

III Professional MBBS Part II Degree Regular/Supplementary Examinations May 2025

Pediatrics and Neonatology (2019 Scheme)

- Answer all questions to the point neatly and legibly Do not leave any blank pages between answers
- Indicate the question number correctly for the answer in the margin space
- Answer all parts of a single question together Leave sufficient space between answers
- Draw table/diagrams/flow charts wherever necessary

1.	Multi	ole	Choice	Questions
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(20x1=20)

The MCQ questions (Q.No. i to Q.No. xx) shall be written in the space provided for answering MCQ questions at page No. 51 of the answer book (the inner portion of the back cover page (PART III)).

Responses for MCQs marked in any other part/page of the answer book will not be valued

Question numbers i-v case scenario-based questions

A 7 years old boy is brought with history of swelling of the legs and altered colour of urine. On examination there is oliguria and he is hypertensive. Answer the following questions.

- i. The first choice of antihypertensive in this condition is
 - a) Calcium channel blocker
- b) Vasodilators
- c) Diuretics
- d) Betablockers

- ii. Normal C3 levels are seen in
 - a) PSGN

- b) SLE Nephritis
- c) MPGN
- d) IgA Nephropathy
- iii. All of the following are indicated in the treatment of the child **EXCEPT**
 - a) Frusemide
- b) Prednisolone
- c) Antibiotics
- d) Fluid restriction

- iv. The following are indications for renal biopsy in AGN EXCEPT
 - a) Normal complement levels

- c) Presence of skin rash and joint pain d) Low C3 levels beyond 12 weeks
- b) Microscopic hematuria persisting for 3 months
- v. The following is a feature of non-glomerular hematuria a) Painless hematuria
 - b) Cola colored urine

- c) Absence of red cell casts
- d) Presence of edema

Question numbers vi-x consist of two statements - Assertion (A) and Reason (R). Answer these questions by selecting the appropriate options given below.

vi. **Assertion (A):** Physiologic variants of short stature includes familial short stature and constitutional delay

Reason (R): In familial short stature, bone age is delayed

- a) Both A & R are correct, and R is correct explanation of A
- c) A is correct; R is incorrect
- b) Both A & R are correct, and R is not correct explanation of A
- d) A is incorrect; R is correct
- vii. **Assertion (A):** The cut off for neonatal hypoglycemia is < 54mg%

Reason (R): SGA babies are more prone for hypoglycemia

- a) Both A & R are correct, and R is correct explanation of A
- c) A is correct; R is incorrect
- b) Both A & R are correct, and R is not correct explanation of A
- d) A is incorrect; R is correct
- viii. **Assertion (A):** Airway obstruction in Asthma is characterized by inflammation of the airway mucosa **Reason (R):** Inhaled steroids along with salbutamol should be given even for reliever therapy.
 - a) Both A & R are correct, and R is correct explanation of A
- c) A is correct; R is incorrect
- b) Both A & R are correct, and R is not correct explanation of A
- d) A is incorrect; R is correct
- ix. **Assertion (A):** Children with congenital heart disease, left to right shunt lesions present with CHF at 6-8 weeks of life

Reason (R): Pulmonary arterial pressures reach a nadir by 6-8 weeks of life

- a) Both A & R are correct, and R is correct explanation of A
- c) A is correct; R is incorrect
- b) Both A & R are correct, and R is not correct explanation of A
- d) A is incorrect; R is correct
- x. **Assertion (A):** Children with down syndrome have 15 -20 fold higher risk of acute leukemia **Reason (R):** Endocardial cushion defects are more common in children with Down syndrome.
 - a) Both A & R are correct, and R is correct explanation of A
- c) A is correct; R is incorrect
- b) Both A & R are correct, and R is not correct explanation of A d) A is incorrect; R is correct useful numbers xi xy are multiple response type questions. Read the statements & mark the
- Question numbers xi-xv are multiple-response type questions. Read the statements & mark the answers appropriately.
- xi. Laws of development include
 - 1) The order of development is cephalo-caudal 2) The order of development is proximal to distal
 - 3) Development is a continuous and orderly process
 - 4) The growth of lymphoid tissue is most notable during the pubertal period
 - a) 1 and 2 are correct

- c) 1, 2 and 3 are correct
- b) 2 and 4 are correct
- d) 1, 2, 3 and 4 are correct

xii. Major criteria in NADAS' criteria include Firth Abriomal S2 2) Diastolic murmur a) 1 and 2 are correct	irotDankar aam	unu EiretDenker eem				
First Abnormal S2 2) Diastolic murmur	3) Systolic murmur grade 2	ww.FirstRanker.com 4) CCF				
,	, ,					
b) 2 and 4 are correct	d) 1, 2, 3 and 4 are correct					
xiii. The following are examples of lower motor no		robrol polov				
 Spinal muscular atrophy 2) GBS a) 1 and 2 are correct 	3) Poliomyelitis 4) Ce c) 1, 2 and 3 are correct	rebral palsy				
b) 2 and 4 are correct	d) 1, 2, 3 and 4 are correct					
xiv. The following are criteria for Kawasaki diseas						
1) Bilateral non-purulent conjunctival injection		sh				
3) Unilateral cervical lymphadenopathy	4) Fever lasting for a	t least 5 days				
a) 1 and 2 are correct	c) 1, 2 and 3 are correct					
b) 2 and 4 are correct	d) 1, 2, 3 and 4 are correct					
xv. The following are present in Measles 1) Koplik spots 2) Coryza	3) Poth spots 4) En	stoin noarls				
 Koplik spots Coryza a) 1 and 2 are correct 	3) Roth spots 4) Eps c) 1, 2 and 3 are correct	stein pearls				
b) 2 and 4 are correct	d) 1, 2, 3 and 4 are correct					
Question numbers xvi-xx are single-response ty	•					
xvi. The first sign of puberty in girls is						
a) Pubarche b) Menarche	c) Thelarche	d) Change in voice				
xvii. Stridor in a child can be caused by all of the f						
a) Cystic fibrosis b) Croup	c) Foreign body	d) Epiglottitis				
xviii. The following vaccines can be frozen except a) OPV b) Measles	a) Hanatitia P	4/ BCC				
xix. Hypertension is defined as average SBP and	c) Hepatitis-B	d) BCG				
	c) > 99 th centile	d) > 95 th centile				
xx. The following is NOT seen in Klinefelter's syr		u, 00 00mm				
a) Small testes b) Learning difficulty	c) Short stature	d) Gynaecomastia				
Long Essays:		(2x10=20)				
2. Two year old child presents with gait abnorma		th duration. On examination				
has severe pallor and hyper pigmented knuckl	es.					
a) What is the diagnosisb) What are the peripheral smear findings	2					
c) Laboratory investigations in a child with						
d) Treatment of this condition						
3. e) National anemia control programme	. (8)	(1+2+2+2+3)				
A preterm baby has respiratory distress immediately after birth and is admitted in NICU for further						
management. Answer the following questions.						
a) What is the most possible diagnosis	in a page at a both term and	aratarm				
b) List Four causes of respiratory distressc) Give a brief outline on the managemen		preterm				
d) How to prevent the present condition	t of the baby					
e) What are the other complications in a p	reterm baby	(1+2+2+2+3)				
Short Essays:	,	(6x6=36)				
4. A 6 years old child is brought with history of no		ns. Write Six causes of short				
stature in children and approach to short stature.						
5. Describe the clinical features, biochemical and	I radiological findings of Ricke	ets. Treatment of Vitamin D				
deficiency Rickets.6. Describe the clinical features and classification	of Dengue fever. Give an o	Itline on the management of				
Dengue shock in children.	To Deligue level. Give all of	dune on the management of				
 Describe the clinical features and diagnosis of 	Down syndrome. Add a note	on antenatal diagnosis.				
8. Describe the etiopathogenesis, clinical feature						
children.	G	, ,				
9. What are the FOUR pillars of medical ethics.	Explain with examples with re					
Short Answers:		(6x4=24)				
10. Write short note on MCP card and growth chart.11. Write short note on a) Adolescent friendly health services b) POCSO Act						
12. Define the criteria for Severe acute malnutrition and list the complications.						
12. Define the chiefla for Severe acute maintiffion and list the complications. 13. What are the clinical features of intussuception in children. Briefly discuss the investigation and						
management of intussuception.						
14. Name Three components and Three advantages of Kangaroo Mother Care (KMC).						
15. Write differential diagnosis for Acute Flaccid P	aralysis (AFP) in children and	add a note on AFP				
surveillance.	*****					
