Screening questions

(Their proper answer is the condition for the continuance of the exam)

- 1. Imaging modality of choice when evaluating a child for infantile hypertrophic pyloric stenosis: **ultrasonography**.
- 2. Typical age of intussusception in infants: 3 months 3 years
- 3. What are the two typical anamnestic features of acute appendicitis? First epigastrial and paraumbilical pain, later the pain is localized on the right lower abdominal quadrant.
- 4. Imaging study of the polytraumatized patient: acute CT.
- 5. Most common cause of acute abdomen in children: appendicitis.
- 6. What is the first test in case of bloody stool: digital rectal examination.
- 7. What is two-stage splenic rupture? Splenic rupture occurs in two stages. Initial subcapsular haematoma formation may have only mild symptoms, later second stage may occur after hours or days, and is usually characterised by the rapid development of shock, as the spleen and mesentery tend to bleed rapidly and copiously.
- 8. Which is the most common cause of strangulation ileus? Incarcerated hernia.
- 9. The most common cause of transfusion-requiring hematochaezia, without abdominal pain and without diarrhea: **Meckel's diverticulum**
- 10. You find a high GGT in a patient with ulcerative colitis, what should you think about? **Sclerosing colangitis.**
- 11. What are the features of the perianal fissures in a patient with Crohn's disease? **Not in the midline, deep, not painful.**
- 12. What is the first therapeutic choice in Crohn's disease? Exclusive enteral nutrition.
- 13. What kind of gas is insufflated during laparoscopy? **CO2**
- 14. What is the official name of the spring-loaded insufflation needle used to create pneumoperitoneum for laparoscopic surgery? **Veress-needle**
- 15. In case of thoracic empyema after drainage or thoracoscopy, what kind of method is used in order to dissolve the thick, highly viscous pleural fluid (pus)? **Fibrinolysis/urokinase/streprokinase**
- 16. What are the two most frequent chest deformities? **Pectus excavatum and pectus carinatum.**

- 17. What are typical signs of bacterial otitis externa? Pain and/or sensitivity of the tragus.
- 18. What are the 4 most important indication of adenotomy? **Infection of the upper respiratory tract, otitis media, inhibition of nasal breathing, obstructiv sleeping apnoe.**
- 19. The most frequent pathogen of sinusitis and otitis media? Str. pneumoniae.
- 20. In which case of inflammatory disease of the middle ear can we suggest tympanostomy tubes (Grommet)? Chronic serous otitis media and/or chronic dysfunction of the Eustachian tube.
- 21. What is the most frequent pathogen in urinary tract infections? E. Coli.
- 22. What can we find in the urine, in the case of glomerulonephritis? **Red blood cells and red blood cell cylinders. Proteinuria can also appear.**
- 23. What is the most frequent cause of hypertension before the adolescent age? **Kidney disease.**
- 24. Which is the most frequent glomerulonephritis type? **IgA nephropathy.**
- 25. What kind of antihypertensiv drug would you recommend in hyperkinetic hypertension? **Beta-blocker.**
- 26. What is the prognosis of West-syndrome or infantile spasm? Usually poor.
- 27. What is the essential criterion of cerebral palsy? Non-progressive, residual brain injury.
- 28. Which pathogen does cause most commonly typical pneumonia? Str. pneumoniae.
- 29. What are the two main components of the home treatment of pseudocroup? **Rectal steroid**, **inhalation of** (*fresh*) **cool air**.
- 30. What is the most common cause of acute cough? Viral infection.
- 31. What is the significance of Holzknecht sign? Airway foreign body aspiration.
- 32. What is the most common cause of coughing, which has been presenting since birth and occurring always during feeding? **Tracheoesophageal fistula.**
- 33. How much part of the mortality is caused by accidents in the children older than 1 year, in Hungary? 36-40%, this is the main cause of death in children older than 1 year.
- 34. What is the prognosis of juvenile absence epilepsy? Usually particularly favorable.
- 35. What is the indication of ACTH as an anticonvulsant drug? **West syndrome/infantile spasm/BNS epilepsy.**
- 36. What can prevent coronary artery disease (aneurysm) in Kawasaki syndrome? IVIG.

- 37. What is the most serious complication of neonatal lupus erythematosus? **Congenital heart block third-degree (complete) atrioventricular heart block.**
- 38. What is the most serious complication of juvenile idiopathic arthritis? **Macrophag** activation syndrome (MAS).
- 39. Which muscles are affected in juvenile polymyositis? **Proximal muscles of** *the limbs*.
- 40. What is typical for the embrionic form of extrahepatic biliary atresia? **Usually other** malformations are associated (situs inversus polysplenia, etc).
- 41. When can we expect the onset of symptoms of Wilson disease? After 4-5 years of age.
- 42. Where does the CFTR protein express in the liver? In the biliary ducts.
- 43. What is the typical feature of stool in biliary atresia? Clay-colored (acholic) stool.
- 44. What kind of diseases are included in `atopic march` and in which order? Food allergy atopic dermatitis asthma bronchiale allergic rhinitis.
- 45. What is the frequency of food allergy in childhood according to the parents and in the reality (after elimination and re-challenge)? **Approx. 7-10%, and 1-2 %, respectively.**
- 46. How to diagnose food allergy how reliable is allergen-specific IgE testing? Allergen-specific IgE is not totally reliable. Elimination diet, and after the sympoms disappear, allergen re-challenge is the suggested method of diagnosis.
- 47. How much is the minimal serum IgA concentration, when the tissue-transglutaminase (TTG) antibody or the endomysial anibody (EMA) can be positive in celiac disease? **0.2 g/l**
- 48. Which 3 criteria are required in order to avoid biopsy in a child with suspected celiac disease? 1. Positive clinical signs and symptoms 2. positive tissue-transglutaminase (TTG) antibodyAND endomysial antibody (EMA) 3. positive genetic results (HLA-DQ2 and -DQ8).
- 49. What is the diagnostic basis of endocarditis? **Haemoculture and echocardiography.**
- 50. What are the upper airway infections that should be treated with antibiotics? **Streptococcus angina**, **acute otitis media and acute bacterial sinusitis.**
- 51. What is te diagnostic basis of erythema migrans? The fact of tick bite and the clinical picture: growing erythema, which is more than 5 cm in diameter.
- 52. What is the ideal age for closing the soft palate defect? **Between 9 and 18 months.**
- 53. What is the most likely diagnosis in the following case: patient with polyuria, polydypsia with positive urine glucose and acetone test? **Diabetes mellitus.**
- 54. Patient with typical symptoms has a 18,2 mmol/l blood sugar level in the afternoon. What is to be done? **Direct the child to a pediatric diabetic center immediately.**

- 55. What kind of hormonal changes are seen in the salt wasting form of congenital adrenal hyperplasia due to deficiency of 21-hydroxylase? **Insufficient glucocorticoid and mineralocorticoid secretion, excessive androgen secretion.**
- 56. How does the mother iodine deficiency influence the newborn's thyroid function? **It results temporary primary hypothyroidism.**
- 57. Which is the most common adrenocortical enzyme defect? The defect of the 21-hydroxylase enzyme.
- 58. You experience low blood sugar level in an infant, who has normal temperature and hepatomegaly, what disease do you think of? **Type I. glycogenosis von Gierke disease.**
- 59. What are the most typical histologic findings in ulcerative colitis? Crypt abscesses.
- 60. Name at least 5 extraintestinal abnormalities in celiac disease: hepatitis, osteoporosis, arthritis, isolated iron deficiency, Duhring-disease (dermatitis herpetiformis).
- 61. What is the definition of "graft versus leukaemia"? Immunologic attack of donor cells against patient's leukaemic cells.
- 62. What is haploidentical trasplant? Half matched (HLA antigene) stem cell transplant (from usually a family member).
- 63. What does allogeneic stem cell transplant mean? The patient (recipient) gets haemopoetic stem cells from another person (donor).
- 64. What glucose levels are diagnostic for diabetes mellitus? Blood glucose level higher then 7 mmol/l in any time, or more than 11.1 mmol/l during oral glucose tolerance test (OGTT).
- 65. Which are the 4 presenting symptoms of diabetes mellitus? Polyuria, polydypsia, loss of weight beside good appetite, fatigue-weakness.
- 66. What are the most common associated diseases in patients with type 1 diabetes mellitus? Celiac disease and Hashimoto thyreoiditis.
- 67. What is the most modern therapeutic method of type one diabetes? **Insulin pump with an integrated glucose sensor.**
- 68. How much is the insulin dose in diabetic ketoacidosis? 0.05-0.1 U/kg/h
- 69. Since the introduction of expanded screening, how many congenital metabolic diseases are screened routinely? **26.**
- 70. The final therapy of biliary atresia is liver transplantation. There is a surgical bridge therapy until transplantation. What is the name of this operation? **Kasai porto-enterostomy.**
- 71. How often should be a baby breastfed? **On-demand.**

- 72. When is it suggested to give cow's milk for children? After 12 monthsof age.
- 73. How does the breast milk's protein content relate to the cow's milk protein content? **One third.**
- 74. For how long do the primitive reflexes exist normally? **Till 9 months of age.**
- 75. What are the diseases which can be easily diagnosed and followed up by cranial ultrasound? **Brain haemorrhage and hydrocephalus.**
- 76. For how long can we see the shadow of the thymus on the thoracic X-ray? **Till 3 years of age.**
- 77. How can be the airway foreign body diagnosed? (At least two methods!) Exspiratory and inspiratory chest radiograph or fluoroscopy (real-time moving images).
- 78. What radiological examinations can be done to diagnose VUR? (Name three!). MCU (Mycturating cystourethrogram), Sonocystography, Dinamic kidney-scintgraphy.
- 79. How can you diagnose perforation in a critically ill baby suffered from necrotising enterocolitis if you can not move him/her in the incubator? **Horizontal X-ray from side position while the baby is lying on the back.**
- 80. In which part of the bone does osteomyelitis start? In the metaphysis.
- 81. How can be defecation ensured in the case of high (proximal) anus atresia? With the creation of a sigmoidostoma.
- 82. How long to wait after surgery before bathing? 7-8 days.
- 83. What is the reactivation of chicken pox (varicella)? **Herpes zoster.**
- 84. What is the sixth disease? **Exanthema subitum, roseola infantum.**
- 85. Which is that contagious disease that causes severe fetal injuries in 80 percent of the cases? **Rubella.**
- 86. Name at least five examples, where pulsoxymetry is not informative! Carbon-dioxide intoxication, methaemoglobinaemia, severe anaemia, cardiac failure, cold extremities.
- 87. Define the matter of paradoxical breathing!/Define paradoxical breathing! The chest moves inward and the abdomen moves outward during inhalation, and vice versa.
- 88. How do we give oxygen to a conscious patient who is breathing spontaneously? **Through a** face mask with reservoir, with high flow oxygen (10-15 l/min).
- 89. How change the concentrations of protein and glucose in the liquor? **Protein concentration** is elevated and the glucose content is decreased

- 90. What are the two most frequent pathogens causing neonatal meningitis? **Streptococcus agalactiae**, **E. coli.**
- 91. What influences decisively the sensitivity of hamoculture? The quantity of blood sample taken in 24 hours following the fever episodes.
- 92. What is the name of that funcional disorders, which is characterised by crying following with straining for 10 minutes. **Infantile dyschezia**.
- 93. Which bacterium causing neonatal infection could be identified from the vaginal sample? **Group B streptococcus, (GBS)**
- 94. How much is the quantity the fluid bolus which is necessary for the management of septic shock? **20 ml/kg body weight**
- 95. What is the most frequently occurring endocrinological disorder causing growth retardation? **Hypothyreosis**
- 96. How can we define the premature puberty? **Onset of secondary sexual character starts before 8 years.**
- 97. What can be found in the urinary sediment in typical pyelonephritis? **Leucocytes and bacteria**
- 98. At which chromosomal abnormality is frequent the occurance of duodenal atresia? 21 trisomy
- 99. What is the radiological sign of duodenal atresia? **Double bubble**
- 100. What is the most important question, which we have to ask at functional gastroenterological complaints in infancy? How develops the infant? If the infant's somatic development is good, organic causes of the complaints is not probable.