PEDIATRICS

6TH- FINAL

Doctor 2020

Special thank to 👏🏻

Dua’a Almashamsheh
Lana Khabbas
Haitham Alsaifi
Rahaf Turab
Farah Habash
Laith Sami
Ahmad Riyad
Salah Mustafa
Abdulrahman Froukh
Noor Ashraf
Fawzi Qadoomi
Ahmad Bayadreh
Ahmad Qatawneh
Mahmoud Tafish
Yasmeen Othman
Jaafar Mansour
Mohammad Sameer
Anas Khraim
Abdulkareem Rayyan

And all who helped on the post

1. **7 year old female presented with pubic hair growth and no breast development most likely cause:**
    A. Central precocious puberty
    B. Delayed puberty
    C. Turner syndrome
    D. Puberty Normal for her age
    E. Premature adrenarche

    Answer: E

2. **Child with low grade fever then developed red cheeks and lacy reticular rash on trunk:**
    A. Rubella
    B. Rubeola
    C. HHV-6
    D. Parvovirus b19

    Answer: D

3. **Child with sickle cell anemia presented with fatigue hb 4, Reticulocyts 0%, platelets 200k, and her jaundice became less prominent, which of the following could be found :**
    A. Splenomegaly
    B. Positive parvo PCR in blood.
    C. elevated bilirubin

    Answer: B

4. **Child with tachypnea, cyanosis, did not respond to oxygen therapy, hepatomegaly, chest radiography showed widened silhouette and egg on a string appearance, what is the next step:**
    A. IV indomethacin
    B. PGE1
    C. Observation
    D. IV Antibiotics
    E. Diuretics

    Answer: B

5. **A 13 year old male came with distal femur swelling associated with pain that wakes him up at night. Imaging shows sunburst appearance.What is the most likely diagnosis?**
    A. Osteosarcoma
    B. Ewing Sarcoma

    Answer: A

6. **Mass on scapula , low grade fever and weight loss , onion skin appearance**
    A. Ewing sarcoma
    B. Ostesarcoma
    C. Osteomyelitis

Answer: A

7. **Skips obstacles ,can name 4 colors, can count 10 objects , Developmental age:**
    A. 2 years
    B. 3 years
    C. 4 years
    D. 5 years
    E. 6 years

Answer: D

8. **At what age does the newborn regain his/her birthweight:**
    A. 1 week
    B. 2 weeks
    C. 3 weeks
    D. 4 weeks
    E. 5 weeks

Answer: B

9. **Unbutton clothes and draws a cross**
    A. 2 years
    B. 3 years
    C. 4 years
    D. 5 years

Answer: C

10. **7 year old male came with Secondary enuresis for 2 months, there is no frequency,urgency or day time wetting , best next step**
    A. Bed wetting alarm
    B. behavioral therapy
    C. Desmopressin
    D. Tricyclic antidepressants
    E. Anticholinergics

Answer: B

11. **An infant who missed his vaccination schedule completely, which of the following vaccines cannot be part of the follow up schedule**
    A. MMR
    B. Polio
    C. Rota

D. Pnuemococcal

Answer: C

12. Child with central adrenal insufficiency , best long term treatment is:

A. Hydrocortisone
B. Prednisone
C. Dexamethasone
D. Methylprednisolone
E. Fludricortisone

Answer: A

13. Case of opsoclonus myoclonus ataxia syndrome, you suspect which one of the following tumors:

A. Medulloblastoma
B. Neuroblastoma
C. Wilms tumor

Answer: B

14. Case of Burkett lymphoma , not to do

A. Potassium free fluid
B. Close monitoring of urine output
C. Start allpurinol
D. Restrict fluids
E. Monitor electrolytes

Answer: D

15. Painless cervical lymphadenopathy , one 2.5 cm , a chest xray showed mediastinal mass , biopsy showed Reed sturberg cells , Dx

A. ALL
B. Hodgkin lymphoma
C. Burkitts lymphoma
D. Diffuse large B cell

Answer: B

16. Which of the following is the least to be eliminated by alcohol (hand rub is ineffective):

A. Hepatitis A
B. C.difficle
C. Norovirus
D. Salmonella typhi

Answer: B

17. Cystic Fibrosis patient came with acute onset respiratory distress, decreased air entry on the right side, right sided hyper resonance on percussion,and tracheal shift to the left, what is your diagnosis:

A. Pneumothorax
B. Pneumotocele
C. Pneumonia

Answer: A

18. 10 years old with signs of severe pneumonia? what antibiotics should you give:

A. Cef+ vanco+ azithro
B. Vanco alone
C. Ceftriaxone alone

Answer: A

19. What is true about Fever of Unknown Origin (FUO) in pediatrics:

A. Fever persists for more than 2 weeks
B. Should use antipyritcs with every fever spike
C. Should do blood culture every time the fever breaks
D. Most commonly it is an atypical presentation of a common disease .
E. Absence of fever and chills indicate benign condition

Answer: D

20. Arching of the back, dystonic posturing of the limbs with feeding and GERD , diagnosis:

A. infantile spasm
B. Sandfier syndrome

Answer: B

21. Which of the following is used to monitor dietary compliance in patients with celiac disease:

A. Anti gliadin antibodies
B. Anti TTG IgA
C. Fecal calprotectin
D. Fecal elastase
E. Albumin

Answer: B

22. Which of the following vaccine causes T cell independent response :

A. Pneumococcal polysaccaride
B. Rotavirus

C. Measles

Answer: A

23. Which of the following is a whole killed inactivated vaccine:

A. Hepatitis A
B. Hepatitis B
C. Acellular pertussis
D. Varicella
E. Pneumococcal

Answer: A

24. Case of intussusception , next step

A. Colonoscopy
B. Air enema
C. CT
D. Upper GI serial series

Answer : B

25. Newborn screening , high TSH , low T4 , repeat studies after 14 days shows very high TSH and low free T4 , US shows normal thyroid gland location , most likely cause

A. Prematurity
B. Dyshormonogeneis
C. Agenesis
D. Maternal usage of Levothyroxine

Answer: B

26. A patient comes to the ER by his friend due to severe nausea and vomiting, his Na =125, K= 2.6, and the measured urine Na was 60, which of the following is the cause:

A. Addison's disease
B. SIADH
C. Renal salt wasting
D. Gastroenteritis

Answer: C

27. Multiple rough hyperkeratotic irregular lesions on fingers , toes and genital areas in older individuals , diagnosis

A. Warts
B. Eczema
C. Psoriasis

Answer: A

28. 15 year old has jerky (Shock like) arm movements upon awaking exacerbated by sleep deprivation , first line management:

A. Carbamazepine
B. Ethosuximide
C. Valproate
D. levetiracetam

Answer: C

29. Which drug can slow the ventricular remodeling in heart failure

A. Furosemide
B. ACE inhibitors
C. Digoxin

Answer: B

30. Which of the following is not seen in Noonan syndrome:

A. Webbed neck
B. Ptosis
C. Bleeding tendency
D. Short stature
E. Supravalvular stenosis

Answer: E

31. A patient comes to the ER with severe vomiting his sodium level was 170 and started on IV fluids and the repeated sodium level was 160 within one hour from starting the fluids, he suddenly developed a seizure, what is the diagnosis?

A. Cerebral edema
B. Cerebral hemorrhage
C. Central pontine myelinolysis

Answer: A

32. A patients comes to the ER complaining from abdominal pain, N/V and you diagnose him with DKA, during the management the glucose drop to 220 , but still has acidosis , what is the best thing to do?

A. Stop insulin infusion
B. Sodium bicarbonate
C. Add dextrose to fluids
D. Stop fluids

Answer: C

33. Case of ALL with fatigue , ... the electrolyte disturbance will be

A. High PO4 , high uric acid , high K , low Ca
B. High PO4 , high uric acid , high K , High Ca
C. Normal PO4, normal uric acid, normal Ca
D. Normal electrolytes

Answer: A

34. A child with low school performance,large ears prominent jaw,there are other members in the paternal family side have the same condition test of choice:

A. Karyotype
B. FISH
C. Genetic testing for FMR1 gene
D. Whole genome sequence
E. Deletion on chromosome 7

Answer: C

35. Not anti pseudomonas antibiotic

A. Etrapenem
B. Meropenem
C. Ceftizidme
D. Cefapime
E. Pipercillin tazobactam

Answer: A

36. True about iron deficiency anemia:

A. Incidence less than 5% in svhool age children children
B. Normocytic normochromic anemia
C. It can be the presenting symptom of celiac disease

Answer: C

37. A child presented with palpitations, heart rate 210, BP 101/82 ECG showed narrow complex tachycardia with absent P wave, best treatment:

A. IV adenosine
B. Synchronized DC shock
C. Amiodarone

Answer: A

38. A child with history of epilepsy presented with tonic-clonic generalized seizure for > 10 minutes , first line of treatment is:

A. IV Benzodiazepines
B. IV Phenobarbital
C. IV Levetericetam
D. IV Valproate

Answer: A

39. Child with cystic fibrosis came with chronic cough and runny nose for 3 months duration, what is your diagnosis:

A. Allergic rhinitis
B. Chronic sinusitis
C. Acute URTI
D. Nasal polyps only

Answer:B

40. The most common cause of spontaneous bacterial peritonitis in a child with Nephrotic Syndrome:

A. Streptococcus pneumoniae
B. Staph aureus
C. E coli
D. klebsiella

Answer: A

41. Case of child with gluteal hematoma with similar presentations in the past and family hx in maternal uncles but not aunts, what is true:

A. Prolonged PTT
B. factor IV difficency
C. Prolonged bleeding time
D. Prolonged PT

Answer:A

42. Child presented with seizure and lethargy,he had subdural hematoma and retinal hemorrhage , most common mechanism :

A. Rotational Acceleration decceleration injury
B. Birth trauma
C. Ischemic hypoxic injury
D. Metabolic disorder
E. Direct skull fracture

Answer: A

43. Child in ER , RTA , lethargic,cap refill 5 sec , normal BP , Tachycardia 180 , distended abdomen ,which of the following is the type of shock?

A. Neurogenic (due to spinal cord injury)

B. Cardiogenic (due to myocardial contusion)
C. Distributive (due to initiation of inflammatory response)
D. Hypovolemic (due to internal bleeding)
E. Obstructive (due to tension pneumothorax)

Answer: D

44. Apnea of prematurity best treatment :

A. Caffeine citrate
B. High flow nasal canula
C. Surfactant
D. Mechanical ventilation

Answer: A

45. Recurrent infections with staph aureus and serratia , mechanism

A. Disrupted oxidative burst
B. Absent B cells
C. Abnormal T-Cells
D. Complement deficiency

Answer: A

46. A child with history of asthma, he is on low dose inhaled corticosteroid, still he has excaserbations more than 2 days a week, and awaken from sleep, what should you add to his regimen:

A. Switch to high dose corticosteroids
B. Add LABA.
C. Add theophylline
D. Stop ICS and Switch to SABA alone

Answer: B

47. What causes the preterm to lose heat and develop hypothermiamore than term neonates:

A. High surface area to body mass ratio
B. Poorly developed shivering mechanism
C. High brown fat content

Answer: A

48. Child 7 years , height below 3rd percentile, he was in the same percentile his whole life, bone age correlates with his chronological age ,growth rate is normal, mid parental height 165 , diagnosis :

A. Growth hormone deficiency

B. Familial short stature
C. Hypothyroidism

Answer: B

49. A child presented with Hepatitis A infection, his ALT and AST were >1000, with jaundice, normal INR, normal mental status, he is stable and can tolerate oral intake, how would you manage him:

A. Outpatient follow up
B. Admit for fluid Resuscitation
C. Lactulose for 4 days
D. Start Ribavirin

Answer: A

50. A case of TOF, Squat improve tet spells by

A. Increase SVR
B. Decrease pulmonary vascular resistance
C. Decrease preload
D. Decrease Right ventricle contractility

Answer: A

51. Severe dehydration case (cap refill 5 sec,lethargy) , given 2 boluses normalize capillary refill, weight 10 kg , calculate fluid requirements for 24 hours

A. 2000 ml .45% saline with dextrose
B. 1000 ml .45% saline with dextrose
C. 1700 ml .45% saline with dextrose

Answer: A

52. Which of the following is not seen in neonates

A. Head sag on ventral suspension
B. Prefer human face
C. Move head side to side
D. Doll's eye
E. Open hand spontaneously

Answer: E

53. A sign of LMN lesion

A. Hyporeflexia
B. Spasticity
C. Hypertonia

Answer: A

54. NOT in scarlet fever:

A. Nasal congestion and cough
B. Headache
C. Fever of 38.3
D. Poor intake
E. Body aches

Answer: A

55. Which of the following is an Indication for kidney biopsy in nephrotic syndrome:

A. Family history of steroid sensitive nephrotic
B. Age 1-6 years
C. Microscopic hematuria
D. Steroid resistance

Answer: D

56. Few days after URTI , recurrent hematuria, 2+ protein and loin pain, diagnosis

A. IgA nephropathy
B. PSGN
C. Hypercalcuria

Answer: A

57. Vomiting , increased BUN to creatinine ratio , low Na , high osmolarity , cause of AKI

A. ATN
B. Dehydration
C. Tubulointerstitial nephritis
D. Obstructive uropathy

Answer: B

58. Which of the following is Not an indication for varicella prophylaxis IVIG :

A. Premature baby to mother with unknown immunity for varicella
B. Healthy toddler exposed to child with varicella
C. Immunocompromised.
D. It can be given within 4 days.

Answer: B

59. The single proven method to improve growth in IBD patients:

A. High dose of steroid
B. Exclusive enteral feeding
C. Parenteral nutrition
D. Zinc supplements alone
E. Probiotics

Answer: B

60. A 2 year old child with Chronic diarrhoea , FTT , low elastase, next step:

A. Colonoscopy
B. Small Bowel biopsy
C. Start Pancreatic enzymes replacement
D. Abdominal ultrasound
E. Elimination diet immediately

Answer: C

61. 14 year old boy with hypertension and decreased femoral pulse and radiofemoral delay, the best confirmatory test :

A. CT angiography
B. Chest radiograph
C. Electrocardiogram

Answer: A

62. 14 year old female athlete presented with 4 week left lumbar back pain that worsens with exercise and improves with rest,no fever or weight loss,examination shows mild left paraspinal tenderness,normal hip range of motion,negative straight leg raise normal modified schober test ,what is the next step:

A. Physical therapy
B. Referral to rheumatologist
C. HLA-B27 test
D. MRI

Answer: A

63. Which of the following present with prolonged aPTT and it does correct with1:1 Mixing study

A. Factor Xl deficiency
B. Lupus anticoagulant
C. Heparin effect
D. Factor Vll defeciency
E. Anticardiolipin

Answer: A

64. Not a Lysosomal storage disease

A. Zellweger syndrome
B. Mucopolysaccharidosis
C. Gaucher disease
D. Metachromatic leukodystrophy
E. Fabry disease

Answer: A

65. Not in neurofibromatosis 1

A. Optic glioma
B. Cafe lait spots
C. Lish nodules
D. Axillary freckling
E. Vestibular shwanoma

Answer: E

66. Mechanism of heart failure in large VSD

A. left to right shunt with pulmonary overflow.
B. Decrease pulmonary venous return

Answer: A

67. Child previously healthy with history of 2 days of flank pain and hematuria , UA shows numerous RBCs and +1 protein , all of the following tests reliable except

A. 24 hour collection of oxalate
B. Calcium to creatinine ratio
C. Renal US
D. Complement factors
E. Urine culture

Answer : D

68. Case of fever, hepatosplenomegaly , lymphadenopathy , enlarged exudative tonsils , Most likely pathogen is:

A. EBV
B. Rhinovirus
C. Influenza

Answer: A

69. All of the following regarding spinal muscular atrophy are true except:

A. It is inherited by Autosomal dominant pattern.
B. Hypotonia.
C. Areflexia
D. Can be diagnosed perinatally

Answer: A

70. A patient is being evaluated after he fell from the 3rd floor and developed basal skull fracture, he develops fever, which of the following is a physical exam finding to differentiate between post traumatic meningitis over post concussive syndrome:

A. persistent nausea with one episode of vomiting
B. Photophobia with mild headaches
C. General body aches and fatigue

D. Clear watery fluid (CSF) leakage from the nose
E. Echymosis behind ears

Answer: D

71. Case of Eosinophilic esophagitis, what is the best next step in management:

A. Swallowed Topical steroids
B. PPI trial
C. Elimination diet immediately.
D. Skin brick test

Answer: B or C?

72. A child with Height descending 2 major percentiles but still above 3rd percentile what is the best recommendation:

A. This is an early sign of delayed growth.
B. Normal growth.
C. Reassure that this is normal in childhood

Answer: A

73. A 10 months old child how is exclusively breast fed, presents with widening of the wrists, frontal bossing, Rachitic rosary, labs showed normal Ca and low phospahte PO4 and elevated PTH and ALP, what is the diagnosis:

A. Vit D deficient rickets.
B. Hypophosphatemic rickets
C. Hyperparathyroidism.
D. Renal Osteodystrophy
E. Pseudohypoparathyroidism

Answer: A

74. A patient who has AKI and hyperkalemia, which of the following can be used to remove potassium from the body:

A. sodium bicarbonate
B. Insulin and glucose
C. Sodium polystyrene sulfonate
D. Nebulized sulbutamol
E. Ca gluconate

Answer: C

75. UMN lesion case, location

A. Peripheral nerve
B. Anterior horn
C. Neuromuscular junction
D. Cerebral cortex

Answer: D

76. Autism; all of the following are part of the diagnostic criteria except:

A. Deficit in social communication.
B. Repetitive and restricted behaviors.
C. Onset before 4 years of age.
D. Increased or decreased sensory hypersensitivity.

Answer: C

77. Differentiate acute flaccid myelitis from GBS

A. Hypotonia
B. Absent deep tendon reflexes
C. After viral infection
D. Affects gray matter

Answer: D

78. Multiple DIP joint pain and swelling , nail bitting , what is the rash that is associated with the disease?

A. Vesicular rash
B. Erythreomatous plaques with silver scaling

Answer: B

79. Patient with eczema , complains acutely from increasing itching and honey colored crusted lesions , treatment

A. Topical antibiotics and continue eczema treatment
B. High dose corticosteroids

Answer: A

80. 10 months exclusive breast feeding , most common deficiency

A. Vitamin C
B. Protein
C. Iron
D. Zinc

Answer: C

81. Jaundice in first 8 houres , most likely cause

A. Hemolytic disease of the newborn
B. Biliary atresia
C. Breast feeding Jaundice
D. Physiological jaundice

Answer: A

82. Newborn with tachycardia, impaired feeding and hepatomegaly. What is the most common cause of heart failure in infants?

A. Dilated cardiomyopathy
B. Congenital left to right shunt
C. Myocarditis
D. Congenital infection

Answer: B

83. Hyperammonemia can be caused by all of the following except:

A. Fatty acid oxidation
B. Classic Phenylketonuria
C. Organic acidemia
D. Urea cycle disorders
E. Disorders of pyruvate metabolism

Answer: B

84. Case of meningitis , you can do LP safely in which of the following case:

A. Pustular rash over lower back
B. Hemodynamic instability in patient on epinephrine
C. New focal neurological deficit
D. Papilledema
E. Generalized maculopapular rash on trunk and extremities with normal platelet count

Answer: E

85. Which of the following is diagnostic for UTI

A. Catheter 70000 E. coli
B. Catheter 20000 mixed flora
C. Urine bag 70000 E coli

Answer: A

86. Wheeze/asthma exacerbation and oxygen saturation of 91%, the immediate first step is:

A. Administer oxygen
B. IV Salbutamol
C. Inhaled Salbutamol
D. Systemic steroids

Answer : A

87. 2 years old with stridor , fever , toxic appearance , preceded by a viral illness , normal voice , he has now excessive secretions and respiratory distress not responding to epinephrine nebulizers, next step:

A. IV antibiotics and supportive
B. Oral antibiotics
C. Reassurance
D. Airway visualization
E. Steroid

Answer: A? D?

88. Case of ITP , PL 10,000 , next step?

A. Retuximab
B. Platelet transfusion
C. Steroids
D. Splenectomy

Answer: C

89. Associated with bronchial asthma

A. Improvement 12% or more in FEV1 after bronchdilator
B. Peak variation 10
C. FEV1 / FVC =0.9

Answer: A

90. Wrong about overactive bladder

A. Associated with constipation
B. Daytime frequency and wetting
C. Recurrent UTI
D. High post void residual volume
E. Decreased bladder capacity

Answer: D

91. Best intervention to decrease neonatal GBS disease

A. Antibiotics prophylaxis during pregnancy for all patients
B. Intrapartam Antibiotics for GBS colonized women
C. C/S for all GBS positive women
D. Vaccination

Answer: B

92. Wrong about ADHD :

A. first line medications are psychostimulants
B. Behavioral therapy usually effective alone
C. Drugs not always enough
D. Neuroimaging not mandatory before starting Treatment

E. ECG and echo should be done before treatment if there is family history of arrhythmia , palpitations

Answer: B

93. Most common cause of late onset neonatal sepsis in NICU patient

A. Strep A
B. Strep B
C. Coagulase negative staph
D. E.coli
E. Lesteria

Answer: C

94. Which of the following is not part of ADHD criteria:

A. Start before age 18
B. Impairment in 2 different settings
C. Hyperactivity.
D. Impulsivity
E. Inattention

Answer A

95. Dermatitis, hair loss, perioral ulcers, deficiency in which of the following:

A. Iron
B. Zinc
C. B12

Answer: B

96. 6 month boy with hypotonia, Which is not present

A. Fasciculation
B. Hand fist
C. Head lag

Answer: B

97. Recurrent infection, no immunoglobulin and lack of B cells?

A. Impaired B cell maturation
B. T cell apoptosis
C. Complement deficiency

Answer: A

98. Child with polyuria , polydiosia , weight loss , well hydrated , random glucose 350 , fasting 150 , next step

A. Order HbA1c
B. Diagnosis with DM and start insulin
C. Start oral hypoglycemic agent

Answer: B

99. Case of Septic Shock , best next step?

A. Fluid Bolus 20cc/kg
B. don't Do anything before monitor BP with Arterial line
C. Start mantainance Fluid according to Holliday-Segar formula

Answer : A

100. Child who has itchy eyes and nose in the spring, complaining of clear rhinorrhea for the past several months, on examination the nasal mucosa appears pale and boggy, which of the following is the most appropriate treatment?

A. Oral Antihistamines
B. Intranasal steroids
C. Oral Antibiotics
D. Systemic steroids

Answer: B