

POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

POSTGRADUATE DIPLOMA IN CHILD HEALTH EXAMINATION
MARCH 2021

Date :- 10th March 2021

Time:- 9.00 a.m. – 11.30 a.m.

STRUCTURED ESSAY PAPER

Answer **all five (05)** questions.

Answer **each question in a separate book.**

1. A previously well 8 year old boy is admitted with continued fever for 10 days. He also has abdominal pain and loss of appetite. Initially he had constipation for 3 days, but now has watery stools. On examination he appears ill and febrile. He has mild abdominal distention. Liver is palpable 1 cm below the costal margin and has a just palpable spleen. Rest of the clinical examination is unremarkable.

1.1. State the most likely clinical diagnosis. (10 marks)

1.2. Outline how would you investigate this child to arrive at the diagnosis you mentioned in 1.1, giving the expected results. (20 marks)

1.3. Briefly outline the important steps in the management this child. (35 marks)

1.4. List three (03) recognized complications of the condition, mentioned in 1.1. (15 marks)

1.5. List four (04) preventive/public health measures you should practice as the medical officer managing this child. (20 marks)

2. A previously well 7 year old boy presented with low grade fever and generalized body weakness for 2 weeks duration. Except for an uncomplicated dental extraction 3 weeks back, he had no significant illness in the past.

On examination he is febrile and ill looking and noted to have a loud pan systolic murmur in the left lower sternal edge. He has a soft splenomegaly of 2 cm.

2.1. State the most likely diagnosis. (20 marks)

2.2. Mention four (04) investigations you would request at this stage with expected findings. (20 marks)

2.3. Briefly outline the principles of management of this boy. (30marks)

2.4. Mention five (05) complications of the condition mentioned in 2.1. (10 marks)

2.5. Briefly explain how this condition could have been prevented. (20 marks)

3. A 2 year old boy in his third relapse of nephrotic syndrome, is admitted to a paediatric ward. He has generalized oedema and ascites. While in the ward, he had vomited several times over night and refused dinner.

In your morning ward round, he complained of abdominal pain.

On examination, he has just palpable radial pulse at a rate of 110/minute, blood pressure is 60/45 mmHg. His abdomen is distended but not tender.

- 3.1. State the most likely cause for his abdominal pain. (20 marks)
- 3.2. State the other important clinical parameter that can be used to assess the circulatory status of this child. (10 marks)
- 3.3. Explain the pathophysiological basis for his abdominal pain. (30 marks)
- 3.4. Outline the management of this child at this stage. (25 marks)
- 3.5. Explain how this complication could have been prevented. (15 marks)

4. Neonatal sepsis is an important cause for neonatal mortality.

- 4.1. Define
- 4.1.1. early onset neonatal sepsis. (10 marks)
- 4.1.2. late onset neonatal sepsis. (10 marks)
- 4.2. List four (04) different types of infections classified under neonatal sepsis. (20 marks)
- 4.3. Outline the aetiological agents responsible for neonatal sepsis. (20 marks)
- 4.4. List five (05) important predisposing factors for Late onset Neonatal Sepsis. (15 marks)
- 4.5. Outline the principles of management of sepsis in a 2 week old baby delivered at 32 weeks of gestation. (25 marks)

5. Explain with reasons how you would handle the following clinical scenarios.
- 5.1. A mother of a 4 month old baby who is teacher in a government school, comes to you requesting a prescription for a formula milk as she is planning to restart working. (25 marks)
 - 5.2. Your neighbor brings her 6 year old daughter who is bitten by a stray dog. She has a bleeding wound over her right leg. (25 marks)
 - 5.3. Parents who have a 2 year old child with thalassemia major seeks your advice regarding having another child. (25 marks)
 - 5.4. A 6 year old boy who has been residing in Australia is brought to you for BCG vaccination. (25 marks)