancy

Endocrinology:

- 1- Years boy with short stature all these tests are important except --> Random Growth Hormone.
- 2- the most common cause of adrenal insufficiency in pedz is:
 - a- congenital adrenal hyperplasia**?
 - b- exogenous steroid withdrawal??
- 3- ambiguous genitalia, by U/S u found uterus... what is the most appropriate to be measured next:
17-OH, progesterone
- 4- growth hormone deficiency in neonates causes all of the following except:
 - a- hypoglycemia
 - b- prolonged jaundice
 - c- microphalus
 - d- midline defects
 - e- low birth weight***
- 5- all of the following are done to screen for short stature except:
random growth hormone
- 6- all of the following occur with diabetes insipidus except:
 - a- low urine osmolarity
 - b- high serum osmolarity
 - c- hyponatremia **
 - d- polyuria and polydipsia
- 7- all of the following are true about DKA except:
diagnosis with ph 7.35, HCO 24, positive urinary ketones
- 8- about congenital hypothyroidism, all true except:
 - a- require treatment with thyroxine for life
 - b- autosomal recessive**
 - c- most common cause is agenesis and dysgenesis
 - d- part of neonatal screening in Jordan
- 9- all of the following are true in treatment of DKA except:
use bicarbonate to correct acidosis

10- which of the following is false about a girl:

- a- precocious puberty occurs <9 years old
- b- delayed puberty > 13 year old
- c- first sign of puberty is breast bud
- d- highest growth spurt in girls occur earlier than boys
- e- Central precocious puberty is commonly due to CNS disease ??

11- which of the following cause hypophosphatemia and hypocalcemia:
vitamin D deficiency

12- which is true about down syndrome:

they are born larger than normal size, but grows to be short adults**

Cardio:

1- highest concentration of oxygen in fetal circulation is present in:

- a- umbilical vein**
- b- pulmonary artery
- c- ascending aorta
- d- superior vena cava

2-all of the following are inotropic drugs except:

- a- propranolol**
- b- milrinone
- c- dopamine
- d- epinephrine
- e- digoxine

3-a pt with dilated cardiomyopathy, all of the indicate improvement the next day except:

- a-bicarbonate drop from 24 to 18**
- b-bp rising from 90/60 to 100/70
- c- bp rising from 90/60 to 100/70

3-year- old child, with soft mid-systolic murmur, normal growth parameters, the most likely cause is :

- A. Anemia
- B. ASD
- C. VSD
- D. Thyrotoxicosis

4-Child born premature, admitted to NICU, and put on ventilation, pulses are prominent, the most likely finding is :
Continuous murmur in the left infraclavicular area

5-Child with cyanosis, low o_2 sat, has Rt ventricular heave, ejection systolic murmur on left parasternal area, the most likely finding on CXR is:

Boot shaped heart

Normal shaped heart with decreased pulmonary markings

Respiratory:

1-Q about recurrent infection w jaundice: -cystic fibrosis

2-All of the following true about epiglottitis except:

High fever of 39

Cough **?

Drooling of saliva

Perceding coryza??

symptoms develop over hours?

3-Wrong about RSV:

Decreased lung volume on CXR**

4-all of the following are present in bronchiolitis except:

decreased lung volume on CXR

Rheumatology:

1- in oligoarticular JIA, all true except:

affect small joints

2- scenario of kawasaki disease, which mostly is true:

a- if untreated result in life threatening bleeding from thrombocytoPENIA

b- must be admitted and given IVIG

3-all of the following true about HSP except:

a- most common vasculitis

b- result if purpuric rash in dependent body parts

c- insrease risk of intussusiption?

d- doesnt result into nephritis**

4- which of the following is wrong about staphelococcus aureus:

a- most common cause of septic arthritis

b- soft tissue infection must be incised and drained

c- frequent cultures are done to confirm resolution

d- common cause of neonatal sepsis**

5- all of the following immunity part if deficient increase fungal infection except:

Opsoniazation??

Neutropenia

B cell defect

T cell defect

Combined b and t deficiency

6-which of the following is likely to be abnormal in pt with chronic granulomatous disease:

a- NB test ***

b- full blood count

c- osmotic fragility test

7-chronic urticaria:

Ige mediated**?

Idiopathic

GI:

1- Wilson's Dx --> Decreased Ceruloplasmin, Increased Urine Copper.

2- all of the following cause watery diarrhea with no polymorphonuclear cells except:

a- rotavirus

b- norwaki virus

b- cholera

c- ameba

e- giardia

3- all of the following are used in treatment of cow's milk protein allergy except:

a- lactose free milk***

b- soy milk

c- completely hydrolysed milk

d- partially hydrolysed milk

e- aminoacid formula

4- all of the following support diagnosis with GERD except:

a- apnea with vomiting***

b- vomiting after feeding

c- severe irritability

d- failure to thrive

e- chronic pneumonia

5- all of the following has a higher risk to develop celiac except:

- a- trisome 13**
- b- trisome 21
- c- positive Hx of autoimmune disease
- c- family member with celiac disease

6- all of the following are true about hirschsprung disease except:
passing meconium within first 24 hours of life totally exclude the disease

7- all of the following affect the liver or cause hepatomegaly except:

- a- glycogen storage disease
- b- lipid storage disease
- c- peroxydase disease
- d- organic acid disease**?
- e-

8- A child had kasai operation when he is young now he is 6 years k2eno and he cant walk and has absent DTR, blood examination shows acanthocytes he has:

- Vitamin E Deficinecy**
- Vitamin C deficiency

9- Pyloric stenosis; what investigation do u order ?

- abdominal U/S **
- HIDA scan

وَمَا تَوْفِيقِي إِلَّا بِاللَّهِ عَلَيْهِ تَوَكَّلْتُ وَإِلَيْهِ أُنِيبُ

6th year Peds 2014

1-term with jaundice, all of the following are pathological except :

- a) direct Bili >2
- b) increase more than 5mg/dl per day
- c) jaundice in the first 12 hours of life
- e) total bilirubin level of 11 at day 5**

2-does not cause hypoglycemia :

- a) urea cycle **
- b) maple syrup disease **
- c) mucopolysaccharidoses
- d) glycogen storage disease

3-Does not cause organomegaly :

- a) PKU**
- b) galactosemia
- c) tyrosinemia
- d) neimman pick
- e) gaucher

4-. Breast milk advantages except :

- a) less otitis media infx
- b) less hemorrhagic disease of the newborn(which is vit K deficiency) **
- c) less allergies

5-a case about cow milk allergy, if you switch him to a hydrolyzed formula, when do u expect him to get better :

- a) within 12 hrs
- b) 2-3 days **?
- c) one weeks
- d) one month

6. Severe dehydrated pt , weight 8 kg ,calculate fluid deficit :

600-700

800-1000 **

2000-3000

7. Tumor lysis syndrome which is true :

a) hyperphosphatemia **

b) hypercalcemia

c) hypokalemia

8. Potassium replacement is: 20 mEq /L

9-acrodermatitis enteropathica , what is wrong .

a) diarrhea

b) normal growth ** ?

c) low zinc

d) perioral rash

e) anal rash

10- cyanosis seen at , deoxy Hb more than (mg/dl)

a)1 b)2 c)3 d)4 e)5 *

(this is what we know from medicine , but in dr. eyad's slides it is mentioned that cyanosis is seen at 3-4)

11-Most common cause of polycythmia in newborns:

- a) delay in clamping the cord * ?
- b) prematurity
- c) Post-term (>42 weeks)
- d) Meconium stained amniotic fluid?

12- 6 year old female pt, sits with truncal support , speaks only 5 words , has spastic limbs on examination :

- a) global developmental delay**
- b) metabolic error
- d) cerebral palsy

13- Children start saying pronouns at

- a) 1 year
- b) 2 years
- c) 2.5 years*?

14-separation anxiety :

6-9 months*

15-Copying a triangle at : 5 years

16- a case with hypophosphatemic rickets , that has fanconi syndrome as well , her condition is associated with : cystinosis

17-not associated with hypomagnesmia :

- a) hypocalcemia

b)hyperkalemia ** (it is hypokalemia)

18-a disease not associated with calcium disturbance

a)DiGeorge

b) angleman syndrome **

c)wiliam

19. MCC of congenital hypothyroidism: dysgenesis

20- Wrong about primary adrenal insufficiency >> low ACTH

21-ATN case, which is wrong:

a)low Sodium in urine *

b)highly concentrated urine

22- a healthy neonate, which is not seen

a) social smile * ?

b)lifts head ** ?

c)senses heat

d)reacts to sweet thing in his mouth

23-Wrong about down's >>> usually Father of age more than 35 increase the risk

24- a syndrome associated with genetic Imprinting --> prader willi

25- 3 months old child, having diarrhea, all can be a cause except:

a)tuft enteropathy

b) Na diarrhea

c) celiac ** (gluten still not introduced)

26- Wilms tumor, correct is :

a) associated with other syndromes **

b) hypertension differentiate it from neuroblastoma

27- absence of a chromosome is called :

a) Monosomy, *

b) deletion

28- polyploidy is : a whole extra set of chromosomes ??

29- a case describing anemia Hb 6 , MCV normal , low retic : can be all except :

a) CKD

b) acute blood loss

c) hereditary spherocytosis **

30- a case describing a new born, anemic, +ve coomb :

hemolytic disease of new born **

31- a question about ITP, wrong : associated with splenomegaly

32- Wilson has :

a) inadequate biliary excretion of copper *

b) increased biliary excretion

c) increased absorption of copper from GI

33-you can treat Myasthenia gravis by all , except :
acetylcholine esterase agonist **

34-not used in long term management of functional constipation :

- a) stimulant laxative **
- b) increase fiber in diet
- c) osmotic laxatives

35. A case about pain in knee of recent onset, swollen and cant move it :

Septic arthritis**

Osteomyelitis

JIA

36. Bone age 8 years , chronological age 12 , growth rate is 3cm/year : all of the following except:

- a) idiopathic short stature
- b) constitutional short stature**
- c) GH deficiency
- d) CKD
- e) hypothyroidism

37. All of these can happen with TPN except :

- a) hypoglycemia
- b) hyperglycemia
- c) increase zinc **
- d) cholestasis
- e) low Mg

38- Breast milk advantages except :

- a) less otitis media infx
- b) less hemorrhagic disease of the newborn (which is vit K deficiency) **

39- Hepatitis A , which is wrong:

- transmission from exposure to wild animals**
- post exposure vaccination is effective if given within 2 weeks
- in children usually asymptomatic
- feco-oral transmission

40- best to assess renal scarring : DMSA scan

41- Wrong about PSGN :

- massive proteinuria ,
- hypertension,
- edema

(can't remember the answer)

42- Which CAH has hypertension ?

- a) 21 hydroxylase
- b) 11 beta hydroxylase *
- c) 17 beta hydroxylase

43- Rickets , low Ca+ low Po4-2 high PTH

- a) vit d deficiency *
- b) vit d resistance

44- Precocious puberty case in a male who has tanner 2 pubic hair and 5 cc testicles, first thing to do:

- a) testosterone level**?

b) X-ray wrist

c) brain and pituitary MRI

45-another one : all are useful in dx precocious puberty in a girl who has isolated pubarche except:

a) testosterone

b) B-hcg **

c) androstenedione

d) left wrist x ray

46-Marasmus, which is wrong : a protein losing disease

47-bluberry muffin, cataracts and a PDA :

rubella * ,

CMV,

toxoplasma

48-All of these are concerning murmurs except:

a) 2/6 systolic murmur which decreases with standing *

b) 2/6 systolic murmur that increase with valsalva

c) a diastolic murmur

49-We treat cyanotic heart disease to keep ductal open :

PGE1**

PGE2

50-a case about a 3 months , u evaluate him for poor feeding , and irritability, all these can be a cause of CHD in him except

a) truncus arteriosus

b) small ASD***

51-Not in postterm infant

a) polycythemia

b) meconium aspiration

c) hyperglucemia *

d) persistence of pulmonary circulation

52-a case about a baby who has HR 230, ecg shows narrow complex QRS, which is given to her:

adenosine (its an SVT)

53-a case describing a patient with cardiomegaly, pulmn congestion pansystolic murmur, dx is: VSD

54-All of these cause wide pulse pressure except:

a) MR*, b) PDA c) truncus arteriosus** ? d) AR e) AV malformation

55-a girl having SOB and exercise intolerance vs stable. Two weeks she has a URI, what is the dx

a) tamponade

b) myocarditis **

56-wrong: transposition of great vessels has a murmur *

57-In adolescence, hypertension is defined as

a) more than 140/90 mmHg

b) more than 140/90 above 95 percentile **??

c) more than 140/90 above 93 percentile

58-common cause of renovascular hypertension in kids

- a) vasculitis
- b) kawasaki
- c) fibromuscular hyperplasia **
- d) trauma

59-inotropy to the heart , except :

- a) epinephrine
- b) norepinephrine ** ?
- c) milrinone (phosphodiesterase inh)**?
- d) dopamine
- e) dobutamine

60-wrong about hepatitis B

- a) neonates has the highest risk of chronicity (this is true)
- b) the vaccine is C/I in immunocompromised***

61-Rota virus, wrong :

the vaccine is not given after 8 months

rare transmission between children **

62-about h.influenza, which is wrong:

- a) it is rare now in Jordan after vaccinations
- b) β -lactamase producing strains can be rx with vancomycin *?
- c) vaccination totally eradicates its colonization of the nasopharynx??

63-a case about osteomyelitis, which is wrong :

unrx, the hip effusion can lead to osteonecrosis

CRP decreases more slowly than ESR or something like this**

64-wrong about bacterial sinusitis:

a cough, dry or wet is present

negative imaging (CT) totally excludes it??**

in addition to antibiotics, inhaled corticosteroids are necessary treatment***

65-Neonatal seizures are rx by: Phenobarbital

66-which abs doesn't cover anaerobe :

a)clindamycin

b)metronidazole

c)piperacillin

d)ciprofloxacin

e)vancomycin*

67-a question about polio , which is wrong :

a) asymmetrical

b)ascending *

c) transmission is feco-oral within smth period

68-Not Anterior horn cell disease

a)trasverse myelitis

b)polio

c)Wilson *

69-wrong about autism :

absence of stereotypical movements *

can be diagnosed

70-a case describing a staring kid >> absence seizure

71-a case of meningitis, the patient developed Na 120, rx:

water restriction ?(SAIDH)

hypertonic saline

72- Rubella wrong:

a) subclinical maternal infection in mother doesn't affect fetus **

b)infection at third trimester doesn't cause cataracts and sensorineural hearing loss

73. most common cause of asthma exacerbation in 4 months child :

a)smoking ,

b)exercise ,

c)URTI **

d)cold weather

74. Symptoms of asthma , best investigations : spirometry

75-another question about asthma, which is wrong : respiratory acidosis and hypercapnia is found in all stages **

76-. Not with tension headache : photophobia

78-a kid with ash-lead macules , which is wrong about his seizure

- a) tuberous sclerosis
- b), west syndrome
- c) vagal nerve stimulation first line in rx **
- d) vigabatrin is a good choice

79-Which mechanism causes hypokalemia by intracellular shifting of K^+ ? (totally forgot what is this about)

high renal flow

resins

thyrotoxic periodic paralysis**

intestinal obstruction

ileus

80. What favors atopic dermatitis in a child rather than seborrheic dermatitis :

- a) pruritis more intense * ,
- b) come with young age
- c) presence of cradle cap

81-Apgar score case : 5

82-.

83. Not to tell patient about celiac: after 5 years of gluten free diet , you will lose gluten sensitivity

84. Question about meningococemia ?

The only abx for prophylaxis that can be used in pregnancy is ceftriaxone ?

Can be treated by vanco **

85. Wrong about mumps : ttt with acyclovir .

86. Wrong about migraine : no disease free intervals

87. Not ttt for ADHD: methylphenidate , family support , cognitive therapy , atomoxetine , Phenobarbital **

88. not a chromosomal disease : achondroplasia

89. Patient with DM on insulin had a hypoglycemic attack (40) wt to do next,

-give her juice * ?

-give her glucagon

90. Question abt SLE what is wrong: the options :

ana help in dx ,

ana anti dsDNA and anti smith are in the criteria for dx ,

patients with antiphospholipid may have prolonged PTT

they have hemorrhagic complications as in patients with hemophilia***

91. not in work up for girl with mental retardation ?

a) fragile X **

b) chromosomal abnormalities

92. a question about G6PD, what is wrong

Best diagnosis is Hb electrophoresis**

93. not a side effect of steroids :

Uveitis**

94. Solid tumors wrong
Retinoblastoma is bilateral

95. ALL wrong
(9,22) carries a good prognosis

96. Polyploidy true:
two paired (homologous) sets of chromosomes

97. A case with Mental retardation and lower limb spasticity you diagnosis:
Cerebral palsy

98. What doesn't cause shift of apex beat to the mid axillary line : mitral regurge

Peds, 5th yr, 2013

1- What's Apgar score in an infant who is limp and flaccid, no response to nasal stimulation, all blue, HR 80, respiration irregular:
2*

2- in infants, clonus disappear at

2 months*

6 months

12 months

24 months

3- Social smile at :

a- 2 months**

b - 3 months

c- 4 months

d- 6 months

4- baby who is cyanosed and hypoxic, has holosystolic murmur, ur Dx :

VSD*

5- in what cong heart disease you need the PDA remain patent to survive :

pulmonary atresia**

Aortic stenosis

VSD

Truncus arteriosus

6- history of 5 days fever, skin rash, cracked lips, cervical L.N enlarged:

Kawasaki*

Rheumatic fever

7- all are true about breast milk except:

increase the risk for obesity*

8-wrong match regarding vitamins:

vit c def. --- myoclonic seizures*

folate def. ---- megaloblastic anemia

vit B1 def. ---- neuropathy

vit D def ---- rickets.

9-All with leukocorrhea (absent red reflex) EXCEPT:

a-congenital cataract

b-retinoblastoma

c-Galactosemia

d-subconjunctival hemorrhage **

e-congenital rubella

10-wrong about cephalohematoma :

Doesn't cross suture lines

resolved within 48 hours**

can exaggerate neonatal jaundice

subperiosteal position

no need for aspiration

11-true about RDS

ground glass appearance**

steroids AFTER birth can decrease it

exogenous surfactant rarely useful

CPAP rarely useful

12- when can the child hop on one foot :

2.5 years

3.5 years** ?

4.5 years ?**

13-true about transient tachypnea of the newbornTTN ----

Usually resolves within 48 h**

14- (SMR) First sign of male puberty :

- Testicular enlargement ****

- penile elongation

- pubic hair

- deepening of voice

- facial hair

15-contraindications for breast milk except:

a-AIDS

b-active TB

c-Mastitis**

d-psychosis

e- substance abuse

16-wrong about oligoarticular JRA

positive RF**

positive ANA

some have HLA association

17-wrong about Autosomal dominant inheritance:

males affected more than females**
phenotypically normal parents don't transmit it

18-all can be associated with Cf.....except ::

precocious puberty**

19-All are seen in congenital toxoplasmosis except:

Hydroceph
Chorioretinitis
Cataract ***
Intracranial calcification

20- neonatal examination the abnormal finding:

S2 louder than S1 in pulmonary area
Heart rate of 250 bpm while crying** ?

21- not of pervasive developmental disorders :

Autism
Asperger synd
Rett synd
Childhood disintegrative disorder
Obsessive compulsive disorder**

22-. The most common cause of cong hypothyroidism -----

Thyroid dysgenesis**
Thyroid dysmorphogenesis

23-a girl with otitis media and on amoxicillin for 3 days, now presented with signs of anaphylaxis that occurred after she ate her dinner and then took her medication. The dinner was normal food she is used to, but there was a new chicken sauce she didn't try before, ur Dx:

food allergy**
drug allergy
food poisoning
serum sickness

24- the most common mechanism of DM in pediatrics:

antibody mediated**

insulin resistance
MODY

25- Karyotyping can be used in the diagnosis of:

Down syndrome**

26-in atopic dermatitis, the cell most responsible for the manifestations.....

Mast cell**

T cell

B cell

27- doesn't cause upper airway obstruction :

Epiglottitis

croup

bronchiolitis**

28-All have non-dysjunction except:

Turner

Klienfilter

Fragile-X --**

Downs

poly X syndrome

29- FMFis suggested by all of these EXCEPT:

a-recurrent fever

b-recurrent abd pain

c-recurrent arthritis of SMALL joints**

d-recurrent unilateral chest pain

30-one of these tumors causes opistoclonus :

Neuroblastoma**

Wilm's

31-newborn who is Drooling. Has mild resp distress. on X-ray ABSENT air in GI tract:

Isolated esophageal atresia ***

H type esophageal atresia

Proximal esophageal atresia with distal fistula

32-a case of CF (typical symptoms), how to Dx :

sweet chloride test**

33-a boy with nephrotic syndrome came with abdominal pain all over and guarding etc , ur Dx:

spontaneous bacterial peritonitis**

34-systemic candidiasis is caused by :
immunsuppression**

35-a "katha" month old baby, You examined him after his vaccination, one of the following is a significant finding:

- a-weak systolic murmur
- b-Diastolic murmur ***
- c- heart rate of 150 while crying

36-pt with UTI caused by pseudomonas, what is the safest non-nephrotoxic treatment :
ceftazidime**

- amikacin
- gentamycin
- vancomycin

37-a girl with neuropsychiatric symptoms, keyser-fleischer rings and others, what will support a Dx of wilson's disease:

- decreased Ceruloplasmin**
- decreased urinary copper

38-wrong statement about epeilepsy :
treatment must be started after first seizure**
MRI is sup to CT

39- not a common presentation of celiac disease :

- diarrhea
- abdominal pain
- constipation ??
- bleeding tendency ??
- short stature

40-Not true about hirschsprung's disease :

- anal sphincter relaxed *****
- empty rectum
- abdominal distention
- FTT
- transition zone

41-Development : 12 months child can say mama,dada and how many other words besides that :

- 20
- 15
- 10
- 5
- 2-3 ****

42-mother was 160 cm and father was 177 cm, for a boy, what is the midparental height?

175**

168.5

178.5

43- false about pneumococcus:

with more antibiotics more resistance

antibodies develop to a single type

most common cause of meningitis in newborns **

most common cause of meningitis in skull fracture

vaccine is given to immunocompromised.

44-Wrong about CP :

- Most common cause is birth asphyxia ***

- doesn't progress

- predominantly motor delay

45-All are caused by grey matter lesion except :

- Rigidity **** ' it causes spasticity'

- Seizure

- Change in the level of consciousness

-cognitive delay

Language delay

46-male patient presented with wbc count of 50, 000 , hb was 5, he was pale with bruising.

fever intermittent of 2 weeks duration, achy pain in extremities. most likely diagnosis is :

acute lymphoblastic leukemia**

infectious mononucleosis

parvovirus b19.

aplastic anemia

fanconi anemia

47-all of the followings are indicators of poor prognosis in acute lymphocytic leukemia except:

wbc count of 50000

male gender***
poor response to therapy
less than one year of age
abnormal cytogenetic.

48- in evaluating a hyperchloremic metabolic acidosis , least useful test is:

serum phosphate ??
serum potassium
urine analysis for proteinuria ??
serum glucose ??

49- a child who presented with muscle weakness, constipation, hypokalemia. and nephrocalcinosis and sensorineural deafness, he also had metabolic acidosis. which is the diagnosis:

RTA TYPE 1, RTA TYPE 2, cystinosis, liddle syndrome.

50- present in CRF :

hyperPTH**
hypophosphatemia

51-case of rickets,polyuria, polydypsia, failure to thrive , last week developed chest pain on lying down, ur DX :

CRF***

52-a newborn child who was noted to have shock, shortness of breathm bilateral undescended testes, hyperpigmentation of scrotum, after recussitation (airway and breathing) and adequate fluid management what is the most important next step:

do 17 OH progesterone,** nt sure
give maintenance hydrocortisone,
give stress dose hydrocortisone,
give fludrocortisone,

do karyotype

53-not found in 1ry adrenal insufficiency : hypernatremia**

54- mumps (wrong):

orchitis casue sterility in majority of pts**

aseptic meningitis is frequent complication

55- wrong about diphteria:

vaccine is contraindicated in immunocompromised**

56- wrong about cystic fibrosis:

most patients do not live until age of 50, ??

gastrointestinal symptoms are controlled with drugs with gain of weight,

autosomal recessive inheritance,

most patients have deficiency fat absorption.

still, theres no blood test to make diagnosis ??

57-not chronic diarrhea : rotavirus

58-Case of DKA , most imp initial step in Tx:

IV 20ml/kg NS push****

Kan fe other choices IV insulin

59-not cause of chronic liver disease : HAV

60- wrong about rotavirus:

Rare cause of nosocmial diarrhea** ??

Immunity is not lifelong

Vaccine is C/I in immunocompromised

61-not a cause of prolonged unconjugated hyperbilirubinemia:

Breastfeeding jaundice ??

Breast milk jaundice

hypothyroidism

UTI***

62-in a child with cardiomyopathy, all of the following are expected compensatory mechanisms except:

Polycythemia** ??

Increased heart rate

Increased sympathetic tone

Water retention to increase preload

Increased angiotensin 2

63-a question about an inborn error of metabolism which doesn't cause abnormal odor of body fluids !!!!! can't remember the choices and don't know the answer ☹

64- all of following are causes of chloride resistant alkalosis except:

pyloric stenosis**

bartter synd

liddle

mineralocorticoid excess

65-hypokalemia and normal blood pressure and constipation and high urinary chloride :

gitelman syndrome**

other choices were all associated with high BP

66-Wrong about global developmental delay :

- in around 50% of the cases we can identify a cause
- karyotyping is indicated ONLY when there are dysmorphic features ***
- cognitive delay
- language delay
- impairment of two or more of milestones.

67- at 18-20 months we are expecting the child to do:

- circular stroke
- horizontal line
- vertical line**
- square
- triangle

68-Rubella infection in 2nd month of pregnancy , which is wrong ?

1. Primary infection only causes infection of fetus
2. Less than 10% of fetuses are affected and get the congenital infect**
3. Can be asymptomatic
4. vaccine is C/I in immunocompromised

69-wrong about Measeles infection:

1. Fever disappears then rash appears**
2. Encephalitis has a sequelae in majority.
3. most common cause of death is pneumonia.
- 4, vit A should be given to all pts ??
5. mostly symptomatic

70-Hematology qs about a kid with anemia and splenomegaly, whose father removed his spleen (so Heredi Spehroctoysis) , the kid is plae now and has spherocytes in smear , what to do ??

1. Osmotic Fragility test. **
- 2.hamm test

71-Wrong drug combination:

- 1, cyclophosphamide > hemorehagic cystitis
2. Cyclosporine>hypotension*****
- 3.

72- true about human milk :

Has higher whey:casein ratio than cow milk***

73- a baby who presented with apgar score of 2 at one minute and 6 at 5 mins he was recussitated and already on antibiotics. next day he developed acute kidney injury with elevated urea and creatinine. most likely cause is "

- interstitial nephritis

- acute tubular necrosis***
- glomerulonephritis.

74-all are function of PTH EXCEPT:

- a- mobilize Ca from bone
- b-increase reabsorption of Ca from kidney
- c-increase reabsorb of phosphate **

75- pt has very significant hematochezia, large amounts of fresh blood, last time only blood, he is pale and tachypnic, you suspect meckel's diverticulum. Best test to confirm Dx:

Abdomen X ray

Barium enema

Colonoscopy

Radionuclide scanning***

76- a virus mostly incriminated in development of type 1 D.M :

Rubella *** (according to dr. 3beer al 3assaf)

77- wrong about hemophilia B:

Prolonged PTT

Normal bleeding time

If factor level is less than 1% , likely to get spont bleeding

DDAVP is used in treatment***

78- all can be found in HSP except:

Abdominal pain with or without bleeding

Joint pain

Leukocytoclastic vasculitis

Low C3, C4 ***

79- a child gets cyanosis and up-rolling of eyes and myoclonic jerks when he is angry, crying or frightened, ur Dx:

Gelastic seizure

Generalized seizure

Partial complex seizure

Breath holding spells****

80- leisch-nyhan syndrome is a disorder of:

Uric acid metabolism***

Urea cycle defect

Others wla elhom da5al(there was no choice purine metabolism)

81- a case of diarrhea followed by oligurea, anemia, thrombocytopenia , uremia and schiztocytes, Dx:

HUS*

82- a patient developed seizure, was found to have hyponatremia (Na 115), which is wrong:

In treatment we use hypertonic saline

Correction should be 20 mEq per day***

High urine osmolality points to extrarenal losses

SIADH may be considered as Dx if pt was euvolumic

83- 1 day old child, noted to have abdominal mass, normal BP and normal growth parameters, ur Dx:

Intestinal duplication

Multicystic / dysplastic kidney

Neuroblastoma

Wilm's tumor.

84- regarding poliomyelitis, which is wrong:

Symmetrical paralysis***

Involve large muscle groups

Majority are asymptomatic

Affects ant horn cells only

85- which does not cause wheezing:

Asthma

Bronchiolitis

Lactose intolerance

Cystic fibrosis

86-regarding fetal circulation, which is true :

PDA diverts blood from aorta to pul trunk

Patent foramen ovale diverts blood from rt to lt atrium**

Left ventricle is more functional than the right.

The brain receives the least oxygenated blood.

87- wrong about ADHD:

More in boys

Hyperactivity decreases with age

Not all need medical Tx

More in low socioeconomic

Not evident in preschool period****

88- wrong statement about pertussis :

The vaccine is C/I in children on high dose steroids** (2 questions with the same answer, one about diphtheria and one about pertussis)

89- Not a side effect of aspirin:

Metabolic alkalosis**

90- a case of macroscopic hematuria with dysmorphic RBC's , most imp test:

Kidney U/S

Urine culture ??

Complement levels** ?

Bleeding tendency

91- a case of IDA, what's the wrong statement:

Hemoglobin is the first thing to rise after starting iron therapy**

More in breastfed than in formula fed infants????

92-false about meningitis:

Meningococemia is worse than meningococcal meningitis

Low platelet count is not associated with poor outcome***

93- a 3 months old infant, her mother brought her due to recurrent episodes of spitting up after feeding, everything normal, , well appetite, gaining weight. What's most appropriate step in management:

Reassurance **

Upper GI endoscopy

Barium study

Immediate surgical intervention

94- wrong about wilm's tumor:

No mandelian inheritance ** ??

Presence of calcifications** ??

Ometimes ass. With other cong. Abn. (aniridia, urinary tract abn.)

Hematuria can be a presentation.

95- a 7 years old child, complains of only getting tired when playing with his friends, gaining weight normally and no other abn. , upon exam there is prominent RV impulse, 3/6 midsystolic murmur on left sternal boarder that doesn't radiate, normal S1 and splitting of S2 , normal BP. Ur Dx

PDA

VSD

ASD ** ??

Total anomalous pul venous return

Coarctation of aorta

96- wrong about haemophilus influenza B:

HiB is a common cause of neonatal sepsis/meningitis**

Peds 6th year_2013

1-6 yr old male patient presented with FTT , frequent polydypsia and polyurea ,presented as a case of frequent dehydration without gastroenteritis , some family members have the same condition Dx:

a-DM

b-Diabetes inspidus ***

c-psychogenic polydypsia

d-cystic fibrosis

e-child abuse

2-11 yr old boy was found to have serum sodium of 160 , all of the following can be a cause of this condition except :

a-diabetes inspidus

b-excessive salt intake

c-gastroenritis

d-cystic fibrosis **

e- hypodypsia**

3- all of the following conditions can cause hyperkalemia except :

a-ARF

b-cyclosporine toxicity

c- fanconi **

d-21 hydroxylase deficiency

e- type 4 RTA

4- 2 year old child has persistent hematuria for the last 6 months , his father is on dialysis , most likely cause :

a-thin basement membrane disease

- b- hypercalciuria
- c- alport syndrome ***
- d- membranous nephropathy
- e-IgA

5-5 yr old boy present with renal impairment , his mother reported that he is on cefaclor for his pharyngitis his urine analysis showed eosinophilia , most likely DX:

- A mesangiocapillary GN.
- b- PSGN
- c-IgA nephropathy
- d- UTI
- e- Acute tubulointerstitial nephritis. ***

6- 6 weeks old boy has fever a urine specimen showed Ecoli of 2000 cells on culture ,

The definitive evidence of UTI can be proven if the specimen collected by :

- a- catheter sample
- b- first morning sample
- c- from suprapubic tab. ***
- d- clean cath.
- e- collected through a bag .

7- an 11 yr old boy who presented to the ER with 3 days hx of brown urine , Bp 141/84 , periorbital and leg edema , C3 C4 are both low , DX:

- a-IgA

b-MPGN ***

c-PSGN

d-UTI

e-Urolithiasis

8- a pt with significant Metabolic Acidosis , HCO_3^- 8 , tented T wave , most appropriate next step :

a- Dialysis

b-IV adenosine

c- IV Calcium Gluconate , followed by NaHCO_3 ***

d- Acetazolamide

e- IV 3% NaCl

9- Wrong Combination :

a- DDAVP : hyponatremia

b- valproate : thrombocytopenia

c- carbamazepine : liver Toxicity

d- clonazepam : decrease salivation and bronchial secretions. *

e- diazepam : respiratory depression.

10- all of the following are indication for ASA treatment in pediatrics except :

congenital nephrotic syndrome *

11- VCUG for 9 month old , showed grade 2 VUR , what to tell Dad :

a-80 % of children who have UTI have VUR

b- once VUR is Established no follow up required

c- males have worse prognosis than females.

d- unilateral grade 2 VUR , in most cases resolves within 5 years of Dx. ***

12- 4 year old male , presented with enuresis since the birth of his 2 month old sister , urine analysis results were normal what to do :

- a- refer boy for VCUG
- b- reassure the mother that this is a temporary regression *
- c- renal US
- d- urine culture and sensitivity . *

13- girl with 5-10 RBC/HPF in Urine otherwise normal what to do :

- a- abdominal CT
- b- ANA and complement
- c- BUN Cr *
- d- repeat Urine analysis in 2 weeks . *

14- 4 year female with upper urinary tract infection , what investigation to do :

- a- abdomen CT
- b- cystoscope
- c: IVP
- d- MAG 3
- E - VCUG *

15- boy to ER with vomiting , glasgow coma 12/15 , glucose 560 , K 4.5 , PH 6.9 , all can be done except :

- a- NS push in first hour
- b- IV infusion Insulin
- c- NaHCO₃ *

16- most common cause of congenital hypothyroid :

thyroid dysgenesis

17- 11 yr old female , height < 3 centile , Wt 25 centile , Turner stage 1 , growth velocity 3cm / year :

a- familial short

b- GH deficiency *

c- constitutional

d- skeletal dysplasia

18- neonate and ambiguous genitalia and clitoromegaly with HTN :

a- 11B hydroxylase *

b- salt losing 21a

C- non salt losing 21a

19- CAH with high grade fever and vomiting , dx to have bacterial meningitis all are true about management except :

a- ceftriaxone and vanco

b- Iv hydrocortisone

c- Diuretics (spironolactone) *

20- primary hypoparathyroidism all true except :

a- low calcium

b- low phosphate *

21- true regarding possible causes of central precocious puberty except :

a- neurofibromatosis

b- CNS trauma

c- Infection

d- Hcg secreting tumor *

e- CNS malformations

22- all of the following are associated with Turner :

a- congenital heart disease

b- sensorineuronal hearing loss .

c- normal growth velocity *

23- all of the following is associated with McCune Albright syndrome except :

a- poly osteotic fibrosis dysplasia

b- cafe au lait spot

c- autonomous endocrine hyperfunctioning

d- present in males ***

e - missense mutation in the gene

24 - all of the following are associated with Down syndrome except :

a- AML most common *

b- endocardial cushion defect most common cardiac

b- smaller growth parameters than normal adults of same age.

25- all of the following are associated with Klinefelter syndrome except :

a- short stature *

b- usually in males

c- small testis

26- x-recessive except "

- a- duchene
- b- becker
- c- hemophilia A
- d- color blindness red green
- e- vit D resistant rickets *

27- 5 yr old girl in well-child clinic , 2/6 midsystolic murmur at left sternal border disappear with standing :

- a- reassure*
- b- admit for investigation
- c- cbc TFT KFT
- d- start propranolol
- e- avoid sports as a case of severe AS

28- 2 days pale poor capillary refill , BP can't be measured , HR 280 , ECG narrow QRS :

- a-severe aortic stenosis
- b- SVT *
- C- complete heart block
- D- PDA

29- Fever , migratory Arthritis , Holosystolic murmur radiating to left axilla you suspect rheumatic fever which is true :

- a- ASO and culture are needed for definitive dx. *
- b- carditis is the most common major Criteria
- c- aortic valve most common valve to be affected

30- 4 day baby , cyanotic , normal heart and respiratory rate on exam , O2 sat 78 % , no murmur no added sounds , most likely Dx :

1- TGA *

2- large PDA

3- Truncus arteriosus

31- patent foramen ovale required for survival in ":

a- Tricuspid atresia *

b- coarctation

c- TOF

32- child pallor delayed capillary refill , cool extremities , apical impulse 6th intercostal ant axillary line , finding on CXR :

a- cardiomegaly with increase pulmonary vascular markings . *

b- normal heart size with increase pul vascular markings

c- boot shaped heart.

33- small VSD with fever , hx of fever for 2weeks , fatigue palpable spleen , loss of weight , what to do :

a- admit and obtain 3 cultures from 3 different sites,***

b- discharge on oral AB

c- obtain throat swab for culture

34 - correct about pneumococcal vaccine except :

a- polysaccharide determines virulence

b- current vaccine protect against most common serotypes.

c0 contraindicated in pregnancy *

35 chicken pox correct except :

a- pt is contagious till crusting

b- complications are more in children from 1-11 years *

c- give acyclovir to adult infections.

36- child with myocarditis developed heart failure with pulmonary edema , management :

a- fluid and inotropes and diuretic

b- oxygen inotrope and diuretic *

c- aspirin and inotrope .\

d- fluid o2 and B blocker

37- child with coarctation on CXR , and apical impulse on ant axillary you see :

a- cardiomegaly with notched ribs. *

b- cardiomegaly with decreased pulmonary vascular markings.

38- about OPV vaccine wrong is :

a- polio can be transmitted between cat and man *

b- affects motor neuron only.

39 - wrong about ceftriaxone :

a- poor penentrance into CSF *

b- not effective against pseudmonas

40- about post exposure measures one is wrong :

a- Hepatitis A and hepatitis A vaccine

b- chickenpox and chickenpox vaccine

c- measles and immunoserum serum globulin

d- tetanus and tetanus IG

e- Diphtheria and antidiphtheria anti serum

41-1 yr old child diarrhea , you suspect rota wrong :

a- osmotic diarrhea *

b- dehydration is the major complication

c- rota is not easily transmitted among children

d- vaccine cant be administered after 8 months age

42 - mumps wrong is :

a- transmitted n=by droplets\

b- aseptic meningitis is common

c- orchitis is less common in children

d- vaccine is contraindicated in post pubertal males *

43- rubella wrong :

a-chance of fetal infection is maximum if primary infection occurs in the first 4 months . *

b- triad of cataract , congenital heart disases and something

c- congenital rubella syndrome can be dx by Igm in new born.

d- ttt with anti viral can benefit child *

44- 5 month old with meningitis wrong is :

a- most common cause in this age group is GBS *

b- steroid should be administered in 1st 4 hrs

45- all of the following favor polio over gullian barre except :

a- sensory level *

b- asymmetric paralysis

c- descending paralysis

46- all of following are true about measles except :

a- immunity following diseases is life long.

b- measles vaccine is C/I in patient taking inhaled steroid *

c- vit A administration decrease complications.

47- 10 years boy with 3 cm wound and dirt on edges , last vaccine at age of 1 year :

a- tetanus Ig should be given

b- should receive tetanus vaccine

c- cleaning and antibiotic

d- vaccine should be given with diphtheria

48 -G2p1 infant born 4.4 kg , presented with blood glucose 20 after birth most probable dx is :

a- gestational DM *

b- congenital syphilis

49 : Apgar score for 29 week infant all blue flaccid HR 40 , absent breathing , non responsive to stimulation

a-0

b-1 *\

c-2

50 - 19 week fetus presented with enlarged fetal heart and soft tissue swelling on US , born with severe hydrops with anemia but no hyperbilirubinemia dx :

a- TOF

b- PARVO 19 virus infection *

c- down syndrome

d- RH incompatibility\

51 - 38 week gestational age male has 1 artery and 1 vein in umbilical cord which is correct :

a- he has greater likelihood of congenital anomalies *

b- increase infection risk

c- umbilical vein should have 2 veins and 2 arteries

52- 31 week gestational age born with in 1 hour developed RDS , and died despite intubation on autopsy there is firm airless lung , the cause is :

a- pneumocyte type 2 immaturity *

b- congenital pneumonia \

53- 4 day old premature baby regarding neonatal subtle seizure presented with lip smacking true :

a- management is phenobarbital first line *

b- lip smacking is not a common presentation of subtle seizure.

54- biliary atresia wrong :

a- liver transplant first line

b- changing formula is imp to improve growth

c- diuretics can be used for management *

d- should supplement vitamins

e- hyperbili is conjugated in this disease .

55- 6 yr old male HUS wrong is :

- a- bacteria is the cause
- b- antibiotic is used to treat *
- c- dialysis might be needed in some pt

56- all of the following are causes for lower GI bleed in infancy :

- a- anal fissure
- b- milk protein allergy *\
- c- intussusceptions
- d. polyps

57- all of the following causes constipation in children except :

- a- cystic fibrosis *
- b- lead poisoning
- c- immotile cilia\
- d- hypothyroid

58- direct hyperbilirubinemia except :

- a- choledochal cyst
- b- Gilbert *
- c- hypothyroid

59- soybased formula all true except :

- a- main carbohydrate is sucrose
- b- first line for galactosemia
- c- cross allergy with cow milk protein allergy
- d- should be supplemented with vitamins *

b- foreign body

c- GERD

d- Vascular ring

65- child had symptom of sinusitis he didn't respond to 10 day course of amoxcillin and presented with unilateral foul smelling mucopurulent discharge , Dx :

a- bacterial resistant sinusitis.

b- foreign body *

c- allergic rhinitis

66-10 day child with poor feeding and hypo activity not to be done :

a- Ig levels *

b- blood culture

c- urine culture

d- IV fluid

e- Ampicillin and gentamicin

67- about parents counseling about new born you tell them all except :

a- smoking increase risk of SIDS.

b breast feeding should be on schedule not on demand

c- supplementation with artificial formula is mandatory in the first days after birth *

68- new born girl found to have cyanosis stops when crying :

a- cyanotic heart disease

b- polycystic kidney

c- choanal atresia *

69-you deliver premature baby and you did resuscitation one is wrong about the complication should avoid:

- a- there is risk of dehydration
- b- hypoglycemia is possible
- c- o2 should be kept above 96 to prevent closure of ductus arteriosus *

70- baby was born she had heart rate 40 , and irregular breathing in the first 30 sec after birth what to do next :

- a- o2 by face mask
- b0 chest compression
- c- positive pressure ventilation *
- d- stimulation by rubbing
- e- adrenaline 10 mg

71-wilson with kayser fleicher wrong is :

- 1- low afp (alpha feto protein) is seen *
- b- low hapto globin
- c- low ceruloplasmin
- d- high urine copper

72- child non productive cough , night awakening , worsens with exercise dx:

- a- asthma *
- b- allergic rhinitis
- c- atypical pneumonia

73- 12 yr old girl airway obstruction secondary to laryngeal edema , recurrent facial swelling , (hereditary angiodema) :

- a- C1 esterase inhibitor deficiency *

b- C5 convertase

c- C3 convertase

74- 2 yr old child drank acid (pool cleaner) , PE child lips tongue oropharynx are normal next step :

a- emergent upper gi radiographic series

b- intation of oral antibiotic

c- parental reassurance and discharge *

d- gastric lavage

e- refer for esophageoscopy

75 urine reducing substance + ve :

galactosemia

76 cherry red spots correct :

a- found on retina *

b- optic nerve dysfunction

c- corneal opacity

77- allopurinol ttt for :

lesh nyhan syndrome *

78- child is blind correct abt development :

a- will have language delay

b- social delay *

c- fine motor

79 deaf child expected to have

- a gross motor delay
- b fine motor delay
- c language delay *

80 18 month old toddlers expected to speak "

- a- 10 single words *
- b- 2 word sentence
- c- 30 words

81 infant roll over

5-6 months *

82 all of the following true regarding primitive reflexes :

- a access brain stem and basal ganglia function
- b primitive reflex are usually symmetrical
- c asymmetry of primitive reflexes indicate focal neurological dysfunction
- d all primitive reflexes should disappear by 2 years

83 child 1 year with abnormal recurrent laughter this seizure is mostly :

Gelastic *

myoclonic plateae

jacksonian

84 tuberous sclerosis wrong :

- a- AD inheritance
- b- Ashc leaf lesions
- c- adenoma sebaceum not present at birth

d- rhabdomyoma of the heart are the usual cause of death *

e- seizure

85- macrocephaly definition "

a- HC >97 centile\ *

b- HC >75 centile

c HC >50

d HC > 1SD

e Hc > 3 SD

86 which of the following increase risk of developing epilepsy after febrile convulsion :

a- febrile seizure with fever > 39

b- age of onset < 1 yr

c _ + ve family hx of epilepsy***

87 which of following in 8 year old child is likely to indicate psychological and behavioral problem :

a- encoparesis *

b- motion sickness

c- enuresis

d- migraine

88- hyperactivity and impulsiveness normal IQ but now falling in school (ADHD) :

a- no ttt bec IQ is normal

b- methylphenidate and behavioral therapy *

89 Rheumatic fever all major criteria except :

Ataxia *

90 use of colchicine for FMF true except :

- a- causes diarrhea
- b- irreversible azospermia *
- c- decrease amyloidosis

91 juvenile RA one is correct :

- a- most common type type is poly
- b- first line of ttt is NSAIDs *
- c- ANA + in systemic JRA

92 all cause hypochromic microcytic except :

- a- Iron deficiency anemia
- b- thalesema minor
- c- sideroblastic anemia
- d- chronic renal faliure *
- e- Lead toxicity

93 all of following can cause prolonged PT :

- a- liver disease
- b- oral anti coagulant
- c- hemorrhagic disease of new born
- d- cystic fibrosis
- e hemophilia A***

94 tumor lysis syndreome true except :

- a- hyper uricemia
- b- hyperkalemia
- c- hyper calcemia *
- d- hyperphosphatemia
- e- normal serum PH

95 all of the following can be associated with neuroblastoma:

- a abnormal eye movement
- b- aueur body by histology *
- c- watery diarrhea

96 all of the following increase risk of hematological tumors:

- a- trisomy 21
- b- hereditary spherocytosis *
- c- fanconi syndrome
- d ataxia telangiectasia
- e- Bloom syndrome

97- all of the following are true about G6PD hemolysis :

- a- causes dark urine and light stool
- b- G6PD level may be normal during acute hemolysis
- c- ttt is supportive
- d- Heinz body are characteristic

98- all of the following about chronic renal failure true except :

- a- Acidosis impairs bones mineralization
- b- Over suppression of pth result adynamic bone disease ***

99- not associated with primary adrenal insufficiency

- a- Hypokalemia

100-not used in the acute mangment of nephrotic syndrome

a- ACEI

By:

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1. One of the following is not a side effect of prolonged use of steroids
 - a. **Keratitis**
 - b. Obesity
 - c. increase intracranial pressure ?!
 - d. DM
 - e. osteopenia
2. Associated with Hirschprung's disease:
 - a. Diabetic Ketoacidosis
 - b. **Downs syndrome**
 - c. irritable bowel syndrome
 - d. prune belly syndrome
3. Not associated with seizures:
 - a. **Hypokalemia**
 - b. hyponatremia
 - c. hypernatremia
 - d. hypoglycemia
 - e. hypomagnesemia
4. Most common selective immunodeficiency :
 - a. **IgA deficiency**
 - b. IgG subclass deficiency
 - c. Immune cells deficiency
5. All with dilated pupils except:
 - a. **Opiate**
 - b. Anticholinergics
 - c. Antihistamines
 - d. sympathomimetics
6. All true except:
 - a. **It is recommend that gastric lavage be used routinely**
 - b. no role for emesis
 - c. gastric lavage can be used in intubated patient
 - d. forced diuresis can result in serious complications
7. Chronic functional constipation, which of the following is true:
 - a. laxatives are generally adviced to be used
 - b. associated with fecal incontinence and soiling with absence of residual feces
 - c. Most with chronic constipation has FTT
 - d. **most are managed by changing child's diet**
 - e. most are due to organic cause
8. Associated with tongue fasciulations:
 - a. **Werdnig Hoffman disease**
 - b. gullian barre syndrome
9. SMA, best diagnostic test: **DNA testing** / EEG/ muscle Bx/ nerve conduction studies
10. The following should be used for treatment of DKA, except:
 - a. water
 - b. sodium

- c. Chloride
- d. **Bicarbonate**
- e. Phosphate

Due to risk of cerebral edema

11. Beta-lactam, all true except
 - a. has a wide therapeutic index
 - b. act on cell wall biosynthesis
 - c. **They are bacteriostatic**
 - d. they are excreted mainly by the kidney
 - e. they maybe synergistic when used with aminoglycosides for certain organisms
12. Wrong about meconium aspiration syndrome
 - a. **Since meconium is sterile, it doesn't predispose to infection**
13. Most infants pass meconium through
 - a. **24 hours**
 - b. 48 hours
14. GERD best test
 - a. **24-hour pH**
15. CF inheritance:
 - a. **25%**
 - b. 50%
 - c. 75%
 - d. unpredictable
16. Rheumatic Fever, all true except
 - a. treatment after 8 days from onset of pharyngitis will not prevent the disease
 - b. caused only by group A beta! hemolytic streptocci
17. Rheumatic Fever, not one of the criteria:
 - a. **cervical Lymph node enlargement**
 - b. arthritis in Lt. knee then after one week in the Rt. knee then goes down
 - c. development of mitral regurgitation
 - d. increase ESR
18. Kawasaki disease, not important for diagnosis:
 - a. **Liver function test**
 - b. Tenderness and swelling in hands and feet
 - c. strawberry tongue
 - d. conjunctivitis
19. Wrong match:
 - a. CMV: hepatitis
 - b. Rubella: PDA
 - c. **Toxoplasmosis: periventricular calcifications**
 - d. HSV : vesicles
20. Acute neurological manifestation:
 - a. **Organic acidemias**
 - b. PKU

21. Coarse features with hepatosplenomegaly :
 - a. **Mucopolysaccharidosis**
 - b. PKU
 - c. organic acidemia
 - d. urea cycle defects
22. UTI, which is wrong:
 - a. less than 3 months must receive IV antibiotic
 - b. neonatal boys are more predisposed for UTIs than the females
 - c. **Negative urine analysis rules out UTI in child < 3mo.**
23. holosystolic murmur on the left sternal side+rt ventricular hypertrophy
 - a. VSD case
24. TOF case
25. Loud S2, right ventricular hypertrophy, breathlessness:
 - a. Pulmonary HTN
26. Simple Febrile seizure, all true except
 - a. 10 times increased risk for epilepsy
27. Partial complex seizure:
 - a. Usually associated with changed level of consciousness
28. Cries and cyanosis disappears:
 - a. choanal atresia
29. ABG interpretation (PH=7.32, Co2 = 38, Hco3-= 15, base excess= -10:
 - a. Metabolic acidosis
 - b. Mixed metabolic and respiratory
 - c. respiratory acidosis
 - d. compensated respiratory alkalosis
30. wrong Hepatitis A vaccine : **contraindicated in patient with severe liver disease**, in adults more severe than children, not transmitted by blood transfusions
31. About breast feeding wrong
 - a. **Colostrum shouldn't be fed to baby**
 - b. Vit.D supplement
 - c. iron supplement
 - d. initiated immediately after birth
 - e. given on demand
32. Baby with right upper quadrant mass
 - a. Wilm's tumor
33. Wrong match
 - a. **Neuroblastoma: hematuria***
 - b. posterior fossa tumor - hydrocephalus
 - c. osteosarcoma - pathologic fracture
 - d. retinoblastoma - white pupillary reflex
 - e. wilm's - abdominal mass
34. Diagnostic test for liver mass:
 - a. **Alpha-feto protein**
 - b. B-HCG

- c. CA-19
 - d. CEA
35. Most common platelet disorder
- a. **ITP**
 - b. Alloimmune thrombocytopenia
 - c. UTI
36. Not complication of phototherapy
- a. **Infections**
 - b. skin rash
 - c. dehydration
 - d. bronze baby syndrome
 - e. corneal ulcers
37. True about asthma :
- a. **Increased functional residual capacity**
 - b. decrease total lung capacity
38. All true about empyema except :
- a. **most common cause is HIB**
 - b. managed by drainage and ABs
 - c. high proteins
39. Another question about empyema and staph. Aureus
40. wrong about croup : intubation is rarely used , managed with steroids and nebulizers, most common at Autumn and late winter, **of sudden onset**, occurs in children less than 2 years
- a.
41. Brisk DTR
- a. **Spasticity**
 - b. rigidity
 - c. myotonia
 - d. dystonia
 - e. hypotonia
42. RSV present with all except:OM
- a. **Asthma**
 - b. Apnea
 - c. Bronchiolitis
43. One of the following is abnormal in newborn/ infant? Examination:
- a. **Bifid uvula**
 - b. Blue spots on back
 - c. pulsating umbilical artery
 - d. engorged breasts
44. In neonate resuscitation, which pulse
- a. **Umbilical artery**
 - b. Carotid
 - c. Femoral
 - d. Radial

45. Congenital hypothyroid cause non-specific symptoms in the first 4 weeks, all are from them except :
- Delayed development**
 - prolonged jaundice
 - lethargy
46. SMX-TMP treatment, next day pallor and stuff...
- G6PD
47. Best diagnostic test for scarring:
- DMSA
48. all are Bad prognostic factors for meningitis except :
- G-ve bacteria
 - protein high in CSF**
 - seizure after 7 days of treatment
49. VZV, wrong:
- Milder in adults than children
50. Wrong combination:
- Rubella: starts in trunk
51. Wrong combination (haik el so2al?)
- Measles: vesicular rash
52. Apgar score (HR 120 acrocyanosis rr 50 regular , upper and lower limbs flexed , sneezed)
- 9**
 - 8
 - 10
 - 7
53. wrong about Diphtheria: Whole cell killed vaccine
54. 2 weeks of cola colored urine : PSGN
55. FMF, all true except:
- only in Mediterranean region**
 - its diagnosis is not a diagnosis of exclusion of similar conditions
 - most common symptom is abdominal pain
 - pain continues for 4 days then remits
56. CP not risk factor
- Consanguinity**
 - Pre-eclampsia
 - Triplet pregnancy
 - premature
 - low birth weight
57. Salmonella
- Bacteremia is common
 - carrier state for more than 1 month is uncommon
58. Iron def anemia, wrong:
- TIBC decreased
59. long term special formula given all except:
- Gastroenteritis**

- b. galactosemia
- 60. Fluid maintenance, 12 Kg wt:
 - a. 1100 ml
- 61. all true except:
 - a. **Otitis media in less than 3 years**
 - b. HIB is one of the most common pathogens of OM
 - c. Serous OM causes conductive hearing loss
- 62. Neutropenia, all except
 - a. **Roseola infantum**
 - b. shigellosis
 - c. salmonella
 - d. parvovirus B19
 - e. brucella
- 63. Not in fetus of diabetic mother
 - a. **SGA**
 - b. LGA
 - c. hypocalcemia
 - d. hyponatremia
 - e. increase red cell PCV
- 64. minimal change disease increase risk of all except:
 - a. **Chronic renal failure**
 - b. ARF esp with use of diuretics
 - c. Spontaneous bacterial peritonitis
 - d. infection
 - e. thrombosis
- 65. Not a risk factor for leukemia
 - a. **Bartter syndrome**
 - b. down syndrome
 - c. ataxia telangectasia
- 66. Wrong about rotavirus
 - a. PMN in stool
 - b. Most common complication is dehydration
 - c. **Causes osmotic diarrhea**
 - d. transferred from uncooked ??...
 - e. can be contagious
- 67. Not a nephrotoxic drug
 - a. Ceftriaxone
 - b. cabtopril
 - c. amikacin
 - d. cyclosporin
 - e. vancomycin
- 68. With Down, all true except:
 - a. Microcephaly
 - b. **Hydrocephaly**

- c. short stature
- 69. Wrong about breast milk jaundice (not breast feeding jaundice):
 - a. **Caused by decreased fluid intake**
 - b. high bilirubin levels is not associated with high risk of neurotoxicity
- 70. When we can start baby on fresh cow milk:
 - a. **12 months**
 - b. 24 months
- 71. what is the mechanism of insulin/glucose in ttt of hyperkalemia :
 - a. increase extracellular shift
- 72. Milestones: tracks moving object 180 degrees:
 - a. 2 months
- 73. Milestones: Puts things in his mouth
 - a. 4 months
- 74. Milestones: Rolls from prone to supine
 - a. 6 months
- 75. Milestones:begin Running
 - a. 18 months
- 76. all cause hyponatremia and low urine sodium except :
 - a. **SIADH**
 - b. 3rd space losses
- 77. Risperidone
 - a. **Autism**
 - b. ADHD
- 78. Na , Cl , Bicarb values ,,, w bdhom enno ass with all except ... bs t7sebha bkon high AG
 - a. **RTA**
 - b. lactic acidosis
 - c. organic acidemia
 - d. ethylene glycol
 - e. DKA
- 79. Not used in sexual maturation assessment :
 - a. **Axillary hair in both males and females**
 - b. Penile size in males
 - c. Testicular size in males
 - d. Pubic hair in both males and females
 - e. Breast size in females
- 80. All are true except :
 - a. in children increase both heart rate and stroke volume
 - b. **CO increase when increase afterload**
- 81. Wrong about growth:
 - a. **Height increases 12 cm in first year**
- 82. patient presented with hx of weight loss , large non-tender mass in the neck , CXR shows large anterior mediastinal mass:
 - a. **Hodgkin's**
 - b. All

83. PDA, all true except:

- a. **right atrial dilatation**
- b. left axis deviation
- c. bounding pulse
- d. continuous machinery murmur
- e. blood pressure 100/45

84. Headache, all matches true except:

- a. **unilateral involvement : intracranial hypertension**
- b. migraine → mostly bilateral
- c. tension headache → band like
- d. throbbing pain → migraine
- e. bradycardia → increased intracranial pressure

85. in nephrotic syndrome ? , Least useful test

- a. **calcium creatinine ratio**
- b. serum creatinine
- c. ASO
- d. complement level
- e. ANA

86. child with gastroenteritis, sunken eyes, 7 kg, capillary refill time 4 sec. , your most appropriate next step:

- a. **140 ml push over 30 minutes**
- b. 10% dehydration treatment, infusion for 24 hours
- c. oral re hydration without admission

20ml*7kg (severe dehydration

87. All cause short stature except:

- a. **nutritional obesity**
- b. endocrinopathies
- c. familial short statures
- d. bone dysplasias
- e. chromosomal disorders

88. Cystic fibrosis most clinical sign at birth suggesting CF:

- a. **Meconium ileus**
- b. clubbing

c.

89. what type of immunodeficiency associated with increased risk of fungal infections

- a. **cell-mediated**
- b. complement
- c. antibody

90. Empirical antibiotics in neonates in early sepsis: Ampicillin-gentamicin.

91. asymptomatic bacteriuria, one is true :

1-common with neurogenic bladder

2-antibiotics are indicated

3- associated with pyuria and hematuria

4-mostly caused by pseudomonas Aereginosa

93. all associated with posterior leukodystrophy ... except: pin point pupil.

94. All associated with subtle seizures in neonates except : **caused by hypokalemia**, neurodevelopmental delay

95. wrong about organophosphate poisoning : salivation, **constipation**, ms weakness, wheeze

96. True about cerebral palsy : spastic teraplegia carries the worst prognosis

97.36 hours baby , breast feed , bleeding per rectum : vit.K deficiency

Peds, 6th yr

2012

Pediatric exam

6th year-2012

1. Normal child can draw horizontal line at :
 - a.15 months
 - b.18 months
 - c.24 months**
 - d.30 months
2. Normal child can jump on one leg at age of : 4 years
3. Normal child knows his full name at age of : 30 months
4. Normal child can draw triangle at :5 years
5. Penetrance rate in retinoblastoma is :
 - a. 100%
 - b.90%
 - c.50%
 - d.10%
6. Wrong about PKU:
 - a. it cause progressive mental retardation
 - b. it is lipid storage disease**
 - c. it is autosomal recessive disease
7. All of the following can cause hypokalemia except:
 - a. distal RTA
 - b. cystic fibrosis
 - c. CAH**
8. Not CL responsive metabolic alkalosis:
 - a. Barter syndrome **
 - b. Chloride losing diarrhea
 - c. diuretics

9. All of the following have increase risk of leukemia except :
 - a. fanconi syndrome
 - b. down syndrome
 - c. ataxia telengectasia
 - d. barter syndrome**
 - e.turner syndrome

10. Newborn , HR=110 , pink trunk and blue extremity , flex upper limb only , he sneeze upon nasal suctioning , have irregular respiratory rate , APGAR score is :
 - a. 10
 - b.9
 - c.8
 - d.7**
 - e.6

11. Definition of post-term is :
 - a. <37wks
 - b. 37-40 wks
 - c.40-42 wks
 - d.>42 wks ***

12. When you advice the mother to introduce solid food to her baby diet :
 - a, 4 ms
 - b. 6 ms**
 - c.8 ms
 - d.12ms

13. When the mother can add low fat milk to her baby diet :
 - a. 6 ms
 - b.12 ms**
 - c. 18 ms
 - d. 24 ms

14. Not side effect of valproic acid :
 - a. alopecia
 - b. weight loss**
 - c. drowsinnes

15. One of the following is associated with hyperammonemia:
 - a. urea cycle defects***
 - b. lipid storage disease

16. Risperidone is used in :
 - a. autism
 - b. ADHD
 - c. Tics
 - d. chorea
 - e. athetosis

17. Not a feature of common migraine in children :
 - a. bilateral
 - b. throbbing
 - c. aura**
 - d. relieved by sleep
 - e. photosensitivity

18. Feature of tension headache (one is correct):
 - a. more severe at morning
 - b. treated by sumatriptan
 - c. band like pain around the vertex***

19. Wrongmatch about poisoning :
 - a. paracetamol –hepatotoxicity
 - b. aspirin –met. Alkalosis***
 - c. iron –hematemesis

20. One is not a NTD:
 - a. hydrocephalus **
 - b. anencephalus
 - c. spina bifida
 - d. meningocele

21. Wrong about chicken pox :
 - a. not given >7 years ***
 - b. once the lesions are crusted ,the patient is not infective anymore
 - c. vesicular rash

22. Not in infant of diabetic mother :
 - a. macrosomia
 - b. polycythemia
 - c. oligohydramnios antenatally**

23. Patient with signs and symptoms of acute nephritic syndrome , the best treatment is :
 - a. prednisolone. Furosemide, albumin ***
 - b. prednisolone. Furosemide, ACEI
24. Wrong about infantile spasm :
 - a. occur in infants
 - b. associated with tuberous sclerosis
 - c. treated by vegabatratin
 - d. have good prognosis***
25. Wrong about celiac disease :
 - a. autoimmune mediated
 - b. associated with vit D resistant rickets
 - c. associated with diabetes
 - d. treated by restricted diet , that does not contain wheat and **RICE*******
26. one Cause Acute Neurological Manifestations we think most probably :
 - a. propionic academia**
 - b. all others were chronic problems
27. one is true about CP :
 - a. Choreoathetoid seizures caused by Hyperbilirubinemia**
 - b. the neurological deficit getting worse
 - c. most of them die by the age of 1 year
28. true about DDH:
 - a. multifactorial inheritance**
 - b. treated by cast which does not cause harm to baby
 - c. normal neonatal examination rule out DDH
 - d. all children are diagnosed by X-ray
29. patient treated by TMP/SMX, one day later he come with pallor and jaundice , the most likely cause of the problem is :
 - a. G6PD Deficient **
 - b. acute collangitis
 - c. -auto-immune hemolytic anemia
30. patient presented with hx of weight loss , large tender mass in the neck , CXR shows large anterior mediastinal mass , the most likely diagnosis is :
 - a. HODGKIN lymphoma***
 - b. ALL

- c. EBV infection
- 31. treatment of absence seizure is :
 - a. valproic acid **
 - b. carbamazepine
 - c. clonazepam
- 32. wrong about NEC :
 - a. it is of unknown etiology
 - b. most likely caused by infection ***
 - c.
- 33. wrong about coarctation in 12 year old girl:
 - a. Hypertension
 - b. displacement of apex beat to left ant. axillary line**
 - c. radiofemoral delay
- 34. wrong about VSD :
 - a. wide pulse pressure**
 - b. cause left atrial dilatation
 - c. displaced apical pulse
 - d. cardiomegaly on CXR
- 35. patient with continuous machinery murmur :
 - a. PDA**
 - b. TOF
 - c. VSD
- 36. newborn with lethargy grunting and dyspnea least important test :
 - a. stool culture (the answer)
 - b. csf culture
 - c. CBC
 - d. Urine culture
 - e. CXR
- 37. TEST for phagocytic deficiency :
 - a. NBT **
 - b. flowcytometry
 - c. immunoglobulin level
- 38. Most specific finding in U/A for UTI :
 - a. leukocyte esterase and nitrite**
 - b. PH -leukocyte esterase
 - c. leukocyte esterase and RBC

39. The mechanism of grunting is :
a. expiration against partial closed epiglottis**
b. lower airway obstruction
c. vocal cord dysfunction
d.
40. Patient t with hemophilia A presented with hemarthrosis , you have no factor VIII, give him :
a. cryoprecipitate ***
b. fresh frozen plasma
c. whole blood
d. desmopresin
41. MOST appropriate ttt for HUS :
a. FLUID management ***
b. ABS
c. plasma exchange
d. steroid
42. Patient with vomiting and short stature, Cr 2.7 HB 7 all of the following may be responsible for her renal impairment except :
a. HUS ***
b. DYSPLASTIC KIDNEY
c. non neurogenic neurogenic bladder
d. reflux uropathy
43. wrong about wilms tumor:
a. rarely bilateral ***
b. HTN is common presentation
c. Aniridia and hematuria are common
d. may be associated with genitourinary anomalies
44. wrong in IDA :
a -decrease TIBC **
b-decrease ferritin
c. increase RDW
45. when do we start to use asthma controller therapy in a patient on bronchodilator:
a. when symptoms occur more than 2 times a week***
b. when symptoms occur more than 2 times a day
c. when symptoms occur more than 2 times a night

46. bone age 7years, height age 7.5 ,chronological age 10 wt/ht on 40 centile, what is the cause ?
 - a. familial (genetic) short stature
 - b-constitutional short stature***
 - c-endocrinopathy

47. One is NOT a cause to persistent microscopic hematuria :
 - a. cystitis**
 - b. familial benign hematuria
 - c. IgA nephropathy

48. One of the following is an Autosomal Dominant disorder:
 - a. Myotonic Dystrophy.**
 - b. Duchenne muscular dystrophy.
 - c. becker muscular dystrophy

49. the disorder that is characterized by a Reciprocal social interactions is:
 - a. Autism.**
 - b. ADHD
 - c. rolandic seizure

50. what is wrong about UTI:
 - a. Asymptomatic bacteruria should be treated with 5 days antibiotic regimen.**
 - b. constipation is a risk factor

51. wrong statement:
 - a. bacterial and viral pharyngitis are not easily distinguished by P/E.
 - b. glomerulonephritis does not occur after non. Strp. Pharyngitis

52. Not a cause of Macroscopic hematuria:
 - a. Benign Familial Hematuria.** (cause only microscopic hematuria)
 - b. UTI
 - c. IgA nephropathy (cause both micro and macroscopic hematuria)

53. Wrong about Meningitis:
 - a. Frequently causes papilledema.**
 - b. early seizures is not associated with poor prognosis

54. Not commonly found in Crohn's :
 - a.Fistulas.
 - b. Oral Ulcers.
 - c. GI malignancies.**

d. rickets

55. Wrong about Breast Feeding:

- a. babies of lactating women who have sufficient amounts of Vitamin D don't need any supplementation with the vitamin.**
- b. all breast fed infant should take 400 unit vit d

56. In Diabetic patient, all of the following are parts of counseling except :

- a. signs and symptoms of hypoglycemia
- b. Competitive sports are discouraged.
- c. ID card shows that he has DM

57. 64- a typical case of acute viral Pericarditis (a 12 year old female with fever that was found to have a Pericardial friction rub), the ebst next step is:

- a. CBC and ESR.
- b. EKG and CXR**.
- c. Give ASA.

58. About sweat chloride test , one is true :

- a. False negative sweat chloride test can be found in patients with Hypoalbuminemia.**
- b. it is of the same yield in both newborn and children
- c. you should confirm –ve test by genetic analysis

59. One is tru regarding collection of urine sample :

- a. Catheterizatin or suprapubic catheterization should be done for neonates and infants suspected to have UTI.
- b. collection bag can be used in boys but not girls in infancy

60. Cystic Fibrosis, what is wrong?!

- a-causes Immunosuppression.**
- b. can cause liver diseases
- c. can cause distal intestinal obstruction

61. All caused by congenital Hypothyroidism except

- a.Early closure of anterior fontanel**
- b. distended abdomen
- c. large protruding tounge

62. all those affect your decision in patient of jaundice before Plasma exchange except

- a. Whether he is on formula of breast milk**
- b. the level of indirect bilirubin

63. all are causes of neonatal jaundice except :
 a. increase PCV
 b. decrease enterohepatic circulation **
 c. short RBC life span
64. All are found in SIADH except :
 a. can cause hyponatremia
 b. Cause Low Urine Osmolality**
65. Case of infant with Aspiration and regurgitation of food, best diagnostic method :
 a. barium swallow
 b. Chest Xray after insertion of NG tube...**
66. 2 years with difficulty after feeding and vomiting and FTT (GERD) best Diagnostic method :
 a. 24 hour PH monitoring**
 b. barium swallow
 c. endoscopy
67. Contraindication of gastric lavage:
 a. salsalate poisoning
 b. Kerosene ingestion **
 c. باقي الخيارات كانت أسماء أدوية
note : this question comes frequently in pediatrics exams , so know well the indication and contraindication of GL!!
68. The best method to monitor adequacy of breastfeeding is :
 a. urine output
 b. amount of calories
 c. Weight Gaining**.
69. least useful Diagnostic test in SMA :
 a. DNA testing
 b. EMG
 c. nerve conduction study
 d. muscle biopsy ***
70. About breast feeding, one is correct :
 a. immediate feeding after birth is safe***
 b. baby cry always indicate that he is hungry
 c. the breast feeding should follow strict schedule.
71. About chronic diarrhea , one is wrong :
 a. giardia lablia associated with chronic diarrhea
 b. Acidic stool indicate protein malabsorption**
 c

72. All ass with DKA except:
- a. Abdominal Distention**
 - b. vomiting
 - c.
73. Birth weight 3.2 Kg what is the weight at 1 year?
- a. 8 kg
 - b. 10 kg**
 - c. 12 kg
74. Wrong About Mumps
- a. Orchitis causes infertility**
 - b. most common complication is aseptic meningitis
75. [wrong match :
- a. VSD with right ventricular hypertrophy
 - b. ASD with gallop rhythm **
 - c. TGA with narrow mediastinum
76. Wrong about Breast Milk :
- a. Na load more in breast milk than formula**
 - b. associated with lower rate of obesity
77. 81. Not associated with kidney stones :
- a. recurrent UTI
 - b. Nephrotic syndrome**
78. wrong about jaundice :
- a. assessing hyperbilirubinemia by eyes is reliable!
 - b.
79. Correct Pyridostigmine ... ttt Myasthenia Gravis
80. True : Tetanus placental transfer
81. IgA nephropathy, after 2-3 days of URTI
82. [Wrong about Menarche: earlier in thin athletic females than in obese females
83. not true about varicella - transplacental infection causes hydrocephalus (aljawab)

84. the least useful TRT for ITP:
a. Platelet transfusion.

85. [HIB vaccine made from protein (wrong) its polysaccharides

86. Wrong about polysaccharides vaccines they are effective in newborns

87. All concerning salmonella infection true except
a. symptoms happen in less than 6 hours

Wrong about measles infection Milder in those less than two years...

88. Case having all the symptoms of Kawasaki < what is the diagnosis ??

89. Wrong about Hemophilus Influenza B:
a. Can be treated with Rifampin. **(Note: Rifampin can be used for prophylaxis but not for treatment of Hib!..)
b. meningococemia with meningitis is poorer than

90. wrong about Shigella...
A. Human to human transmission is rare

91. Wrong Statement Apnea is a sign of MILD RDS

92. Wrong about tetanus: it is recommended to isolate patients with Tetanus.

93. Baby born and after 24 hour became cyanosed and his lung are clear cause ... Tricuspid Atresia
ass. With left atrium enlargement

94. wrong about HUS -TREAT with ABS