



**KISII UNIVERSITY**  
**UNIVERSITY EXAMINATIONS**

**SECOND YEAR EXAMINATION FOR THE AWARD OF THE**  
**DIPLOMA IN CLINICAL MEDICINE AND SURGERY**  
**THIRD SEMESTER 2022/2023**  
**[MAY-AUGUST, 2023]**

**CIMS 0243: CHILD HEALTH AND PEDIATRICS**

**STREAM: Y2S3**

**TIME: 2 HOURS**

**DAY: MONDAY, 9:00 – 12:00 PM**

**DATE: 31/07/2023**

**INSTRUCTIONS**

**1. Do not write anything on this question paper.**

**FROM QUESTION 1-15 MARK ONLY ONE CORRECT RESPONSE**

1. The usual site of bronchial obstruction is
  - (A) left bronchus because is shorter than righter
  - (B) left bronchus because is longer than righter
  - (C) right bronchus because is shorter and straighter
  - (D) None of the above
  
2. Concerning epilepsy choose the correct statement
  - A) In tonic clonic there e is no loss of consciousness
  - B) In tonic clonic there e is immediate loss of consciousness
  - C) Petitmal is also called myoclonic
  - D) In atonic there is increased ton
  
3. true about the clinical features of severe pneumonia
  - (A) AVPU>A
  - (B) Central cyanosis
  - (C) Peripheral cyanosis
  - (D) Chest in-drawing
  
- 4 Child Developmental milestones at 7 month
  - (A) Wave's bye

- (B) Able to clearly say mama
- (C) Rolls over crawls, able to sit with support, reach out and grasp the object
- (D) Able to stand and attempt to walk with support

5. The following is true about Down syndrome

- (A) Long metacarpals and phalanges
- (B) long 5th digit with clinodactyly
- (C) double transverse palmar creases
- (D) All of the above are true

6. True concerning immunization schedule

- (A) OPV At birth, 6wk, 10wk and 14wk :dose 2drops orally And (ipv) inactivated polio vaccine im 0.5mls at 14wks
- (B) DPT(Diphtheria, Pertussis and Tetanus)-Hepatitis B, Haemophilus influenza are called pentavalent vaccine 6wk, 10wk and 14wk :dose 0.5mls deep i.m on the right thigh
- (C) Rota vaccine 1.5mls oral at 6wks and 10wks
- (D) All of the above are true

7. Severe malnutrition diagnosis the main diagnostic features are:

- (A) weight-for-length/height < -3SD (wasted)
- (B) mid-upper arm circumference < 115 mm or
- (C) oedema of both feet (kwashiorkor with or without severe wasting)
- (D) all of the above are true

8. The following is true about acute bacterial meningitis

- (A) cerebral spinal fluid is cloudy and turbid
- (B) cerebral spinal fluid is clear
- (C) cerebral spinal fluid protein is not elevated
- (D) cerebral spinal fluid macroscopy is bloody

9. Diagnose measles if the child has:

- (A) fever (sometimes with a febrile convulsion)
- (B) a generalized maculopapular rash
- (C) One of the following: Cough runny nose (coryza) or red eyes (conjunctivitis).
- (D) All of the above are true

10. In malaria endemic areas of Africa the following are true except

- (A) Malaria deaths are largely due to anemia
- (B) Artesunate is the 1<sup>st</sup> line treatment for severe malaria
- (C) Patients with severe kwashiorkor are less prone to getting severe malaria
- (D) It is usually transmitted by male anopheles mosquito

11. True concerning spina bifida

- A) Meningocele is associated with hydrocephalous
- B) Spina bifida occulta is associated with hydrocephalous
- C) Spina bifida occulta is more severe than myelomeningocele
- D) Meningocele is more severe than myelomeningocele

12. Simple Partial seizures may present with

- A) With motor signs.
- B) With respiratory signs
- C) With signs gastrointestinal signs
- D) With musculoskeletal signs

13. The following are Predisposing factors of meningitis except

- (A) Inability to Colonize Nasopharynx
- (B) Bacteremia secondary to focal source
- (C) Direct entry into the CNS
- (D) Asplenia

14a 2year old boy presents with history of vomiting and diarrhea for 3dayson examination reveals

Weak pulse, AVPU<A. The best next step in fluid management is

- A) Administer 3% normal saline at 10mls/kg
- B) Administer 3% normal saline at 20mls/kg
- C) Administer ringers lactate at 20mls/kg for 15minutes
- D) Administer ringers lactate at 50mls/kg for 5mins

15. The following are the causes of diarrhea except

- (A) Bacterial shigella, salmonella'
- (B) Viral rota
- (C) Protozoa Amoeba
- (D) Helminthes Giardia

**From question 16-30 indicate whether true or false for every wrong response there is a penalty**

16. Concerning tetanus neonatorum

- (A) Also called lock jaw
- (B) It is caused by clostridium tetani
- (C) Symptoms are due to neurotoxin
- (D) Symptoms are due to cytotoxin
- (E) Presents with opisthotonus

17. Causes of direct (conjugated bilirubin)

- (A) hepatitis
- (B) sepsis
- (C) Bile duct obstruction
- (D) Billiary atresia
- (E) Torches

18. Concerning diabetes mellitus indicate true or false

- A) type i diabetes the body habitus they are not overweight
- B) type ii diabetes the body habitus they are generally overweight
- C) insulin resistance is more likely in type II diabetes
- D) Diabetes ketoacidosis is more likely in type II diabetes
- E) All of the above are true

19. Hydrocephalous

- (A) Dandy walker malformation is an acquired cause
- (B) Dandy walker malformation is an a congenital cause
- (C) Does not occur in meningitis
- (D) Babinskis' sign is up going
- (E) Management include shunting

20. The following are the causes of vomiting

- (A) Overfeeding
- (B) Gastric irritation by the bloody mucus
- (C) Achalasia cardia
- (D) Spina bifida occulta
- (E) Gastroenteritis

21 Concerning complications of vomiting

- A) Dehydration
- B) Acidosis
- C) Malnutrition
- D) Mallory Weiss tear
- E) Alkalosis

22. The following are the causes of gastro-esophageal reflux diseases

- (A) increased gastro esophageal tone
- (B) decreased gastro esophageal tone
- (C) hiatus hernia
- (D) Cerebral palsy
- (E) Obesity

23 peptic ulcer diseases the following are the predisposing factors

- (A) reduced mucosal protection layer

- (B) reduced mucosal protection layer
- (C) Increased gastric secretion or pepsin in vagal stimulation
- (D) Decreased gastric secretion or pepsin in vagal stimulation
- (E) Increased parietal cells

24 the following are non-infective causes of diarrhea

- (A) antibiotics
- (B) Malnutrition
- (C) diet
- (D) Rota virus
- (E) cryptosporidium parvum

25 the commonest organism that cause diarrhea in HIV/AIDS are

- (A) Cryptosporidium parvum
- (B) Parvo virus
- (C) Cryptosporidium
- (D) Toxoplasmosis gondii
- (E) Isospora belli

26. True or false concerning intussusception

- (A) The proximal part of the intestines invaginates into the distal part of the intestines
- (B) distal part of the intestines invaginates into the proximal part of the intestines
- (C) The commonest site is the ileocaecal junction
- (D) Presents with diarrhea red currant jelly stool and sausage shaped mass per abdomen
- (E) The commonest site is the sigmoid junction

27. Management of severe pneumonia

- (A) Amoxy alone is used
- (B) Penicillin ,gentamycin and oxygen admit the child
- (C) Use cotrimoxazole alone
- (D) Oxygen alone is indicated
- (E) The child is not admitted

28. Management of moderate broncho asthma

- (A) use salbutamol inhaler 2puffs or 2.5mgs nebulized every 20minutes up to 3doses plus oxygen
- (B) Use beclomethasone alone 100mgs inhalation
- (C) Use intravenous hydrocortisone alone
- (D) Intravenous aminophylline alone
- (E) All of the above are true

29 risk factors peptic ulcer disease

- A) H pylori
- B) stress
- C) drugs like penicillin's
- D) drugs [like non-steroidal anti-inflammatory drugs e.g. aspirin
- E) Diet eg alkaline meals.

30 cerebral pulsly causes include

- (A) intrauterine infections torches
- (B) birth injuries
- (C) Low birth weight
- (D) Trisomy 21
- (E) Ascaris lumbricoides

## **CHILD HEALTH**

### **CIMS 243**

#### **INSTRUCTIONS**

#### **SECTION A**

#### **ANSWER ALL QUESTIONS IN THIS SECTION**

#### **SAQ ONE**

- (a) List four clinical features of respiratory distress syndrome (4mks)
- (b) What is the causative organism of congenital syphilis (1mk?)
- (c) What two advantages of breastfeeding (2mks)
- (d) List three clinical features of meningitis (3mks)

#### **SAQ TWO**

- (a) Define aseptic meningitis (1mk)
- (b) Name three causative organisms for bacterial meningitis (3mks)
- (c) What are the three differentials of meningitis?
- (d) What are the three contraindications for lumbar puncture (3mks?)

#### **SAQ THREE**

- (a) List four complications of diarrhea( 5mks)
- (b) Define diarrhea(1mk)
- (c) Enumerate five causes of abdominal distention(5mks)

#### **SAQ FOUR**

- (a) Name five causes of diarrhea (5mks)
- (b) Highlight five preventive measures of diarrhea

#### **SAQ FIVE**

- (a) List five indications of oxygen (5mks)
- (b) Enumerate three diagnostic features of severe malnutrition (3mks)
- (c) What is kwashiorkor according to welcome trust classification (2mks?)

#### **SAQ SIX**

- (a) How is the child presenting with features of pneumonia managed? 2mks
- (b) What are the clinical features of severe pneumonia and pneumonia (5mks?)
- (b) Briefly describe the management of severe asthma (3mks)
- (c) John, she is 3years old, she has had a history of cough for 2weeks, night sweats. She has also lost weight
- (A) What is your impression (1mk?)
- (b) What investigation would you order for her? (2mks)
- (c) Discuss possible regimens for treatment of Jane (3mks)
- (d) What are the predisposing factors that can lead to the above condition (5mks?)
- (e) What are the five complications of the above condition (5mks?)
- (f) List two adverse effects for drugs given in the above condition 2mks
- (g) Which drug in the above condition interacts with antiretroviral drugs and what is the alternative treatment in such case? (2mks)

## **SECTION B**

### **INSTRUCTION**

**THIS SECTION CONSIST OF THREE MODIFIED ESSAY QUESTIONS**

**ANSWER ANY TWO QUESTION IN THIS SECTION**

#### **MEQ ONE**

James is a child aged 4weeks, he presents in outpatient department with a history of diarrhea and vomiting for 3days.on examination the pulse is weak AVPU<A and cold hands and the impression of hypovolemic shock was made.

- (A) What other features would you look for (2marks?)
- (b) Describe the management of shock (3marks)
- (c) Describe how you will manage him in severe dehydration (4marks)
- (d) Describe how you will manage him in some dehydration (4marks)
- (e) Describe how you will manage him in no dehydration (2marks)
- (f) What element would you give him indicate the dosage (2marks)
- (g) What preventive vaccine wills you advice the mother to come for and how is it given? (3marks)

#### **MEQ TWO**

Discuss diabetes mellitus under the following sub-topics

Definition (2mks) precipitating factors (5mks) investigations (5mks) rehydration of child weighing 20kgs and has DKA (diabetic keto-acidosis (5mks) complications (3mks)

#### **MEQ THREE**

(a)Alice is 2years old, while you are on call she presents to you cough, wheezes and chest tightness on exam she has cyanosis, oxygen saturation less than 90%.

- i) What is your impression (1mark)
- ii) What are the four possible causes of the condition (4marks)
- iii) Discuss the four investigations for her condition (3marks)
- iv) Discuss how you will manage her (6marks)
- v) What preventive measures will you tell her (3marks)
- vi) What are the differentials of the above condition (3marks)