

10. NEONATOLOGY :

1. Commonest cause of fits in Neonate of a Diabetic

Mother is:

- a. Hypomagnesemia
- b. Hyponatremia
- c. Hypokalemia
- d. Hypoglycemia
- e. Hypertension

2. Neonatal jaundice appearing in 1st 24 hours of birth is always:

- a. Haemolytic
- b. Physiological
- c. Obstructive
- d. Idiopathic
- e. None of the above

3. A 5 weeks old breast fed baby whose birth weight was 3.5 kg and is now 4.5 kg is thriving well but is deeply jaundiced. What is the most likely diagnosis?

- a. Galactosemia
- b. Breast milk jaundice
- c. Thalassemia
- d. Sickle cell disease
- e. Congenital storage disorder

4. A 3 days term, breast-fed infant is brought by the mother who reports that the child has not been active and not feeding well. She also notices jaundice, which was not present at birth and is increasing. Exam: the temp=35.4°C, and the liver is palpable 2 cm below the costal margin. Which is the most likely diagnosis?

- a. Rhesus isoimmunisation
- b. Inadequate breast milk
- c. Congenital biliary tract obstruction
- d. Sepsis
- e. Physiologic jaundice

5. A newborn that is electively intubated at birth and is due for surgery 48 hours after birth. The condition was suspected on antenatal ultrasound and chest X-ray. What is the most likely diagnosis?

- a. Cystic fibrosis
- b. Congenital diaphragmatic hernia
- c. Congenital cystic adenomatoid malformation

- d. Respiratory distress syndrome
- e. Alpha 1 antitrypsin deficiency

6. What is the most common presentation in the new born if the mother is having TORCH Infection?

- a. Cleft lip and cleft palate
- b. Limb abnormalities
- c. Meningomyelocele
- d. Microcephaly with intracerebral calcifications
- e. Ventricular Septal Defect

7. An infant is born to a woman who has received very little prenatal care. The mother is anxious, complains of heat intolerance and fatigue, and reports that baby has not gained much weight despite having an increased appetite. On examination the mother is tachycardiac, has a tremor, and has fullness in her neck and in her eyes. The infant is most likely at risk for development of which of the following?

- a. Constipation
- b. Heart failure
- c. Macrocephaly
- d. Third-degree heart block
- e. Thrombocytosis

8. The following parameters are part of the APGAR scoring system EXCEPT:

- a. Heart rate
- b. Respiratory rate
- c. Color
- d. Moro' reflex
- e. Muscles tone

9. A newborn infant presents with cyanosis and mild tachypnea at about 6 hours of life. The infant is placed in 95% oxygen and saturations normalize. Which of the following is the most likely diagnosis in this Infant?

- a. Cyanotic congenital heart disease
- b. Lung disease
- c. Central nervous system disease
- d. Liver disease
- e. Methemoglobinemia

10. During Neonatal life the normal range of Heart Rate is:

- a. 120 to 160
- b. 100 to 140
- c. 160 to 200
- d. 90 to 120
- e. Less than 100

11. A 5 year old presented with high grade fever associated with a vesicular mostly on the chest and limbs. The most likely diagnosis is:

- a. Measles
- b. Roseola infantum
- c. Meningococcemia
- d. Varicella Zoster
- e. Drug reaction

12. What is the most common presentation in the newborn if the mother is having TORCH infection

- a. Cleft lip and cleft palate
- b. Limb abnormalities
- c. Meningomyelocele
- d. Microcephaly with intra cerebral calcification
- e. V.S.D.

13. A 2 days old baby born to a diabetic mother presents with fits. The most probable cause will be:

- a. Hypomagnessemia
- b. Hyponatremia
- c. Hypokalemia
- d. Hypoglycemia
- e. Hypertension

14. A term baby born to a 30 year old woman presented with jaundice in the first 24 hours of birth. One earlier sibling had also history of severe jaundice in the first few days of life. What is the most likely diagnosis?

- a. Hereditary Spherocytosis
- b. G6PD
- c. ABO incompatibility
- d. Rh incompatibility
- e. Physiological jaundice

15. A new born baby having 32 week POG presented within three hours with respiratory distress & Cyanosis. On examination baby was tachypnic and

there were subcostal & intercostal recessions.

What will be the most likely diagnosis?

- Congenital pneumonia
- Respiratory distress syndrome
- c. Meconium aspiration syndrome
- d. Early neonatal sepsis
- e. Transient tachypnea of new born

16. would be: An infant is born at 38 weeks gestation and weighs 2000gm. The most appropriate term for this baby

- a. Low birth weight
- b. Low birth weight and small for gestational age
- c. Premature
- d. Premature and small for gestational age
- e. Small for gestational age

17. In unconjugated hyperbilirubinemia, chances of kernicterus increases with the use of

- a. Ceftriaxone
- b. Phenobarbitone
- c. Ampicillin
- d. Sulphonamide
- e. Penicillin

18. Neonatal meningitis is mostly caused by

- a. E. Coli
- b. H. Infections
- c. Meningococcal
- d. Streptococcus pneumoniae
- e. Staphylococcus Aureus

19. Neonatal mortality rate is calculated as

- a. Number of deaths in 1st 28 days per 100 live births
- b. Number of deaths in 1st 40 days per 1000 live births
- c. Number of deaths in 1st 28 days per 1000 live births
- d. Number of deaths in 1st 07 days per 1000 live births
- e. Number of deaths in 1st 07 days per 100 live births

1.D	2.A	3.B	4.D	5.B
6.D	7.B	8.D	9.B	10.A
11.D	12.D	13.D	14.D	15.B
16.B	17.D	18.A	19.C	20.B

20. Surgery is not treatment of choice for the following except :-

- a. Cavernous haemangioma
- b. Neonatal inguinal hernia
- c. Small pneumatocele
- d. Umbilical hernia
- e. Tongue tie

C Vitamin D

d. Vitamin E

e. Vitamin K

21. What is the most effective way to prevent respiratory distress syndrome in a premature baby?

- a. Intubation and ventilation
- b. Antenatal steroids to mother
- c. Indomethacin
- d. Prostacyclin
- e. Incubator care

25. A male child, weight 4.2 kg, is admitted at age 3 weeks with a one week history of forceful vomiting after feeds. He is alert and eager for food but exhibits a loss of skin elasticity and has apparent distension in the left hypochondrium. Which of the following options is the most appropriate? The most likely diagnosis is a. partial thoracic stomach
b. He has hyperosmolar dehydration
c. Characteristically he will have hypokalaemia
d. Initial fluid replacement should comprise normal saline 10-20 ml/kg over one hour
e. He should be started on an anti-cholinergic e.g. atropine methyl nitrate 0.2 to 0.6 mg before feeds

22. Amniocentesis can lead to the prenatal diagnosis of all of the following except:

- a. severe thesus haemolytic disease
- b. meningocele
- cystic fibrosis
- d. anencephaly
- e. hyaline membrane disease

26. Neonatal jaundice appearing in 1st 24 hrs of birth is always
Hemolytic
Physiological
Obstructive
Idiopathic
Milk protein induced

23. A newborn baby with an Apgar score of 10 should exclude which of the following?

- a. be pink all over
- b. have a regular respiratory rate above 20 per minute
- c. have a heart rate about 70 per minute
- d. -cry when a catheter is placed in the nostril
- e. move all limbs actively

27. Following is not a cause of neonatal jaundice
a. G6 PD deficiency
b. Rh incompatibility
c. Cyanotic heart disease
d. Polycythemia
e. Cephalhematoma

24. A woman from IDPs camp at Bannu who had recently given birth to a new born boy with the aid of a midwife now brings her infant to the hospital because of continued bleeding & oozing from the umbilical stump it is likely that the bleeding problem is secondary to a deficiency of which of the following vitamins?

- a. Folic acid
- b. Vitamin A

28. Antenatal steroids are beneficial in
Gestational diabetes
b. Mother at risk of premature delivery
c. Polyhydramnios
d. Oligohydramnios
e. Congenital heart disease

29. During Neonatal life the normal range of Heart Rate is:

PEADS

- a. 120 to 160
- b. 100 to 140
- c. 160 to 200
- d. 90 to 120
- e. Less than 100

30. The most likely cause of Jaundice within the 1st 24 hours of life is:

- a. Hemolytic
- b. Physiologic
- c. Obstructive
- d. Idiopathic
- e. Breast milk induced

31. Risk of neonatal jaundice is increased

- a. Prematurity
- b. C. Section.
- c. Post Maturity
- d. Down's syndrome
- e. Turners syndrome

32. Commonest cause of fits in Neonate of a Diabetic Mother is:

- a. Hypomagnessemia
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- c. Hypokalemia
- d. Hypoglycemia
- e. Hypertension

33. Neonatal jaundice appearing in 1st 24 hours of birth is always:

- a. Haemolytic
- b. Physiological
- c. Obstructive
- d. Idiopathic
- e. None of above

34. A term baby born to a 30 years old woman of blood group A-ve develops severe jaundice within the first

24h of birth. What is the most likely diagnosis?

- a. Hereditary spherocytosis
- b. G6PD

- c. ABO incompatibility
- d. Rh incompatibility
- e. Physiological jaundice

35. A 7 days old baby whose birth weight was 3.5kg and now is 3kg. What is the most appropriate next step?

- a. Check child protection register
- b. Nutritional assessment
- c. Skeletal survey
- d. Continue regular child care
- e. Inform police

36. An 8 weeks old baby boy is noted to be jaundiced. He is breast-feeding well and has gained 300g since birth. His stools are yellow and his urine is pale straw colored. What is the most likely diagnosis?

- a. Galactosemia
- b. Biliary atresia
- c. G6PD deficiency
- d. Breast milk jaundice
- e. Congenital viral infection

37. A 5 weeks old breast fed baby whose birth weight was 3.5 kg and is now 4.5 kg is thriving well but is deeply jaundiced. What is the most likely diagnosis?

- a. Galactosemia
- b. Breast milk jaundice
- c. Thalassemia
- d. Sickle cell disease
- e. Congenital storage disorder

20.B	21.B	22.C	23.C	24.E	
25.D	26.A	27.C	28.B	29.A	30.A
31.A	32.D	33.A	34.D	35.D	36.A
37.B					