

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

POSTGRADUATE DIPLOMA IN CHILD HEALTH EXAMINATION
OCTOBER 2012

Date : 16th October 2012

Time : 9.00 a.m. – 12.00 noon

STRUCTURED ESSAY PAPER

Answer all six questions.

Answer each question in a separate book.

1. A seven year old boy is referred to the Paediatric Clinic following a school medical inspection. He gives a history of recurrent disturbing cough over the past three months.
 - 1.1. List five (5) other features in the history you would look for, in order to arrive at a possible diagnosis of Bronchial Asthma. (15 marks)
 - 1.2. This child is later admitted to the Preliminary Care Unit with acute worsening of symptoms.
 - 1.2.1. List five (5) clinical features that would suggest a diagnosis of acute severe asthma. (15 marks)
 - 1.2.2. List five (5) clinical features that would suggest a diagnosis of life threatening asthma. (15 marks)
 - 1.3. Briefly outline the principles of the management of acute severe asthma. (30 marks)
 - 1.4. List five features which will indicate the need for prophylaxis. (25 marks)
2.
 - 2.1. State five (5) important mechanisms of childhood injury. (20 marks)
 - 2.2. Name the three (3) levels of injury prevention giving three examples at each level. (40 marks)
 - 2.3. List ten (10) public health measures that have so far been undertaken for injury prevention in Sri Lanka. (40 marks)

3.
 - 3.1. List five causes of syncope in children. (25 marks)
 - 3.2. Briefly outline the clinical features and the management of
 - 3.2.1 reflex anoxic (pallid) seizures (20 marks)
 - 3.2.2. pseudo-seizures (20 marks)
 - 3.3. Describe the aura in
 - 3.3.1. temporal lobe epilepsy (15 marks)
 - 3.3.2. occipital lobe epilepsy (05 marks)
 - 3.4. List three non pharmacological therapeutic interventions that are useful in the management of refractory epilepsy. (15 marks)

4.
 - 4.1. Describe the characteristic features of the varicella zoster rash. (20 marks)
 - 4.2.
 - 4.2.1. What is progressive (haemorrhagic) varicella ? (10 marks)
 - 4.2.2. Name five (5) factors that predispose a child to this complication. (25 marks)
 - 4.3. Discuss the management of a neonate born to a mother with an active varicella zoster infection at the time of delivery. (30 marks)
 - 4.4. Name five (5) other infections which will give rise to a vesicular rash in children. (15 marks)

5. A two (2) year old child with profuse watery diarrhoea and vomiting was brought to the Casualty Paediatric Unit.
- 5.1. List four (4) important clinical features that would indicate the severity of dehydration. (20 marks)
- 5.2. Briefly describe
- 5.2.1. the composition of improved formula of Oral Rehydration Solution in comparison to the previous formula. (25 marks)
- 5.2.2. the advantages of the improved formula of Oral Rehydration Solution. (10 marks)
- 5.3. List three (3) causes of protracted diarrhoea following acute gastroenteritis (15 marks)
- 5.4. Outline six (6) steps that can be taken to reduce the incidence of acute gastro-enteritis in the community. (30 marks)
- 6.
- 6.1. How would you arrange to immunize a three (3) year old child who has not had any vaccines in the past ? (30 marks)
- 6.2. Mention four (4) secondary immuno-deficiency states where live vaccines are contraindicated. (20 marks)
- 6.3. A four (4) month old baby developed fever (100°F) and a generalized urticarial rash four hours after the pentavalent vaccine.
How would you plan the next vaccination for this child ? (20 marks)
- 6.4. A six (6) month old baby developed stridor a few minutes after the third dose of pentavalent vaccine.
Describe briefly the acute management of this child. (30 marks)