

## قائمة الاسئلة

## طب الاطفال - الطب البشري-المستوى الخامس-60

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- 1) Which one is not true about Malaria In Yemen?
  - 1) Most reported cases are caused by P. falciparum
  - 2) Al Hudaydah, and Hajjah are the two governorates with the highest risk of malaria transmission
  - Clinically is an acute illness characterized by paroxysms of fever, chills, sweats, fatigue, anemia, and splenomegaly
  - 4) The diagnostic test is Giemsa-stained smears of peripheral blood
  - 5) + Chloroquine is the treatment of choice of Severe Malaria in Yemen
- 2) What is the best answer about Leishmaniasis in Yemen?
  - 1) Caused mainly by L. tropica and L. major(donovani).
  - 2) The prevalence of leishmaniasis was higher among children than adults.
  - 3) Characterized by high grade fever and hepatosplenomegaly.
  - 4) Transmitted through Sandfly bite.
  - 5) + All are true.
- 3) The recommended treatment for active pulmonary tuberculosis in children is:
  - 1) Isoniazid for 9 months
  - 2) + Isoniazid and rifampin for 6 months, with pyrazinamide and ethambutol added during the first 2 months
  - 3) Isoniazid and rifampin for 6 months.
  - 4) Isoniazid, rifampin, and pyrazinamide for 6-9 months
  - 5) Isoniazid and ethambutol for 6 months
- 4) A 8-year-old girl appears in the ER with an injury. She has a pucture wound with a dirty nail in her left foot. She received pentavalent vaccination at 1.5months, 2.5months, 3.5months, and 18months of age. The next step in vaccination is:
  - 1) No vaccination
  - 2) Give anti-tetanus immunoglobulin
  - 3) Give vaccine and immunoglobulin
  - 4) + Give TdaP
  - 5) Give DTP
- 5) The preferred diagnostic test in patients with in early course of enteric fever is:
  - 1) + Blood culture
  - 2) Stool culture
  - 3) Urine culture
  - 4) CSF culture
  - 5) Bone marrow culture
- 6) A 2-year-old infant presents with sever paroxysmal attacks of coughing sometimes followed by vomiting. Preceded by rhinorrhea and mild fever and the child is not vaccinated. Which of the following is the most appropriate antibiotic?
  - 1) Amoxicillin
  - 2) + Erythromycin
  - 3) Ceftriaxone
  - 4) Gentamicin
  - 5) Streptomycin
- 7) The Characters of paralysis in patient with Paralytic poliomyelitis is:
  - 1) Humans and domestic animals are the natural reservoir for poliovirus.
  - 2) Paralytic poliomyelitis occur in about 50% of infected childern

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- 3) + Asymmetrical flaccid paralysis or paresis with hyporeflexia
- 4) Sensation is affected
- 5) Weakness usually resolved after 5 years.
- 8) Which one is not true matching about the Drugs of choice for parasitic infection?
  - 1) + Taenia solium and Metronidazole
  - 2) Hymenolepis nana and Praziquantel
  - 3) Giardiasis and Metronidazole
  - 4) Schistosomiasis and Praziquantel
  - 5) Enterobius vermicularis (pinworm) and Albendazole
- 9) Which of the following is a common viral infection in children that can cause a characteristic "slapped cheek" rash?
  - 1) Measles
  - 2) + Erythema infectiosum
  - 3) Scarlet fever
  - 4) Chickenpox
  - 5) Rubella
- 10) Which of the following is a classic symptom of chickenpox?
  - 1) Koplik spots
  - 2) Periocular pallor
  - 3) + Pleiomorphic skin rash
  - 4) Honey-colored crusts
  - 5) maculopapular skin rash
- 11) All of the following statements regarding growth in the first month of life are true EXCEPT:
  - 1) Weight may decrease by 10% in the first week
  - 2) Normal birth weight range 2.5-3.5 kg
  - 3) Preterm infants take longer to regain birthweight
  - 4) The infant should gain about 750 gram/month
  - 5) + Thyroxin is the dominant factor that affect the growth in the first year of life
- The probable age of a developmentally normal child who is just able to sit without support, can transfer objects from hand to hand, and speaks in a monosyllabic babble is:
  - 1) 4 months
  - 2) + 6 months
  - 3) 8 months
  - 4) 10 months
  - 5) 12 months
- 13) Anterior fontanel closure normally at age of :
  - 1) At Birth
  - 2) 6 months
  - 3) + 18 months
  - 4) 24 months
  - 5) 36 months
- 14) The average height at age of 5 years is:
  - 1) 90 cm
  - 2) 95 cm
  - 3) 100 cm
  - 4) + 105 cm
  - 5) 110 cm
- 15) All of the following are red flag in development, except:
  - 1) No Head control at 4 months of age

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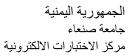
- 2) No Transfer object from one hand to another at 9 months of age
- 3) No Interactive play by age of 3.5 years of age
- 4) No social smile by 3 months of age
- 5) + No independent walk by 14 months of age
- According to the IMCI guidelines: The following signs should you LOOK and FEEL for in an 8-month-old child with diarrhea to classify his/her dehydration status EXCEPT?
  - 1) Lethargic or unconscious
  - 2) Skin turgor (skin pinch)
  - 3) Unable to drink
  - 4) Restless, irritable
  - 5) + Frequency more than 3 watery stools
- Preventive care is the cornerstone of pediatric health. Which of the following level of prevention is aimed at the prevention of emergence or development of disease's risk factors?
  - 1) + Primordial prevention
  - 2) Primary prevention
  - 3) Secondary prevention
  - 4) Tertiary prevention
  - 5) Quaternary prevention
- 18) Which of the following is not Live attenuated vaccine?
  - 1) Measles vaccine
  - 2) + Hepatitis B vaccine
  - 3) Rubella vaccine
  - 4) BCG vaccine
  - 5) Polio virus (Sabin) vaccine
- 19) The concept of Autonomy in pediatric ethics is:
  - 1) + The right and ability to govern oneself and make decisions independently and free from coercion
  - 2) The act of doing good
  - 3) An obligation not to inflict harm intentionally
  - 4) The fair distribution of resource, risk, cost and to act fairly and evenly
  - 5) Information about a patient should not be shared without consent.
- 20) Which of the following is an example of emotional/psychological abuse?
  - 1) + Excessive discipline.
  - 2) Inflicting pain.
  - 3) Forceful shaking of the child.
  - 4) Exposing the child to pornographic materials.
  - 5) Ignoring and isolating the child.
- 21) The largest caloric need in relative to body weight is at:
  - 1) + Newborn
  - 2) Infant
  - 3) Toddler
  - 4) Adolescent
  - 5) Adult
- 22) The best growth indicator for acute malnutrition in children less than 5 years of age is:
  - 1) Body mass index (BMI) for age
  - 2) Weight for age
  - 3) + Weight for height
  - 4) Length for age
  - 5) Head circumference for age
- 23) A child appears with diarrhea, dermatitis, and dementia. The most likely diagnosis is:

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- 1) + Niacin deficiency
- 2) Vitamin B12 deficiency
- 3) Vitamin B1 deficiency
- 4) Vitamin A deficiency
- 5) Folic acid deficiency
- All of the following diseases are decreased when infants receive exclusively breast milk for at least first 4 months of life except:
  - 1) Diarrhea
  - 2) Bacteremia
  - 3) Pneumonia
  - 4) + Neonatal Jaundice
  - 5) Otitis media
- 25) Extensively hydrolyzed formula is used in case of:
  - 1) + Cow's milk protein allergy
  - 2) Infantile colic
  - 3) Gastro-esophageal reflux disease
  - 4) Galactosemia
  - 5) Constipation
- 26) Complementary feeding:
  - Should start when complete 17 weeks
  - 2) + Delayed weaning is associated with iron deficiency anemia
  - 3) Honey can be added to food at age of 9months
  - 4) Salt and sugar can be added to infant food to make it more palatable
  - 5) Fresh animal milk can be given after 6th month of age
- 27) In welcome classification of malnutrition, all are true except:
  - 1) Weight for age 75% of the expected without edema is called underweight
  - 2) + Weight for age 70% of the expected without edema is called marasmus
  - 3) Weight for age 70% of the expected with edema is called kwashiorkor
  - 4) Weight for age 55% of the expected with edema is called marasmus- kwashiorkor
  - 5) Weight for age 65% of the expected with edema is called kwashiorkor
- 28) Physical features of vitamin D deficient rickets include all of the following EXCEPT
  - 1) + Bitot spots
  - 2) Craniotabes
  - 3) Enlargement of the costochondral junctions
  - 4) Thickening of the ankles and wrists
  - 5) Large anterior fontanel
- 29) Which of the following is not true about Autosomal recessive disorders?
  - 1) Equal sex ratio
  - 2) Recurrence risk in sibling of 25%
  - 3) Increased incidence in consanguinity
  - 4) + Symptomatic phenotype in one parent
  - 5) Examples are: cystic fibrosis and sickle cell disease.
- 30) All are Indications for Genetic Counseling except:
  - 1) Advanced Maternal age ≥45 years
  - 2) + Advanced Paternal age ≥40 years
  - 3) Repeated pregnancy loss or infertility
  - 4) Consanguinity
  - 5) Congenital abnormality or Dysmorphology or Intellectual disability
- 31) All of the following conditions are due to a Multifactorial inheritance except:

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- 1) Neural tube defects
- 2) Bronchial asthma
- 3) Cleft lip
- 4) + Fragil X syndrome
- 5) Cardiac septal defects
- When a mother is balanced 21/21 translocation carrier, the risk of recurrence of Down syndrome in children is:
  - 1) 10%
  - 2) 25%
  - 3) 50%
  - 4) 66%
  - 5) + 100%
- 33) The following is an example of chromosomal deletion:
  - 1) Turner syndrome
  - 2) Achondroplasia
  - 3) + Cri du chat syndrome
  - 4) Charcot Marie tooth syndrome
  - 5) Marfan syndrome
- 34) Regarding Klinefelter syndrome, all are true except:
  - 1) All affected are males
  - 2) + Presentation is usually at first year of life
  - 3) Tall stature
  - 4) Intellectual disability
  - 5) The testes are small and atrophied
- 35) All of the following are true about Neonatal respiratory distress syndrome except:
  - 1) Is the most common cause of respiratory failure in the first days after birth.
  - 2) + Occurs only in premature infants
  - 3) Is more common in white infants than in black infants.
  - 4) The characteristic clinical features are expiratory grunting, tachypnea, retractions and central evanosis.
  - 5) Surfactant paly an important role in its treatment
- 36) Most frequent cause of neonatal seizure in full term infants:
  - 1) Hypoglycemia
  - 2) Hypocalcemia
  - 3) + Perinatal asphyxia
  - 4) Birth trauma
  - 5) Epilepsy
- A full-term male newborn was admitted to neonatal intensive care unit. Head CT scan revealed diffuse calcifications in the brain. Most likely diagnosis:
  - 1) Cytomegalovirus
  - 2) Congenital rubella
  - 3) Craniopharyngioma
  - 4) + Congenital Toxoplasmosis
  - 5) Congenital Herpes
- A full-term 12-hour-old newborn did not pass meconium. Mother is worried. Most of the normal full-term newborns pass meconium within:
  - 1) 6 hours
  - 2) 12 hours
  - 3) + 48 hours

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- 4) 60 hours
- 5) 72 hours
- 39) The most common risk factors of necrotizing enterocolitis include:
  - 1) + Prematurity, early feeding, and intestinal ischemia
  - 2) Postmaturity, formula feedings, and pathogenic organisms
  - 3) Postmaturity, oral feedings, and intestinal ischemia
  - 4) Full term, parenteral feeding, and intestinal ischemia
  - 5) Intestinal ischemia, parenteral feedings, and pathogenic organisms
- 40) The clinical feature of Caput succedaneum is:
  - 1) Sub-periosteal blood collection seen few hours after birth
  - 2) + Diffuse scalp swelling
  - 3) Possible associations with Anemia and jaundice
  - 4) May be associated with seizures
  - 5) The treatment are Antibiotics, Incision and drainage for infection
- 41) All of the following are true about neonatal sepsis except:
  - 1) Early neonatal sepsis occur within first week of life
  - 2) + The most common cause of late type is group B streptococcus
  - 3) Risk factors for neonatal sepsis include Prematurity, Premature rupture of membranes and Maternal bacteruria
  - 4) The preferred initial therapy is Ampicillin and gentamicin
  - 5) Cultures of Blood, CSF, urine are recommended to Detect causative organism
- 42) A 2 months old male infant appears with chronic kernicterus. All of the following clinical manifestations are present except:
  - 1) + Hypotonia
  - 2) deafness
  - 3) Poor suck
  - 4) Seizures
  - 5) Squints
- 43) A routine physical examination of a newborn infant reveals heart rate 150 beats/minute during crying. The newborn is asymptomatic. The next step in management is:
  - 1) ECG
  - 2) Cardiology consultation
  - 3) Chest x-ray
  - 4) Sepsis work up
  - 5) + Reassurance
- 44) One of the following is essential characteristic of perinatal asphyxia
  - 1) Profound metabolic or mixed alkalosis.
  - 2) + Persistence of low Appar score for > 10 min.
  - 3) Pulse rate less than 100 beat/min.
  - 4) Poor feeding
  - 5) □Prematurity
- 45) Which of the following statement suggests an immunodeficient child?
  - 1) Five upper respiratory tract infections in the past 1 year.
  - 2) Oral thrush at first month of age.
  - 3) + Three episodes of pneumonia in past 1 year.
  - 4) One attack of meningitis in last 6 months.
  - 5) Local reaction from BCG vaccine
- 46) All of the following are clinical manifestations in patients with T-cell deficiency except:
  - 1) Otitis media

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- 2) Rhinitis
- 3) Mucocutaneous candidiasis
- 4) Pneumonia
- 5) + Chronic constipation
- 47) All of the following clinical features are characteristics of Systemic lupus erytheromatus except:
  - 1) + Erosive arthritis
  - 2) Malar rash
  - 3) Photosensitivity
  - 4) Oral ulcers
  - 5) Serositis
- 48) The preferred screening test for patients with complement defects is:
  - 1) C3
  - 2) C4
  - 3) C1
  - 4) C2
  - 5) + CH50
- 49) Of the following options, the best initial test for a workup for immunodeficiency is:
  - 1) Serum levels of IgG, IgM, IgA, IgE
  - 2) + A complete blood count with differential count
  - 3) Peripheral T-cell phenotyping
  - 4) Erythrocyte sedimentation rate
  - 5) Postimmunization immunoglobulin levels
- 50) All are Criteria for the Classification of Juvenile idiopathic Arthritis except:
  - 1) + Age at onset less than 10 years
  - 2) Arthritis in one or more joints
  - 3) Duration of disease more or equal to 6 weeks
  - 4) Type defined by type of articular involvement in the first 6 months after onset
  - 5) Diagnosed by exclusion
- A 5-year-old girl went to a clinic for routine check up. CBC test results reveal hemoglobin (12.0), MCV (55), RDW (13) and reticulocyte count (2.5%). Most likely diagnosis:
  - 1) Iron deficiency anemia
  - 2) Folic acid deficiency
  - 3) Thalassemia major
  - 4) + Thalassemia minor
  - 5) Normal
- 52) A 2-year-old child presents with epistaxis and skin rash for 2 days these preceded by URTI one week ago but is otherwise well and on physical findings has only petechial rashes. Platelet count is 15,000/μL; hemoglobin and WBC count are normal. The most likely diagnosis is:
  - 1) Systemic lupus erythematosus (SLE)
  - 2) Henoch-Schonlein purpura
  - 3) Disseminated intravascular coagulopathy (DIC)
  - 4) Acute lymphoblastic leukemia
  - 5) + Immune thrombocytopenic purpura (ITP)
- 53) The Correct Answer for Diagnosis of Iron Deficiency Anemia is:
  - 1) High MCV, MCH and RDW is less (11%)
  - 2) Decreased Serum iron and Increased Serum ferritin
  - 3) Decreased TIBC
  - 4) The reticulocyte count is usually high
  - 5) + Hemoglobin response to an adequate therapeutic trial of oral iron.

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- A 7 years-old-boy from Hajja presented with history of recurrent pain involving his arms and legs since he was one year old. He had history of blood transfusion fives times. He looks pale w mild hepatomegaly but Spleen isn't palpable. All of the following about the diagnosis are true except:
  - 1) Is transmitted as an autosomal recessive
  - 2) Functional asplenia by around 5 years of age
  - 3) The cardinal clinical feature is hands feet pain(Dactylitis)
  - 4) Avoidance of exposure to extreme cold, stress, hypoxia, and dehydration are the most important factors for Prevent Crises
  - 5) + The best diagnostic test is bone marrow aspiration
- 55) The following Laboratory Features are used for diagnosis of different types of Hemolytic Anemia except:
  - 1) Reticulocytosis
  - 2) + Direct hyperbilirubinemia
  - 3) Enzyme assay if G6PD deficiency is suspected
  - 4) Osmotic fragility if an erythrocyte membrane defect is suspected
  - 5) Electrophoresis if hemoglobinopathies is suspected
- 56) Which is true about Hemophilia?
  - 1) Hemophilia is X linked dominant
  - 2) Factor VII defeciency
  - 3) + The hallmark of hemophilic bleeding is hemarthrosis
  - 4) PT and PTT are prolonged
  - 5) The main therapy in hemophilia is platelet transfusion
- 57) All of the following are the favorable Prognostic Factors for Acute Lymphoblastic Leukemia except:
  - 1) Children who are between 1 and 10 years
  - 2) + Children who have an initial leukocyte count of >50,000/μL
  - 3) Immunophenotype B-cell type ALL
  - 4) Cytogenetic features are Hyperdiploidy Philadelphia chromosome negative
  - 5) Rapid response to induction chemotherapy.
- 58) All of the following about The Peripheral Blood Film are True Except:
  - 1) Blasts cells are seen in Leukemia
  - 2) Target cells, are seen in hemoglobinopathies
  - 3) Heinz bodies in G6PD deficiency
  - 4) + Hypersegmented neutrophils suggest thalassemia
  - 5) Spherocyte in autoimmune hemolytic anemia
- 59) In Hb F:
  - 1) 2a 2B poly peptide chain
  - 2) Most common hemoglobin at age of 2 years
  - 3) Decrease in thalassemia
  - 4) Low affinity to O2
  - 5) + Increase its production by Hydroxyurea
- 60) The most common childhood malignancy is:
  - 1) Acute myelogenous leukemia
  - 2) + Acute lymphoblastic leukemia
  - 3) Neuroblastoma
  - 4) Brain tumors
  - 5) Nephroblastema

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