

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
MAY , 1990

Date :- 15th May 1990

Time :- 9.00a.m. - 12.00 noon

STRUCTURED ESSAY PAPER

Answer a11 questions.

Each part to be answered in a separate book.

PART A

1.
 - a. Enumerate the clinical features of Dengue Haemorrhagic fever including the Dengue shock syndrome. (40 marks)
 - b. What are the laboratory investigations you would request to make an immediate diagnosis and explain their purpose. (30 marks)
 - c. Outline the, treatment of a patient with severe shock due to Dengue virus. (30 marks)

2.
 - a. What are causes of short stature ? (40 marks)
 - b. Discuss the investigation of a child who presents with short stature. (60 marks)

PART B

1. In Measles.
 - a. Comment on the customs and beliefs (prevalent among some people) that are known to be detrimental to the course of the disease. (30 marks)
 - b. List the clinical complications. (40 marks)
 - c. What reactions may occur after the vaccination. (30 marks)

2. Write short notes on,
- a. Febrile convulsions (40 marks)
 - b. Masturbation. (30 marks)
 - d. Delayed walking (30 marks)

PART C

- 1.
- a. List the main strategies you would adopt so as to improve the survival of children particularly in Sri Lanka. (20 marks)
 - b. Describe briefly how each of these will help you to achieve that objective. (80 marks)
- 2.
- a. What is the pathogenesis of cows milk protein allergy. (30 marks)
 - b. Describe the clinical manifestations of this condition. (40 marks)
 - c. Briefly describe its prevention and treatment. (30 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
JUNE , 1991

Date :- 18th June, 1991

Time:- 9.00 a.m. - 12.00 noon

STRUCTURED ESSAY PAPER

Answer all Questions.

Each question to be answered in a separate book.

1.
 - a. Who is a family health worker ? Briefly describe her training. (20 marks)
 - b. List her duties towards child health care. (50 marks)
 - c. What recommendations in her duties would you make to achieve better child health care ? (30 marks)

2.
 - a. Discuss the classification of milk formulae (milk powder preparation) available in Sri Lanka. (30 marks)
 - b. Give examples of brands of milk available under each of the categories. (20 marks)
 - c. Briefly describe the composition of therapeutic milk preparations available in Sri Lanka, the indications for their use and give examples of inappropriate use in paediatric practice. (50 marks)

3.
 - a. Describe the Apgar scoring system and discuss its value in predicting prognosis (30 marks)
 - b. Describe step by step the immediate management of a newborn. Baby born at term, weighing 2.8 kg who at birth is floppy, cyanosed, with a heart rate of 40 per minute, with minimal response to nasal suction and an irregular gasping respiration (70 marks)

- 4.
- a. Define the term 'perinatal mortality rate. (10 marks)
 - b. What are the main causes of perinatal mortality in Sri Lanka. (30 marks)
 - c. State the measures that can be taken to reduce the perinatal mortality in this country. (60 marks)
- 5.
- a. What is the composition of the W.H.O. recommended oral dehydration solution (Jeevani) used in Sri Lanka ?
Critically evaluate the other oral dehydration preparations commercially available in Sri Lanka. (30 marks)
 - b. What is the scientific basis for the use of O.R.S. in acute diarrhoea in children? (40 marks)
 - c. What are the problems encountered with the use of O.R.S. in early infancy and how are they overcome ? (30 marks)
- 6.
- a. List the important causes of chronic cough in early childhood (30 marks)
 - b. What are the social and environmental factors that contribute to these conditions ? (30 marks)
 - c. Discuss The management of a 3 year old child with cough present for 9 months . (40 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
AUGUST , 1992

Date:- 3rd August, 1992

Time :- 2.00 p.m. - 5.00 p.m.

STRUCTURED ESSAY PAPER

Answer all Questions.

Answer each question in a separate book.

1.
 - (a) What are the different forms of child abuse seen among Sri Lankan children.? 50%
 - (b) Describe in detail the clinical features that may be seen in a child with non –accidental injuries 50%

2. A four year old boy presents with a history of passing reddish brown urine.
 - (a) List the possible causes for this complaint 30%
 - (b) What features in the history would be useful in arriving at a specific diagnosis ?. 35%
 - (c) Critically evaluate the investigations that would be useful in arriving at a diagnosis. 35%

3. Describe briefly,
 - (a) Clinical problems associated with the infant of a diabetic mother. 30%
 - (b) Useful investigations for suspected case of neonatal sepsis. 30%
 - (d) The plan of management of a term infant boy who develops unconjugated bilirubinaemia of 255umol/L (15mg/dl) on the third day. 40%

- 4.
- (a) What is the schedule for vaccination in the extended programme of immunization (E. P. 1) in Sri Lanka? 20%.
 - (b) Enumerate the complications and the contraindications in the use of the above vaccine. 30%
 - (c) Critically evaluate the use of Measles-Mumps-Rubella vaccine in Sri Lanka. 50%
- 5
- (a) Discuss the importance of carrying out a routine examination of the newborns 40%
 - (b) Discuss the life threatening congenital malformations of the gastro-intestinal tract in a newborn 40%
 - (c) Outline the management of one such malformation. 20%
- 6.
- (a) List the causes of stridor in a pre-school child. 20%
 - (b) Indicate how you would differentiate clinically the causes you have mentioned. 50%
 - (c) Outline the treatment of one of the conditions you have mentioned. 30%

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
AUGUST , 1993

Date :- 2nd August, 1993

Time :- 2.00 p.m. - 5.00 p.m.

STRUCTURED ESSAY PAPER

Answer all questions.

Answer each question in a separate book.

1. (a) Mention four (4) examples of neurocutaneous syndromes that are seen in children (20%)
(b) Describe the clinical features of each of the syndromes mentioned above. (80%)

2. (a) Discuss the significance of a positive Mantoux reaction,
 - i) at four (4) years of age (20%)
 - ii) at fourteen (14) years of age (20%)(b) How would you manage a newborn infant of a woman who has positive sputum for Tubercle bacilli (60%)

3. Write notes on :-
 - (a) Cephalhaematoma (20%)
 - (b) Erb's palsy (20%)
 - (c) Neonatal conjunctivitis (30%)
 - (d) Bilirubin encephalopathy (30%)

4. A caesarian section was done at 32 weeks for fetal distress on a 30 year old primigravida with pre-eclamptic toxæmia. The baby was asphyxiated with an Apgar score of two (02) at one minute. The birth weight was 1.2 Kg. At 72 hours the baby was lethargic and jaundiced. On day four (04) it had blood stained stools, the abdomen was distended and silent on auscultation.
- (a) Mention briefly how you would resuscitate this baby at birth (30%)
 - (b) What is the most likely cause for his condition on day four (04) (10%)
 - (c) What are the predisposing factors for his condition on day four (04)(20%)
 - (d) What investigations would you request to arrive at a diagnosis (15%)
 - (e) Mention briefly the management of the baby on day four (04) (25%)
- 5.
- (a) What are the factors that regulate somatic growth in children ? (40%)
 - (b) Describe very briefly the causes of disturbances in height velocity in children (60%)
- 6.
- (a) Critically evaluate the laboratory tests used specifically to diagnose Typhoid fever (30%)
 - (b) Describe the clinical features of two serious abdominal complications of Typhoid fever (40%)
 - (c) Describe the choice and duration of chemotherapy in Typhoid fever (30%)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
SEPTEMBER , 1994

Date :- 20th September 1994

Time :- 2.00pm - 5.00pm

STRUCTURED ESSAY PAPER

Answer all six questions

Answer each question in a separate book

1. A 3.5kg female infant was born after 41 weeks of gestation by breech extraction. At one minute she was gasping, had a heart rate of 80/minute, was completely blue, limp and unresponsive. At the age of 30 hours she developed generalized seizures.
- (a) Discuss the hazards of breech delivery to the neonate. 20%
- (b) What was her 1-minute Apgar score ?
Discuss limitations of the Apgar scoring system. 20%
- (c) What are the likely causes of seizures in this neonate ?
What investigations would you request at this stage ? 30%
- (d) Enumerate non-cerebral systemic manifestations of severe birth asphyxia. 30%
- 100%
2. A 38 year old primigravida was admitted at 36 weeks gestation with polyhydramnios. A 2.4kg non-asphyxiated baby was delivered by caesarian section. At birth a routine gastric aspiration was done and 40 mls of fluid was aspirated.
- (a) What is the most likely diagnosis ? 10%
- (b) What other major abnormalities would you look for in this baby ? 20%
- (c) Mention one investigation you would request to confirm the diagnosis and briefly describe the abnormalities you are likely to find. 15%

- | | | |
|-----|---|-------|
| (d) | Describe the findings you would expect at pre-natal investigation of this mother. | 30% |
| (e) | What metabolic abnormalities would you expect to find if the diagnosis of this baby is delayed for 24 hours ? | 25% |
| | | ----- |
| | | 100% |
| | | |
| 3. | Describe briefly the strategies you would adopt in dealing with, | |
| (a) | an outbreak of acute bacillary dysentery in an urban slum town with a population of about 200 inhabitants. | 40% |
| (b) | a cluster of cases of acute lead poisoning in children in a slum community. | 30% |
| (c) | a sudden increase in the incidence of sexual abuse in children living in a tourist resort town. | 30% |
| | | ----- |
| | | 100% |
| | | |
| 4. | Write short notes on the following, | |
| (a) | Complications of measles. | 25% |
| (b) | Clinical features and management of Dengue Shock Syndrome. | 25% |
| (c) | Clinical features of acute anterior poliomyelitis | 25% |
| (d) | Meningococcal septicaemia | 25% |
| | | ----- |
| | | 100% |

5. A 10 year old child is brought to you with acute-wheezing.
- (a) On what clinical criteria would you diagnose acute severe asthma in this child ? 30%
 - (b) On what criteria would you decide to refer the child to the hospital paediatrician with a view to starting prophylactic treatment ? 30%
 - (c) Discuss the mechanism of action and usefulness of drugs used in acute severe asthma ? 40%
- 100%
6. An 8 year old girl from a village in Anuradhapura was found unconscious in the morning, following a mild febrile illness.
- (a) List the possible causes for this condition. 30%
 - (b) What are the laboratory investigations you would request to arrive at a diagnosis ? 30%
 - (c) Outline the management of two of the most likely conditions mentioned. 40%
- 100 %

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
DECEMBER, 1995

Date :- 12th December, 1995

Time :- 2.00 p.m. - 5.00 pm.

STRUCTURED ESSAY PAPER

Answer all six questions

Answer each question in a separate book

1. Compare and contrast,
 - 1.1. Non-accidental injuries and osteogenesis imperfecta (35)
 - 1.2. Lactose intolerance and cow's milk protein allergy (35)
 - 1.3. Haemolytic uraemic syndrome and disseminated intravascular coagulation (30)

100

- 2 .
 - 2.1 Describe the factors that have-contributed to the high coverage rate of the Extended Programme of Immunization (EPI) in Sri Lanka (30)
 - 2.2 Enumerate the strategies utilized in the programme towards eradication of Poliomyelitis in Sri Lanka (40)
 - 2.3 Critically evaluate the need for Japanese Encephalitis vaccination in Sri Lanka (30)

100

3.
 - 3.1. Enumerate three (3) Neonatal surgical conditions that
 - 3.1.1. Do not need early surgery (15)
 - 3.1.2. That need early surgery (15)

- 3.2 Discuss the diagnosis and the management of one of the conditions in 3.1.2. (30)
- 3.3 Outline the diagnosis and the management of two (2) conditions that present with painful swelling/s of limb/limbs in the neonate. (40)
- 100

4. A 2 week old baby boy of birth weight 3.5. kg born to consanguineous parents was admitted with a history of vomiting and lethargy. His weight was 2.5 kgs. Elder brother of the patient had died at the age of 4 weeks.

on Examination

Tachypnoea +
 Anterior fontanelle - normal
 Lungs - clear
 Abdomen - spleen 1 cm palpable

- 4.1. Give 2 possible diagnoses (20)
- 4.2. How would you investigate this child, giving reasons (50)
- 4.3. Describe the treatment of one of the conditions mentioned above (30)
- 100

- 5.
- 5.1. How do infants and children acquire--Hepatitis B infection (20)
- 5.2. Describe the complications of Hepatitis B (30)
- 5.3. If a pregnant woman has Hepatitis B shortly before delivery, what effects would it have on the foetus and the baby ? (30)
- 5.4. Can transmission from the mother be prevented and if so how ? (20)
- 100

6. A mother brings her 5 year old child to you with a history of inability to speak properly.

6.1 List the features in the history that would help you in arriving at an aetiological diagnosis (30)

6.2 What physical findings would be useful indicators of the basic cause of the problem ? (30)

6.3 What facilities are available in Sri Lanka for the management of this child ? (40)

100

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
NOVEMBER, 1996

Date :- 19th November, 1996

Time :- 2.00 p.m. - 5.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions

Answer each question in a separate book.

1.
 - 1.1 Name the diseases and the mosquitoes that transmit 3 life threatening diseases common in Sri Lanka. (30)
 - 1.2 Describe the management of a neurological complication of one condition in 1:1. (35)
 - 1.3. Describe the preventive measures adopted in one condition in 1:1. (35)

2.
 - 2.1. Mention three conditions other than hypothyroidism which can cause persistent jaundice at four weeks of age in a baby born at term. . (15)
 - 2.2 Give additional physical signs you may look for in the diagnosis of hypothyroidism at this age. (25)
 - 2.3 Mention two investigations which will confirm the diagnosis of hypothyroidism. (20)
 - 2.4. Briefly outline the management of congenital hypothyroidism (40)

3. A six months old girl was admitted with a suspected urinary tract Infection
 - 3.1 List two reliable methods of collecting urine for culture to confirm the diagnosis (20)
 - 3.2 What is meant by a significant bacterial growth in each collecting method ? (20)

- 3.3 What is the importance of recognizing a urinary tract infection in infancy ? (20)
- 3.4 What further investigations should be done in this girl if the urinary tract infection is confirmed ? (40)
- Give two abnormalities seen in each test. (40)
4. A five year old developed petechiae and bruises over the last 3 days following an upper respiratory infection. She has been well before this and her examination is otherwise normal.
- 4.1 Name three conditions that you would consider in the differential diagnosis. (30)
- 4.2. What three investigations will you carry out ? (30)
- 4.3. Describe management of the most likely diagnosis. (40)
- 5.
- 5.1. Give four reasons for recommending exclusive breast feeding during first four month of infancy (25)
- 5.2. List the Diagnostic criteria of familial short stature (25)
- 5.3. Enumerate the clinical features of zinc deficiency (25)
- 5.4. List the differential diagnosis of bowlegs in a 15 month old child (25)
- 6.
- 6.1. What do you understand by the terms primary and secondary enuresis ? (30)
- 6.2 What are the aetiological factors of secondary enuresis ? (30)
- 6.3 How would you manage a 10 year old child who presents with primary nocturnal enuresis ? (40)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
NOVEMBER , 1997

Date :- 12th November, 1997

Time :- 2.00 p.m. - 5.00 p.m.

Answer all six questions.

Answer each question in a separate book.

STRUCTURED ESSAY PAPER

1. A 14 hour old baby was transferred from a local hospital with refusal of feeds, pallor and jaundice.
 - 1.1. Mention two most likely causes. (20 marks)
 - 1.2. Mention the important features in the maternal history which will help in the differential diagnosis. (25 marks)
 - 1.3. List the investigations. (25 marks)
 - 1.4. Briefly outline the management of one of the conditions. (30 marks)

2. Describe briefly the methods employed in
 - 2.1. Primary prevention of (25 marks)
 - (a) congenital rubella
 - (b) open neural tube defects
 - 2.2. Prenatal diagnosis of (25 marks)
 - (a) Down's syndrome
 - (b) Open neural tube defects
 - 2.3. Neonatal screening for (25 marks)
 - (a) congenital dislocation of hip
 - (b) congenital hypothyroidism
 - 2.4. Carrier detection in (25 marks)
 - (a) Duchenne muscular dystrophy
 - (b) Beta thalassaemia

3

3.1. Name one medical and one surgical condition common in Sri Lanka where an eight month old child passes blood and mucous per rectum (20 marks)

3.2 How would you differentiate these two ? (35 marks)

3.3. List the clinical manifestations of 3 serious complications of the medical condition (45 marks)

4. A six month old baby was admitted with a presumptive diagnosis of meningitis.

4.1 Name three likely bacteria responsible for meningitis at this age (15 marks)

4.2. What are the clinical features that the baby may have ? (25 marks)

4.3 What investigations would you do before commencing treatment ? (25 marks)

4.4. List the possible complications (25 marks)

4.5 Mention two vaccines that may prevent meningitis at this age (10 marks)

5. A four year old child presented with weakness of lower limbs of two days' duration.

5.1. Discuss the differential diagnosis (50 marks)

5.2 Outline the management of this child including preventive aspects (50 marks)

6. What advice would you give to a mother on discharge of

6.1. A four year old boy with first attack of nephrotic syndrome (25 marks)

6.2. An eleven month old boy with infantile spasms (25 marks)

6.3. A nine month old girl with first attack of urinary tract infection (25 marks)

6.4. A nine year old boy with first episode of rheumatic fever (25 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
DECEMBER 1998

Date: 7th December, 1998

Time: 2.00 p.m.-5.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1.
 - 1.1 Briefly describe the important aetiological factors leading to failure of lactation. (40 marks)
 - 1.2 How do you clinically assess the adequacy of the supply of breast milk ? (30 marks)
 - 1.3 How do you manage a mother of a 3 week old neonate with established lactation failure ? (30 marks)

2. Describe the important contribution made by the following personnel towards the improvement of child health care in Sri Lanka.
 - 2.1 Family Health Worker (35 marks)
 - 2.2 School Medical Officer (or substitute) (35 marks)
 - 2.3 Public Health Inspector (30 marks)

3.
 - 3.1 Enumerate the steps taken to eradicate poliomyelitis in Sri Lanka. (35 marks)
 - 3.2 Critically evaluate the replacement of Measles Vaccine with the Measles Mumps Rubella Vaccine (35 marks)
 - 3.3 What are the relative and absolute contraindications, for the use of D.P.T. Vaccine ? (30 marks)

4. A 4 year old boy who is a recent resident of Sedawatte (Colombo North) was admitted with profuse watery diarrhoea and vomiting of one day's duration. On admission he was found to be drowsy, had sunken eyes and a thready pulse.
- 4.1 What is the most likely diagnosis ? (10 marks)
- 4.2 Outline the management (investigations and treatment)of this patient. (40 marks)
- 4.3 What further measures would you adopt to prevent the spread of this disease? (25 marks)
- 4.4 What action would you take in the case this patient dying in the hospital? (25 marks)
- 5.
- 5.1 What is the differential diagnosis of a 14 year old girl who presents with a 10 day history of abnormal behaviour ? (30 marks)
- 5.2 Mention in brief the information in the history and physical examination which would help you to arrive at a diagnosis. (40 marks)
- 5.3 Briefly discuss the treatment of one of the common conditions mentioned above. (30 marks)
- 6.
- 6.1 Name 5 poisonous land snakes endemic to Sri Lanka. (15 marks)
- 6.2 Briefly discuss the important aspects in the history and examination which would help you to identify the type of snake. (50 marks)
- 6.3 Outline the principles in the management of a child admitted following a snake-bite. (35 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
DECEMBER 1999

Date:- 13th December, 1999

Time:- 2.00 p.m. - 5.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1.
 - 1.1 Mention the clinical features of respiratory distress in the neonate.
(30 marks)
 - 1.2 List three causes of respiratory distress in the neonate where major surgical intervention is required.
(30 marks)
 - 1.3 Describe the clinical features and the pre operative care of one condition listed in 1.2.
(40 marks)

2. A 5 1/2 year old boy presents to you with a hi-story of encopresis / faecal soiling of four months duration.
 - 2.1 List the possible causes that you would consider in the differential diagnosis.
(30 marks)
 - 2.2 What important features in the history and examination would help you in arriving at a reasonable diagnosis ?
(50 marks)
 - 2.3 Discuss briefly, the management of one of the conditions mentioned above.
(20 marks)

3. Outline the management (investigations and treatment) of,
 - 3.1 A 5 year old boy with Guillian-Barre syndrome (50 marks)
 - 3.2 A six month old infant with infantile spasms. (50 marks)

4.
 - 4.1 Name three indicators of Vitamin A status in a community. (25 marks)
 - 4.2 Give the current prevalence data for Vitamin A deficiency in Sri Lanka. (25 marks)
 - 4.3 What are the major direct and indirect sequelae of a high prevalence of Vitamin A deficiency on child health. (25 marks)
 - 4.4 Mention four clinical situations, other than frank Vitamin A deficiency, in which a mega dose of Vitamin A is indicated. (25 marks)

5.
 - 5.1 Briefly discuss the psychosocial problems facing patients and the families of Beta Thalassaemia major. (40 marks)
 - 5.2 Outline the management of a child after splenectomy. (40 marks)
 - 5.3 List the differential diagnosis of microcytic hypochromic anaemia in a 5 year old child. (20 marks)

6. A 9 months old baby boy was transferred from a local hospital for management of urinary tract infection. He has been having recurrent attacks of fever for three onths prior to admission and was dyspnoeic and weighed only 5.7 kg.
 - 6.1 Mention other important symptoms and signs this patients may have. (40 marks)
 - 6.2 Enumerate the investigations that may help in the management. (30 marks)
 - 6.3 Briefly outline the treatment. (30 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
DECEMBER 2000

Date: 11th December, 2000

Time: 2.00 p.m. - 5.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. Define and describe giving simple examples the following terms used in Medical Statistics
 - 1.1 Confounding variable (25 marks)
 - 1.2 Sensitivity and Specificity (25 marks)
 - 1.3 Prevalence and Incidence (25 marks)
 - 1.4 $P < 0.02$ (25 marks)

2. A three (3) year old child presented to the OPD with a history of dog bite;
 - 2.1 Outline the management of this child (50 marks)
 - 2.2 What are the measures that can be taken to prevent Rabies in Sri Lanka. (50 marks)

3. Describe the dietary advice you would give in the following instances.
 - 3.1 A child with the first episode of nephrotic syndrome (30 marks)
 - 3.2 A 7 year old child diagnosed to have viral hepatitis. (20 marks)
 - 3.3 A 5 month old baby weighing 4.2 kg. with a large ventricular septal defect and on medication for heart failure. (25 marks)
 - 3.4 A 13 month old weighing 8 kg. who is constipated and has recurrent urinary tract infections. (25 marks)

4. Three day old term infant whose birth weight was 2.2 kg. presented with excessive tremulousness (jitteriness) and lethargy.
- 4.1 Mention the two most likely causes. (20 marks)
- 4.2 Mention the important points in the history and examination, which will help in the differential diagnosis. (40 marks)
- 4.3 Outline the management of this baby's condition. (40 marks)
- 5.
- 5.1 What are the anthropometric criteria for diagnosis of obesity in childhood. ? (30 marks)
- 5.2 How would you differentiate Cushing's syndrome from simple obesity,
a. clinically ? (20 marks)
b. by investigation ? (20 marks)
- 5.3 What are the principles of management of simple obesity in childhood ? (30 marks)
6. Enumerate the causes and outline the management of the following conditions.
- 6.1 Rectal prolapse in a 2 year old child (30 marks)
- 6.2 Bow legs in a 18 months old child (40 marks)
- 6.3 Oral thrush in a 10 month old lady (30 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
DECEMBER 2001

Date: 10th December, 2001

Time: 1.30 p.m. – 4.30 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. What medical advice and instructions would you give the mothers of babies with the following conditions on discharge from the special care baby unit. Indicate the follow - up plan when applicable.
 - 1.1. Three week old baby who was born at 31 weeks of gestation with a birth weight of 1.3 kg and who has had respiratory distress during the first week. (25 marks)
 - 1.2. Baby with jaundice who underwent an exchange transfusion. (25 marks)
 - 1.3. First born baby with cleft lip and palate. (25 marks)
 - 1.4. Neonatal meningitis. (25 marks)

2.
 - 2.1. Briefly outline the
 - (a) cytogenetics (20 marks)
 - (b) prenatal diagnosis of Down syndrome. (20 marks)

 - 2.2. Enumerate the Important aspects of health care which should be provided for a Down syndrome baby.
 - (a) during the early neonatal period. (20 marks)
 - (b) at one year. (20 marks)
 - (c) at five years. (20 marks)

3.
 - 3.1. List the acute and chronic complications of hepatitis B infection. (20 marks)
 - 3.2. How do you manage an infant born to a mother who is positive for HBsAg ? (25 marks)
 - 3.3. Outline the emergency management of haematemesis in a child with portal hypertension. (30 marks)
 - 3.4. Briefly describe the prevention of hepatitis B infection in the community. (25 marks)

4. A 4 year old child presents with severe pallor.
 - 4.1. What questions will you ask from the mother in order to arrive at a diagnosis ? (25 marks)
 - 4.2. What important features in the examination would help you in arriving at a diagnosis ? (25 marks)
 - 4.3. List the investigations you would request for, giving reasons.(30 marks)
 - 4.4. How would you manage iron deficiency anaemia ? (20 marks)

5. The Child Health Development Record of a 2 year old is annexed. She was diagnosed as having a large ventricular septal defect in the neonatal period.
 - 5.1. Enumerate the information that can be obtained from this chart regarding her growth from points A to B. (35 marks)
 - 5.2. Briefly discuss the possible reasons for this child's growth from points.
 - (a) A to B. (40 marks)
 - (b) B to C (25 marks)

6.
 - 6.1. Discuss critically the reasons for the changes made to the national immunization schedule implemented this year and possible additions in the future. (60 marks)
 - 6.2. Briefly outline the prevention of the vertical transmission of HIV infection. (40 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
DECEMBER 2002

Date: 2nd December, 2002

Time: 1.30 p.m. – 4.30 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1.
 - 1.1. Discuss the possible long-term complications of a baby born at 28 weeks of gestation. (40 marks)
 - 1.2. What important measures should be taken when transferring a premature baby with respiratory distress to a distant N.I.C.U. (40 marks)
 - 1.3. Discuss briefly the importance of the APGAR score (20 marks)

2.
 - 2.1. A mother of a 2 week old neonate presents to you with the following Complaint.
"I do not have sufficient breast milk to feed my baby".
The mother is 20 years of age and this is her first baby. The baby had been born at term weighing 3 kg and there had been no perinatal problems.

Describe how you would manage this situation. (50 marks)
 - 2.2. A baby is born to a mother who has pulmonary tuberculosis. The mother is sputum positive.

Describe how you would manage this situation. (30 marks)
 - 2.3. A 2 year old child who has been given the BCG vaccine at birth has no BCG scar.

Describe how you would manage this situation. (20 marks)

3.
 - 3.1. Name five food/drink items that are harmful to health, but are increasingly consumed, especially by children of middle/upper income families in urban areas. (15 marks)
 - 3.2. Mention the harmful (non infective) agents found in any 4 food items you have mentioned above. (20 marks)
 - 3.3. Describe the short and long term harmful effects caused by such food/drink and how these children would present to a doctor. (40 marks)
 - 3.4. Outline the measures that you would recommend to correct such wrong food habits. (25 marks)

4. A 5 year old child was admitted to the ward with excessive bleeding after a tooth extraction.
 - 4.1 What are the possible causes ? (25 marks)
 - 4.2. What investigations would you request in order to arrive at a diagnosis. (25 marks)
 - 4.3. List the medications/products locally available in the management of bleeding disorders and give indications for their use. (50 marks)

5. An eight month old boy was brought to the hospital with a history of fever of 2 days duration and excessive crying. He has vomited several times and had a generalized convulsion before admission to the hospital.
 - 5.1. Mention two likely causes. (10 marks)
 - 5.2. Describe other symptoms and signs which may help in the differential diagnosis. (25 marks)
 - 5.3. Discuss the investigations you would carry out on this patient. (25 marks)
 - 5.4. Outline the management of the most likely condition. (25 marks)
 - 5.5. List the complications. (15 marks)

6. Define and describe giving examples the following terms used in Medical Genetics.
 - 6.1. Lyon Principles (Lyon hypothesis) (20 marks)
 - 6.2. mosaicism (20 marks)
 - 6.3. mutation (mutagenesis) (20 marks)

Describe the special features of a typical pedigree chart in each of the following inheritance patterns.

 - 6.4. autosomal dominant inheritance. (20 marks)
 - 6.5. autosomal recessive inheritance. (20 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
NOVEMBER, 2003

Date: 10th November, 2003

Time: 1.30 p.m. – 4.30 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. A 5 day old neonate was brought to a Base Hospital Outpatients Department (OPD) with a history of jaundice of 2 days and poor feeding of one day duration.

On examination his temperature was 35.7°C. He was drowsy with mottled skin and a CRT (capillary refill time) of 4 sec. The jaundice was moderate and the liver and spleen were both palpable one centimeter below the costal margins. There was slight oozing from the umbilicus.

- 1.1. On your initial assessment, what is the most likely complete diagnosis ?
(10 marks)
- 1.2. What risk factors would you look for in the birth history, to cause the condition mentioned in 1.1. ?
(20 marks)
- 1.3. How would you initially manage this baby in this hospital ?(30 marks)
- 1.4. Briefly discuss the indications which would necessitate the transfer of this baby to the Neonatal Intensive Care Unit (NICU). (20 marks)
- 1.5. If NICU facilities are not available in this hospital, list the precautions you would take when transferring this baby to a regional NICU
(20 marks)
2. A two year old boy is seen for inability to walk. He had been born at term and had been admitted to the baby unit as he had not cried at birth. He had been in the baby unit for one week, where according to the mother he had been treated for fits as well as other problems. He had not been followed up in the clinic after discharge. This is the first occasion the parents have brought him to a doctor for his delay in walking.

Immunization history - BCG at birth
DTP + OPV at 2, 4, & 6 months

His developmental history is as follows -

Head control - 6 months
Rolling over - 10 months
Sitting with support - 20 months
Unable to sit without support

Speech – babble (monosyllables)
Hearing - mother feels he can hear

Does not reach for objects
Vision - normal according to mother

Social smile at 4 months
No stranger fear

On examination you find the following growth parameters
Weight -7.5 kg (50th centile - 12.5 kg)
Length - 68 cm (50th centile - 87 cm)
Occipitofrontal head circumference - 43.5 cm (50th centile - 49 cm)

He has contractures of his ankles and elbows. The tone in his upper and lower limbs is increased. The upper limbs seem more affected than the lower limbs.

- 2.1. List the medical problems you have identified in this child. (10 marks)
- 2.2. Give a complete diagnosis to explain his delayed walking. Give reasons for this. (20 marks)
- 2.3. Make an assessment of his development considering the developmental history given to you. (30 marks)
- 2.4. How would you manage this patient ? (40 marks)

3.
 - 3.1. List the causes of recurrent headache in a 8 year old child. (15 marks)
 - 3.2. Outline the features in the history and examination which would help in arriving at a possible diagnosis. (20 marks)
 - 3.3. Outline the management of a child with migraine. (20 marks)
 - 3.4. List 3 conditions which mimic epilepsy in children (15 marks)
 - 3.5. Briefly outline the features in each *of* the conditions mentioned in 3.4. that would help you to differentiate them from epilepsy. (30 marks)

4. What are the important features in the history and examination that you would wish to obtain in the following conditions to enable you to arrive at a possible diagnosis ?
 - 4.1. A 10 year old girl presenting with abdominal pain of 3 months duration (25 marks)
 - 4.2. A 5 week old infant presenting with abdominal distension. (25 marks)
 - 4.3. A 2 ½ year old child presenting with speech delay (25 marks)
 - 4.4. A 9 year old girl with vaginal bleeding (25 marks)

5.
 - 5.1. List the features you would look for as evidence of rheumatic carditis in a child with swelling of multiple joints. (25 marks)
 - 5.2. How would you manage a child with rheumatic carditis ? (50 marks)
 - 5.3. List the features in the history and examination that would help you to arrive at a diagnosis of rheumatic chorea in a 8 year old girl. (25 marks)

6. A 6 year old previously healthy girl presented with high fever, shortness of breath and productive cough. She had been on oral amoxicillin for 2 days prescribed by her family practitioner. Her 8 year old sister also has an acute lower respiratory tract infection. There was no contact history of tuberculosis.

On examination she looked ill, the respiratory rate was 30 per minute, the trachea was central and the percussion note stony dull over the right lower zone. Bronchial breathing was heard over the right mid zone. White cell count - 8,800/mm³ Neutrophils - 46%, Lymphocytes - 54%. She was commenced on intravenous crystalline penicillin but there was no clinical improvement observed after 72 hours of treatment.

- 6.1. Mention three possible diagnoses. (30 marks)

On day 3 of treatment hepatomegaly of 2 cms., splenomegaly of 1 cm. and severe headache are noted.

- 6.2. Name the most likely diagnosis. (20 marks)

- 6.3. List the investigations you would perform to confirm your diagnosis. (20 marks)

- 6.4. Discuss the antibiotic regime that you would continue or change to and give your reasons. (30 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
NOVEMBER, 2004

Date: 8th November, 2004

Time: 1.30 p.m. – 4.30 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. A mother brings her 2 ½ year old daughter to the clinic with a history of delay in speech development.
 - 1.1. List the possible causes that could account for this situation. (20 marks) .
 - 1.2. What basic examinations and investigations would help you in arriving at a diagnosis ? (20 marks)
 - 1.3. What important features in the history would help you make a diagnosis of autism in this child ? (40 marks)
 - 1.4. List the types of special therapies and services that are needed to manage a child with autism in the community. (20 marks)

2. A mother brings her 3 months old baby girl with evidence of heart failure to the paediatric casualty ward.
 - 2.1. List the possible causes of heart failure in this child. (30 marks)
 - 2.2. What clinical features would help you in diagnosing heart failure (35 marks)
 - 2.3. Briefly outline the management of this child. (35 marks)

3. A 7 year old child presents with polyarthritis and an erythematous rash.
 - 3.1. List 5 possible causes. (25 marks)
 - 3.2. What investigations would you carry out in arriving at a diagnosis indicating the relevance to each of the conditions you mention. (40 marks)
 - 3.3. Discuss the management of one of the conditions mentioned above. (35 marks)

4.
 - 4.1. What do you mean by the term "maintaining cold chain" in relation to vaccines ? (20 marks)
 - 4.2. Describe the procedure of giving BCG vaccine to a newborn baby. (35 marks)
 - 4.3. Describe series of changes that one would notice at the site of BCG vaccination. (25 marks)
 - 4.4. A 2 month old, otherwise well child presents with a lump in the left axilla. The BCG scar is present just below the acromian process. Outline the management. (20 marks)

5. Briefly discuss management of the following problems.
 - 5.1. Mother shows you a fresh wet nappy of her newborn baby with a pink mark. (20 marks)
 - 5.2. A newborn baby has clonic movements of left foot noticed a few times during feeding. (20 marks)
 - 5.3. Three-week-old boy, born by forceps delivery has developed nodules on the occiput and on both shoulders. (20 marks)
 - 5.4. A day old baby has vomited blood after the first feed. (20 marks)
 - 5.5. A baby weighing 3.8 kg delivered by breech has absent Moro reflex on left side. (20 marks)

6. List the important features that would help in differentiating :
 - 6.1. Acute laryngotracheobronchitis (croup) from acute epiglottitis (25 marks)
 - 6.2. Intrahepatic cholestasis (neonatal hepatitis syndrome) from extrahepatic biliary atresia (25 marks)
 - 6.3. Hirschsprung disease from functional megacolon. (25 marks)
 - 6.4. True seizures from pseudo seizures (25 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
NOVEMBER, 2005

Date: 7th November, 2005

Time: 1.30 p.m. – 4.30 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. A 9 month old infant is brought to the Out Patient Department with a two day history of watery diarrhoea.
 - 1.1 List the likely aetiological agents for this condition. (15 marks)
 - 1.2 Outline the management of this infant if you detect some dehydration. (30 marks)
 - 1.3 Outline the physiological basis of oral rehydration solution in the treatment of diarrhoea. (20 marks)
 - 1.4 Mention **3 types** of oral rehydration solutions (ORS) indicating the basis for their different compositions. (20 marks)
 - 1.5 List **3 advantages** of having a diarrhea treatment unit in a provincial hospital. (15 marks)

2.
 - 2.1. List the clinical features of
 - A. blue breath holding episodes. (15 marks)
 - B. pallid breath holding episodes(reflex anoxic seizures). (15 marks)
 - 2.2. List the clinical features of benign partial epilepsy with centro temporal spikes (benign rolandic epilepsy). (25 marks)
 - 2.3. Outline the principles of management of benign partial epilepsy with centro temporal spikes. (20 marks)
 - 2.4. Mention briefly the factors that would determine prognosis in a 6 month old baby with infantile spasms. (25 marks)

- 3.
- 3.1. List indications for prescribing anti rabies serum to a child following a dog bite. (25 marks)
 - 3.2. Briefly outline the scientific basis for prescribing both anti rabies serum and vaccine for some children and only the vaccine for others. (20 marks)
 - 3.3. Name the different types of anti rabies vaccines available/used in Sri Lanka. (15 marks)
 - 3.4. List the precautions that you would take when anti rabies serum is given to a child. (40 marks)
4. A 3 year old child with a simple viral fever is brought to the hospital on day 5 of the illness. He weighs 12 kg and has received the following treatment prior to admission.
Paracetamol - three quarter of an "adult tablet" 4 hourly for 5 days, mefenamic acid 200 mg three times per day from Day 3 onwards and diclofenac sodium 12.5 mg rectal suppository on 2 occasions.
- 4.1. Comment on the above anti-pyretic treatment. (30 marks)
 - 4.2. Mention the likely clinical features you would expect in this child as a result of this treatment. (30 marks)
 - 4.3. Outline briefly how you would manage the most likely iatrogenic condition that this child may have developed. (40 marks)
- 5.
- 5a. A 3 week old exclusively breast fed infant born at home, is admitted with blood stained yellow coloured stools. The baby has no fever, appears well and is sucking normally. After the admission she is noted to have excessive bleeding from a venepuncture site. Rest of the physical examination is unremarkable. A few hours later she develops a focal seizure.
 1. What is the most likely diagnosis ? (20 marks)
 2. Mention the reason for developing the seizure. (10 marks)
 3. List **four** investigations you would carry out. (20 marks)
 4. How could this condition have been prevented ? (10 marks)

- 5b. Write on the following aspects of ophthalmia neonatarum.
1. aetiology (15 marks)
 2. management (25 marks)

6.

- 6.1 A one year old boy presents with high fever and screaming on moving his left leg.
On examination both active and passive movements of the left hip are extremely painful.

Mention the most likely diagnosis. (10 marks)

Briefly outline the management of this condition. (25 marks)

- 6.2 A 4 year old girl is admitted with severe abdominal pain, swelling of both ankles and a palpable erythematous rash on both lower limbs and buttocks of 2 days duration.

Mention the most likely diagnosis. (10 marks)

Outline the management of this child. (25 marks)

- 6.3. A 5 week old baby presents with spasmodic cough, post-tussive vomiting for 10 days duration and one episode of cyanosis.

List the investigations you would request. (15 marks)

Outline the management of this baby. (15 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
OCTOBER, 2006

Date: 30th October, 2006

Time: 1.00 p.m. – 4.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. In the neonate
 - 1.1. What are the signs of hypoglycaemia ? (20 marks)
 - 1.2. Why is important to diagnose this condition early ? (20 marks)
 - 1.3. a. List the causes of hyperinsulinaemia (15 marks)
b. Name three investigations you would do to confirm hyperinsulinaemia (15 marks)
 - 1.4. How do you manage symptomatic hypoglycaemia ? (30 marks)

2.
 - 2.1. List 5 definitive contraindications to administering Live vaccines. (30 marks)
 - 2.2. Discuss the advantages of acellular pertussis vaccine. (20 marks)
 - 2.3. Briefly outline the management of anaphylactic shock Following vaccination. (35 marks)
 - 2.4. Name 3 vaccines which are contraindicated in a child With symptomatic HIV infection (AIDS). (15 marks)

3. A two year old boy is brought to the OPD with a history of one generalized convulsion. He has had fever for 2 days and six episodes of vomiting. He oral intake had been poor over the last twenty four hours.
 - 3.1. Mention four possible causes for the convulsion. (20 marks)
 - 3.2. Discuss further signs and symptoms you would look for in order to differentiate each of the above causes. (40 marks)
 - 3.3. Outline the acute management of this child. (40 marks)

4. A twelve month old child weighing 8 kgs developed fever and a watery diarrhea, but no vomiting. On the 2nd day she developed a cough with wheezing. The baby was very thirsty but the mother had stopped milk and given only coriander water. She was taken to the general practitioner who gave the following drugs for three days.

Panadol 10ml 8 hourly
Erythromycin 5 ml 6 hourly
Syrup deriphyllin 5 ml 6 hourly
Strup motilium 5 ml 8 hourly
Astemizole ½ tab daily
Syrup metronidazole 5 ml 6 hourly

List with reasons 10 deficiencies in this prescription. (100 marks)

5. A 4 year old girl presents with haematuria and abdominal distension. She has had no significant medical problems in the past. On clinical examination she is apyrexial and has a right sided non tender abdominal mass extending to the midline. Blood pressure 150/100. Urine culture – no growth.

5.1. Give the 2 most likely diagnoses ? (30 marks)

5.2. Give reasons for the high blood pressure in each of the conditions you mentioned. (20 marks)

5.3. What other clinical features would you look for in This child relevant to the above two diagnoses ? (30 marks)

5.4. List four useful investigations with findings to confirm your diagnoses. (20 marks)

6. A tree year old mentally subnormal boy, who is hyperactive was brought with a history of a sudden onset fit. He has no previous history of fits. On examination he was found to have multiple bruises over the buttocks and both upper arms. The child was drowsy and had weakness of his left hand.

6.1. What is the most likely diagnosis ? (20 marks)

6.2. What supportive evidence do you have in this case Scenario, for the diagnosis ? (20 marks)

6.3. What other physical signs and investigations will help You to confirm the diagnosis ? (30 marks)

6.4 Outline the actions you would take to prevent Recurrences. (30 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

DIPLOMA IN CHILD HEALTH EXAMINATION
OCTOBER / NOVEMBER 2007

Date :- 29th October 2007

Time:- 1.00 p.m. - 4.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1.
 - 1.1. What is meant by Newborn Screening ? (15 marks)
 - 1.2. Discuss the advantages and disadvantages of newborn screening (25 marks)
 - 1.3. List three treatable conditions which you think babies born in Sri Lanka should be screened for, giving reasons. (60 marks)
2.
 - 2.1. Define the following clinical situations seen in nephrotic syndrome
 - (a) 'Relapse'
 - (b) 'Steroid resistance'
 - (c) 'Steroid dependence'
 - (d) 'Frequently relapsing' (40 marks)
 - 2.2. Write the histological classification of nephrotic syndrome. (10 marks)
 - 2.3.
 - (a) List two cytotoxic drugs used in the management of nephrotic syndrome. (10 marks)
 - (b) Mention the indications for the above. (10 marks)
 - 2.4. Outline the advice that you would give regarding home based care to parents of a child with nephrotic syndrome. (30 marks)

3. A 12 year old girl with a diagnosis of Wilson disease was admitted with haematemesis.
- 3.1. List the organs involved in this disease and mention one abnormal manifestation in each organ. (25 marks)
- 3.2 Outline the immediate and long term management of this child. (75 marks)
4. A 16 year old mother brings her 15 day old first born baby with "excessive crying". The baby was born vaginally with a birth weight of 2.5 kg and had been well at birth. On examination he weighs 2.05 kg., is afebrile, alert and sucks eagerly at the breast. There are no congenital abnormalities.
- 4.1. What is the most likely cause for the excessive crying ? (10 marks)
- 4.2. What clinical features (in history and examination) would you look for to diagnose the above condition ? (10 marks)
- 4.3. Describe briefly the steps in the treatment of this baby. (50 marks)
- 4.4. Mention the measures that can be taken in maternity wards to reduce this condition. (30 marks)
- 5
- 5.1. Mention four common causes of wheezing in infancy, other than bronchial asthma. (20 marks)
- 5.2. List the indications for long term prophylactic therapy in a child with bronchial asthma. (30 marks)
- 5.3. Name the different types of devices that could be used for delivering steroid inhalation therapy to a child. (25 marks)
- 5.4. Discuss the advantages and disadvantages of dry powder and metered dose inhaler therapy in childhood asthma. (25 marks)

- 6.
- 6.1. Define multifactorial inheritance. (15 marks)
- 6.2. Name four conditions that show this pattern of inheritance. (20 marks)
- 6.3. A three day old baby presents with central cyanosis but no respiratory distress. A systolic murmur is heard in the pulmonary area and the SaO₂ is 70%.
- (a) Outline the immediate management of this baby. (25 marks)
- (b) List five congenital cardiac problems presenting with a similar picture. (15 marks)
- (c) Discuss the value of a chest x ray in this baby. (25 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

POSTGRADUATE DIPLOMA IN CHILD HEALTH EXAMINATION
OCTOBER 2008

Date : 28th October 2008

Time : 1.00 p.m. - 4.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. A 26 years old mother's first born baby is found to have features of Down syndrome.
 - 1.1. Describe the important steps in the "plan of management" of this baby, in chronological order, from the neonatal period to 12 months of age (50 marks)
 - 1.2. Mention five (05) gastrointestinal system abnormalities that may need surgical intervention during the neonatal period in a Down syndrome baby. (15 marks)
 - 1.3. Briefly outline the indications for, and the procedures used, in the prenatal diagnosis of Down syndrome. (35 marks)

2.
 - 2.1. Briefly describe the aetiology of epistaxis in childhood. (25 marks)
 - 2.2. Describe your management of a child with epistaxis, giving reasons for your actions. (20 marks)
 - 2.3. Define obstructive sleep apnoea in children. (15 marks)
 - 2.4. Describe the clinical features and complications of obstructive sleep apnoea. (40 marks)

3. An 8 year old boy is admitted with a history of snake bite.
 - 3.1. Mention the important features in the assessment of this clinical situation on admission. (30 marks)
 - 3.2. Name the most important bed side investigation you would perform and describe in detail how this test is carried out. (20 marks)
 - 3.3. Briefly describe how you would administer anti-venom to this child. (30 marks)
 - 3.4. Within 30 minutes of starting the anti-venom the child develops a severe reaction. Outline how you would manage this complication. (20 marks)

4.
 - 4.1. Briefly discuss the health and psychosocial risks of internally displaced children. (40 marks)
 - 4.2. List the major hazards faced by adolescents in Sri Lanka. (30 marks)
 - 4.3. Describe the health risks to babies of multiple pregnancies. (30 marks)

5.
 - 5.1. List the haematological and biochemical abnormalities seen in iron depleted states. (30 marks)
 - 5.2. Name three (03) other conditions in which haematological indices similar to iron deficiency anaemia are seen. (10 marks)
 - 5.3. Briefly discuss the aetiology of iron deficiency anaemia in infancy. (30 marks)
 - 5.4. List the principles of management of iron deficiency anaemia. (30 marks)

- 6.
- 6.1. Briefly discuss the significance of the following physical signs in the diagnosis of meningitis in paediatric practice.
- 6.1. (a) Bulging anterior fontanelle (20 marks)
- 6.1. (b) Neck stiffness (20 marks)
- 6.1. (c) Papilloedema (20 marks)
- 6.2. Briefly outline the steps taken, and the precautions to be observed, in dispatching a cerebrospinal fluid sample to the laboratory in a child suspected of meningitis. (15 marks)
- 6.3. Critically analyse the interpretation of the anthropometric assessments utilised for community based evaluation of nutritional status in preschoolers in Sri Lanka. (25 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

POSTGRADUATE DIPLOMA IN CHILD HEALTH EXAMINATIONN
OCTOBER 2009

Date : 26th October 2009

Time : 1.00 p.m. – 4.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1.
 - 1.1 In infants of poorly controlled diabetic mothers
 - 1.1.1. what congenital abnormalities occur with a higher incidence? (20 marks)
 - 1.1.2. what neonatal complications should be expected? (30 marks)
 - 1.1.3. what is the most important metabolic complication in the baby ? (10 marks)
 - 1.2. Discuss the management of the complication mentioned in 1.1.3. (40 marks)
2.
 - 2.1. Outline the causes of hearing impairment in children. (30 marks)
 - 2.2. List the causes, (other than hearing impairment) for delayed speech and language development in children. (20 marks)
 - 2.3 .. Mention the appropriate hearing screening tests for the following situations :- (20 marks)
 - 2.3 .1. a healthy term neonate
 - 2.3.2. a preterm baby leaving the neonatal intensive care unit
 - 2.3.3. a 9 month old infant
 - 2.3.4. a 2 year old child with speech delay
 - 2.4. Outline the management of a healthy term neonate with a positive hearing screening test. (30 marks)

3.
 - 3.1. Discuss the initial out-patient clinical evaluation of a 10 year old boy presenting with microscopic haematuria. (50 marks)
 - 3.2. State, giving reasons, the laboratory investigations you would perform on this child in an out patient setting. (30 marks)
 - 3.3. What important clinical and laboratory criteria will make you refer the child for specialist evaluation. (50 marks)

4.
 - 4.1. List the criteria for the diagnosis of constipation in children. (10 marks)
 - 4.2. Name the predisposing factors for functional constipation in children. (20 marks)
 - 4.3. List two diseases which present with constipation in children. (10 marks)
 - 4.4. How would you evaluate a child with chronic constipation. (30 marks)
 - 4.5. Outline the management of chronic functional constipation in a 10 year old boy. (30 marks)

5. A four year old boy is admitted to the paediatric ward of a teaching hospital with a history of fever for 5 days, abdominal pain and vomiting. His full blood count report shows

WBC	2600/cmm, N 54%. L 44%,
PCV	49%.
Platelet count	65,000/cmm

His blood pressure 90/75, His weight is 22 kg and the height is on the 50th centile.

- 5.1. What is the most likely diagnosis ? (10 marks)
- 5.2. List all relevant clinical features you need to elicit in this child. (25 marks)
- 5.3. How do you manage him during the next 48 hours assuming that there are no further complications. (45 marks)
- 5.4. List 5 complications this patient could develop during this period. (20 marks)
6. Discuss the management of breast feeding in the following situations.
- 6.1. A 6 day old neonate being breast fed half hourly. Birth weight is 3.0 kg and weight on day 6 is 2.6 kg. (30 marks)
- 6.2. A teacher mother planning to start work after 84 days of maternity leave. Working hours, including travelling time, is from 7.00 a.m. to 2.00 p.m. (35 marks)
- 6.3. A 21 days old exclusively breast fed infant presenting with 3 choking episodes after few minutes of breast feeding. There is no cyanosis or cough during these episodes. Birth weight is 3.0 kg and weight on day 21 is 3.8 kg. (35 marks)

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

POSTGRADUATE DIPLOMA IN CHILD HEALTH EXAMINATION
OCTOBER 2010

Date : 25th October 2010

Time : 1.00 p.m. – 4.00 p.m.

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. A 35 days old baby is brought to the well baby clinic one week earlier than scheduled because the mother thinks "the eyes have a yellowish discolouration". The urine and stool colour are normal and there is no pallor or organomegaly.

Investigations

Hb	13.5 g/L
Total WBC	98 x 10 ⁹
Neutrophils	38%
Lymphocytes	60%
Platelets	176,000/mm ³ (150,000- 350,000//mm ³)
Total serum bilirubin	222 mmol/L (20 - 40 mmol/L)
Direct	16 mmol/L
Indirect	206 mmol/L

- 1.1. List three (03) possible causes (15 marks)
- 1.2. List one (01) investigation **each** that would help in the diagnosis of **each** of the three conditions you mentioned in 1.1. (30 marks)
- 1.3. Briefly outline the management of any **one** condition you have mentioned in 1.1. (15 marks)
- 1.4. Describe the primary preventive measures that if correctly implemented would have prevented this clinical situation. (40 marks)

2. Define the following terms
- 2.1. (a) osteomalacia (10 marks)
 (b) osteoporosis (10 marks)
- 2.2. List five (05) causes for angulation of knee/s in children. (20 marks)

A 20 months old boy was admitted with a history of widening at the wrists and bony prominences over the lateral aspect of the chest. His serum calcium and phosphate levels were normal.

Alkaline phosphatase was 1000 IU. (Normal < 800 IU)

- 2.3. Write the most likely diagnosis. (10 marks)
- 2.4. List the other physical signs you would look for. (10 marks)
- 2.5. Briefly outline the management of this child. (20 marks)
- 2.6. List two (02) socio-cultural factors that could increase the incidence of this condition in the community. (20 marks)
3. A one year old child is admitted with blood and mucus diarrhoea of two days duration. His length is on 10th centile and weight is below -3SD. He is drowsy and moderately dehydrated.
- 3.1. Outline the immediate management required to stabilize this child. (20 marks)
- 3.2. Comment on the nutritional status of this child **giving reasons**. (15 marks)
- 3.3. Outline the management after the first 24 hours. (30 marks)
- 3.4. His haemoglobin is found to be 4 g/dL with a microcytic hypochromic blood picture. Describe in detail how you would correct this abnormality. (20 marks)
- 3.5. Mention five (05) key nutritional intervention strategies available for children in Sri Lanka. (15 marks)

- 4.
- 4.1. Define child abuse. (20 marks)
 - 4.2. List five (05) different types of child abuse. (10 marks)

An 8 year old girl whose mother is employed in the Middle East has confided in her class teacher that her grandfather has sexually abused her on several occasions.

- 4.3. Outline the persons involved and the measures that should be taken by them, in sequential order, starting from the school authorities. (70 marks)

5.

- 5.1.
 - (a) Briefly discuss the current definition of "Complex febrile seizures". (20 marks)
 - (b) Discuss the evidence based management regarding temperature control in febrile seizures. (20 marks)
 - (c) Mention four (04) risk factors associated with a higher rate of recurrence of febrile convulsions. (10 marks)

5.2. A 6 year old boy performing well in school presents with four afebrile generalized seizures over the last one month.

- (a) Outline the principles of management with regard to anticonvulsant therapy. (25 marks)
- (b) Mention the side effects of **two** (02) anticonvulsant drugs which are appropriate for use in this child. (25 marks)

6. List the important aspects that should be attended to by the General Practitioner, with whom you intend to share the management of these patients during follow up in the community.

- 6.1. A preterm baby who is being discharged from the special care baby unit whose mother died the day after delivery due to severe heart disease. (35 marks)
- 6.2. A one month old baby of a 34 year old mother in whom you diagnose trisomy 21. (35 marks)
- 6.3. A 5 year old boy with nephrotic syndrome who is being discharged on levamisole therapy. (30 marks)