Pediatrics

Paper-I

Time: Three Hours Maximum Marks: 100

Section-A

Q.1 Fill in the blanks:

envenomation?

a.	Commonest bacterial cause of Sepsis in anconate with Galactosemia is
b.	Multidrug-resistant tuberculosis (MDR TB) that is resistant to isoniazid, rifampin, a
	fuoroquinolone, and a second-lne injectable drug is labelled as
C.	What is the approximate age in months of a child who can stand without support, has
	object permanence, speaks mama and dada with meaning?
d.	Which coagulation factor is the first to be affected in Vitamin K deficiency syndrome
e.	What is the Alpha Adrenergic blocker drug used in the management of Scorpion Sting

characterized by onset between birth to 3

f. Congenital Nephrotic Syndrome is

- **Q.2** Choose the most appropriate answer for the following (Select only one most appropriate option):
- a. Perceptions of body image earliest develop during this period:
 - i. Middle Childhood
 - ii. Preschool years
 - iii. Adolescence
 - iv. Second year
- b. Warthin Finkelley Giant cells seen in pathologic samples of ling biopsies are pathognomonic of which infection?
 - i. Mycobacterium Tuberculosis
 - ii. Measles
 - iii. Coronavirus
 - iv. Staphylococcus Aureus
- c. Elevated levels of Succinylacetone on Gas Chromatography-Mass Spectroscopy is seen in which of the following condition:
 - i. Diabetic Ketoacidosis
 - ii. Tyrosinemia
 - iii. Cori-Anderson Disease
 - iv. Phenylketonuria
- d. What is the compression to ventilation reto for 2 rescuer CPR in children?
 - i. 15:2
 - ii. 30:2



iv. 30:1

- **Q.3** A 35 week term neonate is bom to a primigivida mother by LSCS due to maternal eclampsia with vertex presentation as depresed, has meconium stained liquor with birth weight of 3.1 kg. For this neonate, proade:
- a. Resuscitation steps as per NRP guidelines
- Temperature range and duration of Therapeutic hypotherrnin
- c. Laboratory diagnosis of Perinatal Asphyxia
- d. Prognosis if this neonate develops HIB stage III (Sarnat and Sarmat)
- e. Types of cerebral palsies that can occur in future
 - Q.4 Write short notes on (any five):
- a. Cyberbullying
- b. Acute life threatening complications of malnutrition
- c. Oral Iron therapy in a 3 year old male child with IDA and Hb 7.5 gm/dl
- d. Diphtheritic Polyneuropathy
- e. High flow oxygen devices
- f. Extracorporeal membrane oxygenation
- **Q.5** Enumerate common causes of (any three):



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- b. Acute Bronchiolitis in infants
- c. Hyponatremia in critically ill children
- Heart faikire presenting immediately within 24 hours of life

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- **Q.1** Describe etiologic approach for Acute Encephalopathy Syndrome in children aged 2 to 18 year old. Outline management of Herpes Viral encephalitis in a 4 year old male child.
- Q.2 Short notes on (any 5):
- a. Enumerate Vaccines to be given from birth to 3 1/2 months as per National Immunization schedule
- Enlist major causes of neonatal deaths in Inda as per their frequency
- c. Fhid and electrolyte therapy plan for a 15 kg child with Diabetic Ketoacidosis
- d. DSM VR criteria for Autistic Spectrum disorder
- e. Enlist common causes of red urine in children
- f. Enumerate treatment options with mechanism/ratsonale for Idxopathic Thrombocytopenic purpura
- **Q.3** Briefly mention mechanism of the following:
- a. Low Osmolality Oral rehydration sokition an some dehydration
- b. Continuous Positive Airway pressure in management of RDS in preterm neonates.
- c. Ketogenic diet in Refractory epilepsy
- d. 3% Nomal saline infusion management of

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