Master Copy - Rundus 27/1/2019. 2-30 Pm

POSTGRADUATE INSTITUTE OF MEDICINE UNIVERSITY OF COLOMBO

POSTGRADUATE DIPLOMA IN CHILD HEALTH EXAMINATION NOVEMBER 2019

Date: - 29th November 2019

Time: - 9.30 a.m. - 12.00 noon

STRUCTURED ESSAY PAPER

Answer all five (05) questions.

Answer each question in a separate book.

1. A 3-year-old baby is seen with maternal concerns of bow legs.

1.1. List two (02) differential diagnoses you will consider in this child.
(10 marks)

- 4.2. Outline the important points in the history and examination of this child in order to arrive at a diagnosis. (40 marks)
- 1.3. State three (03) investigations you would request with the expected findings to support a diagnosis. (20 marks)
- 1.4. Discuss briefly the management of both conditions mentioned in 1.1. (30 marks)
- 2. A 18-day old baby born at term, was brought to the well baby clinic as the mother noticed yellow discoloration of his eyes. He weighed 2.8 kg at birth and the current weight is 3.1 kg.
 - 2.1. Write three (03) possible causes for jaundice in this baby. (15 marks)
 - 2.2. Briefly describe two (02) important points in the history and two (02) physical signs which will support to diagnose each of the conditions mentioned in 2.1. (20 marks)
 - 2.3. List five (05) investigations you would perform in this child indicating the significance of the results in order to arrive at a diagnosis.

 (30 marks)
 - 2.4. Mention the principles of management of one of the causes mentioned in 2.1. (35 marks)

Contd..../2-

- 3. A baby born at term with a birth weight of 3.1 kg is found to have a cardiac murmur at 6 weeks review.
 - 3.1. State three (03) clinical features which favour a benign murmur.

(15 marks)

What is the important step in the management at this stage?(15 marks)

At the age of 6 months, the infant presents to the paediatric casualty with features of congestive cardiac failure. On examination he is found to have a pan systolic murmur best heard at the left lower sternal edge.

3.3. Outline the steps in the immediate management.

(35 marks)

3.4. Discuss briefly the long term management.

(35 marks)

4.

4.1. Define the term "short stature"

(20 marks)

4.2. A 6-year-old girl was referred by a General Practitioner for further assessment of short stature. She had been born at term to healthy parents of a middle income family. Her birth weight has been 2.8 kg. The parents had no concerns regarding her appearance. She had remained well.

Her dietary intake seems to be adequate and the weight was on the median for the age.

- 4.2.1. List three (03) possible causes for her short stature. (15 marks)
- 4.2.2. Mention how you would clinically evaluate this child in order to arrive at a diagnosis. (40 marks)
- 4.2.3. List five (05) investigations that you would request giving reasons. (25 marks)

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5. A 8-year-old previously healthy girl presents to the paediatric clinic with a history of deterioration of school performance for 2 months duration. She has been noted to have poor attention on several occasions by the class teacher.

Her investigations are given below:

Hb	12 g/L	
Blood picture	Normal	
FT ₄	7.4 μg/dl	(5 - 12)
TSH	1.5 miu/L	(0.5 - 3)

5.1. List three (03) differential diagnoses.

(15 marks)

- 5.2. Mention two (02) important other symptoms you would look for in this child. (10 marks)
- 5.3. List one (01) physical sign in each of the differential diagnoses mentioned in 5.1. indicating the expected findings. (15 marks)
- 5.4. Mention three (03) investigations you would request in order to arrive at a diagnosis. Mention one (01) expected abnormality in each. (30 marks)
- 5.5. Briefly outline the management of one of the conditions mentioned in 5.1. (30 marks)