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PROVISIONAL ANSWER KEY (CBRT)

Name of The Post	Associate Professor, Paediatrics, General State Service, Class-1 (Special Recruitment)
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Instructions / સૂચના

Candidate must ensure compliance to the instructions mentioned below, else objections shall not be considered: -

- (1) All the suggestion should be submitted in prescribed format of suggestion sheet Physically.
- (2) Question wise suggestion to be submitted in the prescribed format (Suggestion Sheet) published on the website.
- (3) All suggestions are to be submitted with reference to the Master Question Paper with provisional answer key (Master Question Paper), published herewith on the website. Objections should be sent referring to the Question, Question No. & options of the Master Question Paper.
- (4) Suggestions regarding question nos. and options other than provisional answer key (Master Question Paper) shall not be considered.
- (5) Objections and answers suggested by the candidate should be in compliance with the responses given by him in his answer sheet. Objections shall not be considered, in case, if responses given in the answer sheet /response sheet and submitted suggestions are differed.
- (6) Objection for each question shall be made on separate sheet. Objection for more than one question in single sheet shall not be considered & treated as cancelled.

ઉમેદવારે નીચેની સૂચનાઓનું પાલન કરવાની તકેદારી રાખવી, અન્યથા વાંધા-સૂચન અંગે કરેલ રજૂઆતો ધ્યાને લેવાશે નહીં

- (1) ઉમેદવારે વાંધા-સૂચનો નિયત કરવામાં આવેલ વાંધા-સૂચન પત્રકથી રજૂ કરવાના રહેશે.
- (2) ઉમેદવારે પ્રશ્નપ્રમાણે વાંધા-સૂચનો રજૂ કરવા વેબસાઇટ પર પ્રસિધ્ધ થયેલ નિયત વાંધા-સૂચન પત્રકના નમૂનાનો જ ઉપયોગ કરવો.
- (3) ઉમેદવારે પોતાને પરીક્ષામાં મળેલ પ્રશ્નપુસ્તિકામાં છપાયેલ પ્રશ્નક્રમાંક મુજબ વાંધા-સૂચનો રજૂ ન કરતા તમામ વાંધા-સૂચનો વેબસાઇટ પર પ્રસિધ્ધ થયેલ પ્રોવિઝનલ આન્સર કી (માસ્ટર પ્રશ્નપત્ર)ના પ્રશ્ન ક્રમાંક મુજબ અને તે સંદર્ભમાં રજૂ કરવા.
- (4) માસ્ટર પ્રશ્નપત્ર માં નિર્દિષ્ટ પ્રશ્ન અને વિકલ્પ સિવાયના વાંધા-સૂચન ધ્યાને લેવામાં આવશે નહીં.
- (5) ઉમેદવારે જે પ્રશ્નના વિકલ્પ પર વાંધો રજૂ કરેલ છે અને વિકલ્પ રૂપે જે જવાબ સૂચવેલ છે એ જવાબ ઉમેદવારે પોતાની ઉત્તરવહીમાં આપેલ હોવો જોઈએ. ઉમેદવારે સૂચવેલ જવાબ અને ઉત્તરવહીનો જવાબ ભિન્ન હશે તો ઉમેદવારે રજૂ કરેલ વાંધા-સૂચન ધ્યાનમાં લેવાશે નહીં.
- (6) એક પ્રશ્ન માટે એક જ વાંધા-સૂચન પત્રક વાપરવું. એક જ વાંધા-સૂચન પત્રકમાં એકથી વધારે પ્રશ્નોની રજૂઆત કરેલ હશે તો તે અંગેના વાંધા-સૂચનો ધ્યાને લેવાશે નહીં.

001. Mid arm circumference is age independent between
(A) 2 to 5 years (B) 1 to 7 years
(C) 3 months to 3 years (D) 6 months to 5 years
002. Average gain of height during the first year of life is –
(A) 15 cm (B) 22 cm
(C) 25 cm (D) 30 cm
003. Which Growth standards are recommended for evaluation of malnutrition in India?
(A) Khadilkar Growth Charts
(B) WHO growth charts
(C) IAP growth charts.
(D) Centre for Disease Control and Prevention 2000 charts
004. Daily weight gain in a newborn should not exceed –
(A) 2% body weight (B) 10 gm per kg
(C) 50 gm (D) None of the above
005. Microcephaly is defined as Head circumference less than –
(A) 30 cm (B) 3 Standard Deviations
(C) 3rd percentile (D) 10th percentile
006. Obesity in children is defined as BMI percentile is greater than –
(A) 27 adult equivalent (B) 25 adult equivalent
(C) 30 adult equivalent (D) 23 adult equivalent
007. Children at 10 months will usually have how many teeth? –
(A) 8 (B) 12
(C) 6 (D) 4
008. A 12 year old child with short stature has Chronological age > Height age; Height age = Bone age. He has –
(A) Hypopituitarism
(B) Familial Short Stature
(C) Constitutional Delay in Growth and Puberty
(D) Hypothyroidism
009. All of the following have short limbed Dwarfism except-
(A) Achondroplasia (B) Hypothyroidism
(C) Spondylo-epiphysial Dysplasia (D) Hypochondroplasia
010. At the age of 10 months a child will usually have following number of carpal bones ossified –
(A) 1 (B) 2
(C) None (D) 3
011. A child raises his head to 90 degrees and bears his weight on his fore arms at –
(A) 2 months (B) 3 months
(C) 4 months (D) 5 months

012. A child starts approaching an object with his hands at –
(A) 2 months (B) 3 months
(C) 5 months (D) 7 months
013. A child starts saying ‘mama’ ‘dada’ with meaning at –
(A) 8 months (B) 10 months
(C) 12 months (D) 15 months
014. A child can make a tower of 4 cubes at the age of –
(A) 18 months (B) 24 months
(C) 30 months (D) 36 months
015. The age at which a child is able to draw slanting lines is –
(A) 4 years (B) 5 years
(C) 6 years (D) 7 years
016. Pervasive developmental disorders of childhood include all except –
(A) Rett’s Syndrome (B) Autism
(C) Asperger syndrome (D) Obsessive Compulsive Disorder
017. All the following statements regarding breath holding spells are correct except -
(A) Extra attention should be given to the child with the spells
(B) Iron therapy should be given to those with Iron deficiency anaemia
(C) EEG is not indicated
(D) Parents should be reassured about the benign nature of the condition
018. First physical sign of onset of puberty in girls is –
(A) Thelarche (B) Pubarche
(C) Menarche (D) Adrenarche
019. Which of the following drugs is not used in management of ADHD.
(A) Atomoxetine (B) Methyl phenidate
(C) Haloperidol (D) Tricyclic antidepressants
020. A girl who does not have onset of puberty beyond normal range is most likely to be having –
(A) Turner Syndrome (B) Klinefelter Syndrome
(C) Trisomy X (D) Fragile X Syndrome
021. Number of additional calories required by lactating mothers are –
(A) 600 calories (B) 1000 calories
(C) 300 calories (D) 1500 calories
022. Indispensable Amino Acids include all of the following except –
(A) Tryptophan (B) Lysine
(C) Glutamic acid (D) Methionine
023. Medium Chain Triglycerides have –
(A) 6 - 10 carbon chain (B) 4 - 8 carbon chain
(C) 12 - 18 carbon chain (D) 8 - 14 carbon chain

024. Which of the following oils contains most amount of Omega 6 fatty acids?
 (A) Sunflower oil (B) Cod liver oil
 (C) Ground nut oil (D) Olive oil
025. Essential fatty acids include all of the following except –
 (A) Linoleic Acid (B) Linolenic Acid
 (C) Caproic Acid (D) Arachidonic Acid
026. Those eating vegetarian diet have a predisposition to suffer from all of the following deficiencies except –
 (A) Vitamin D (B) Iron
 (C) B 12 (D) Thiamine
027. Which of the following is not a feature of SAM
 (A) Hypokalaemia (B) Hypernatremia
 (C) Hyperkalaemia (D) Hypoglycaemia
028. Protein content of F -75 is approximately –
 (A) 1.1 gm per 100 ml (B) 1.7 gm per 100 ml
 (C) 2.5 gm per 100 ml (D) 3.5 gm per 100 ml
029. What is the approximate osmolarity of F – 100?
 (A) 333 (B) 313
 (C) 380 (D) 420
030. Sodium concentration of ReSoMAL (mEq/L) is –
 (A) 37 (B) 45
 (C) 55 (D) 75
031. Coordination between sucking and swallowing is achieved at the gestational age of –
 (A) 30 weeks (B) 32 weeks
 (C) 34 weeks (D) 36 weeks
032. Ponderal index is used to –
 (A) Distinguish between Preterm and Small for Gestational Age babies
 (B) Estimate gestational maturity of the newborn
 (C) To estimate lung maturity in a newborn
 (D) To distinguish between Malnourished and Hypoplastic IUGR
033. Appropriate maintenance IV solution for a newborn after first 2 days should have a sodium concentration (in mEq/L) of –
 (A) 25 (B) 50
 (C) 75 (D) 154
034. A common triad of signs in Necrotising Enterocolitis consists of all except –
 (A) Thrombocytopenia (B) Persistent Metabolic Acidosis
 (C) Diarrhoea (D) Severe refractory Hyponatremia
035. A Preterm newborn in a thermo-neutral environment requires so many calories per kg to maintain body weight –
 (A) 50 (B) 70
 (C) 100 (D) 125

036. Following is true regarding Breast milk jaundice except –
 (A) There is no pallor (B) It is seen maximum on 3-4 days of life
 (C) Colour of the stool is normal (D) Urine is not dark coloured
037. Clinical features of Congenital Rubella Syndrome include all except –
 (A) Pulmonary Artery Stenosis (B) Radiographic Bone lucencies
 (C) Hydrocephalous (D) Retinopathy
038. Etiology of Hyperglycaemia in Newborn includes all except –
 (A) Exogenous parenteral glucose administration
 (B) Small for Gestational Age babies
 (C) Sepsis
 (D) Steroids
039. Following is true about Hyperoxia test except –
 (A) It should be performed in all cases of sudden shock in newborn
 (B) It distinguishes between Lt. to Rt. and Rt. to Left shunts
 (C) PG E1 should be started in all with positive test
 (D) Pulse Oxymetry cannot be used in Hyperoxia test
040. Prognosis in a case of Neonatal seizures is best with –
 (A) Focal clonic seizures (B) Multi-focal clonic
 (C) Myoclonic (D) Subtle
041. All of the following are Autosomal Recessive disorders except –
 (A) B Thalassemia (B) Sickle Cell Anaemia
 (C) Pyruvate Kinase Deficiency (D) Hereditary Spherocytosis
042. Pelizaeus-Merzbacher Disease is inherited as –
 (A) X linked recessive (B) Autosomal recessive
 (C) Autosomal Dominant (D) X linked dominant
043. What is the most accurate non-invasive method of prenatal diagnosis of Trisomy 21?
 (A) Quadruple marker from maternal serum
 (B) Fetal Ultrasonography (Nuchal translucency)
 (C) NGS based sequencing of cfDNA from maternal plasma
 (D) Pregnancy Associated Plasma Protein A, Free b HCG, Nasal bone assessment, Nuchal Translucency
044. Which of the following is an example of Uniparental Disomy?
 (A) Prader-Willi syndrome (B) Cornelia De Lange Syndrome
 (C) Miller-Dieker syndrome (D) Tuberous Sclerosis
045. Rocker bottom feet are found in –
 (A) Edward syndrome (B) Klinefelter syndrome
 (C) Angelman Syndrome (D) Noonan Syndrome
046. A child suspected of an inborn error of metabolism has pH of 7.38, pCO₂ of 42 and raised Ammonia levels. Which category he falls in?
 (A) Urea cycle defects (B) Organic Acidemias
 (C) Aminoacidopathies (D) Galactosemias

047. Clinical features of Homocystinuria include all except –
 (A) EctopiaLentis (B) Aortic dissection
 (C) Marfanoid habitus (D) Thromboembolic phenomena
048. Peroxisomal disorders include all except –
 (A) Refsum disease (B) Cartilage Hair Hypoplasia
 (C) Adrenoleukodystrophy (D) Zellweger syndrome
049. Treatment of Urea Cycle disorders includes –
 (A) Sodium Benzoate (B) Pyridoxine
 (C) Thiamine (D) Biotin
050. A child suspected of inborn error of metabolism with normal Ammonia levels and no acidosis has –
 (A) Maple Syrup Urine Disease (B) Ornithine Transcarbamylase deficiency
 (C) Multiple Carboxylase deficiency (D) Non ketotic hyperglycemia
051. In a patient of head injury the Glasgow Coma Scale requiring aggressive management is –
 (A) <9 (B) <7
 (C) <10 (D) <6
052. A patient of warm shock with low blood pressure needs –
 (A) Aggressive volume expansion (B) Adrenaline
 (C) Dobutamine (D) Noradrenaline
053. Which of the following is an inodilator?
 (A) Dopamine (B) Adrenaline
 (C) Dobutamine (D) Vasopressin
054. Cardiac output is increased in
 (A) Hypovolemic shock (B) Cardiogenic shock
 (C) Distributive shock (D) Obstructive shock
055. Which of the following is a lucitropic agent?
 (A) Dopamine (B) Dobutamine
 (C) Milrinone (D) Noradrenaline
056. Acute LungInjury has a PaO₂/FiO₂ of
 (A) > 300 (B) < 300
 (C) > 200 (D) < 200
057. QRS duration consistent with Ventricular Tachycardia is –
 (A) > 0.09 sec (B) > 0.07 sec
 (C) > 0.04 sec (D) > 0.06 sec
058. An example of wide Anion gap metabolic acidosis is –
 (A) RTA (B) Diarrhoea with moderate dehydration
 (C) Hypovolemic shock (D) Congenital pyloric stenosis

059. In Metabolic Alkalosis –
 (A) pCO₂ increases by 4 mm Hg for each 10 mEq/L increase in S. Bicarbonate
 (B) Increases by 7 mm Hg
 (C) Decreases by 4 mm Hg
 (D) Increases by 3.5 mm Hg
060. Central Pontine Myelinosis is most common with –
 (A) Correction of hypernatremia (B) Correction of hyponatremia
 (C) Correction of hypokalaemia (D) Correction of hypovolemia
061. Which of the following vaccines is not a live vaccine?
 (A) OPV (B) Measles
 (C) Conjugate Pneumococcal vaccine (D) Chimerivax – JE
062. Which of the following vaccines cannot be frozen?
 (A) Measles (B) OPV
 (C) Tdap (D) BCG
063. Vi- polysaccharide conjugate Typhoid vaccine can be given at a minimum age of –
 (A) 6 weeks (B) 6 months
 (C) 12 months (D) 2 years
064. Intradermal IPV is given along with OPV in current schedule because –
 (A) OPV has poor sero-conversion rate
 (B) To build background immunity against Type 2 strain
 (C) To prevent VDPV
 (D) To obviate need for pulse polio rounds
065. VDPP can be all of the following except –
 (A) c VDPP (B) I VDPP
 (C) r VDPP (D) a VDPP
066. All the following regarding immunisation in LBW/Preterm babies is correct except –
 (A) BCG can be safely given to all LBW/PT babies
 (B) Zero dose can be safely given to all LBW/PT babies
 (C) Babies below 2 kg should not be given HBV
 (D) All subsequent vaccines can be given at normal age recommendations
067. Macrophage Activation Syndrome is characterized by all of the following except –
 (A) Leukopenia (B) Thrombocytopenia
 (C) High grade fever (D) High ESR
068. Anthesitis Related Arthritis is characterised by all except –
 (A) Ankylosing spondylitis (B) Male, >6 years, HLA B-27
 (C) Nail pitting, Onycholysis (D) Acute anterior uveitis
069. Systemic onset JIA (SOJIA) demonstrates a rash that is –
 (A) Discoid, pruritic, photosensitive (B) Erythematous, evanescent
 (C) Desquamative with silvery plaques (D) Heliotrope rash

070. Characteristics of Kawasaki Disease include all except –
 (A) Exudative conjunctivitis (B) Coronary artery aneurism
 (C) Cracked lips and red tongue (D) Periungual desquamation
071. Earliest evidence of airway obstruction is obtained from –
 (A) FEV1/ FVC ratio (B) Symptom of breathlessness
 (C) Signs of rhonchi on auscultation (D) Peak Expiratory Flow
072. Comorbid conditions of Bronchial asthma include all except –
 (A) Allergic Rhino sinusitis (B) Gastro oesophageal reflux
 (C) Atopic Dermatitis (D) Pulmonary Tuberculosis
073. Management of acute attack of asthma includes all except –
 (A) Inhaled steroids (B) Inhaled sympathomimetics
 (C) Inhaled Ipratropium (D) Injectable Terbutaline
074. Commonest foods responsible for food allergy are all except –
 (A) Milk (B) Eggs
 (C) Fish (D) Mutton
075. Longterm management of childhood Asthma includes all except –
 (A) Inhaled LABA (B) Theophylline
 (C) Ketotifen (D) Inhaled steroids
076. Bacterial sore throat is caused by –
 (A) Streptococcus Group A alpha Haemolyticus
 (B) Streptococcus Group B
 (C) Streptococcus Group D
 (D) Streptococcus Group A beta Haemolyticus
077. The most common morbidity of non-Typhoid Salmonella is –
 (A) Food poisoning (B) Urinary Tract Infection
 (C) Osteomyelitis (D) Bacteraemia
078. Following is true of Shigella dysentery except –
 (A) There is colicky pain and tenesmus (B) Stools contain blood
 (C) There is increase in Band cell count (D) Stools have a fishy odour
079. Late clinical manifestations of Congenital Syphilis include all except –
 (A) Saddle nose (B) Hutchison's teeth
 (C) Osteochondritis and periostitis (D) Interstitial Keratitis
080. Chlamydia trachomatis infection produces pneumonia in the age group of
 (A) School age children (B) 2 months to 2 years
 (C) 1-3 months of age (D) Adolescent age
081. Rubella infection is typically characterised by enlargement of lymph nodes in
 (A) Post auricular (B) Jugulodiaphragmatic
 (C) Posterior cervical (D) Supraclavicular

082. Characteristic of Infectious Mononucleosis is lymphadenopathy in –
 (A) Occipital (B) Supraclavicular
 (C) Epitrochlear (D) Axillary region
083. Bone lesions in Congenital Rubella Syndrome consist of
 (A) Periostitis (B) Epiphyseal Dysgenesis
 (C) Osteitis Fibrosa Cystica (D) Metaphyseal radioluencies
084. Hand-Foot and Mouth Disease is most commonly caused by –
 (A) Herpes simplex virus (B) Coxsackie virus
 (C) Parvo B 19 virus (D) Adeno virus
085. All of the following regarding Rota virus is true except –
 (A) It is common during winter months
 (B) It tends to affect children below 2 years of age
 (C) It is commonly associated with respiratory tract symptoms
 (D) Stools in Rota virus diarrhoea have higher Sodium content than ordinary diarrhoeas
086. Warning signs of Dengue fever include all except –
 (A) Persistent vomiting (B) Abdominal pain or tenderness
 (C) Leukopenia (D) Mucosal bleeds
087. During IV therapy of Dengue fever with shock if patient shows no improvement and the haematocrit rises-
 (A) Give blood transfusion (B) Give inotropes
 (C) Give IV colloid solutions (D) Increase the rate of IV infusion further
088. WHO has named the new Corona Virus responsible for the recent epidemic as –
 (A) Covid – 19 (B) Corona novel virus 19
 (C) Covir – 19 (D) Corvi – 19
089. Lymphoid Interstitial Pneumonia in AIDS is included in the clinical classification in –
 (A) Clinical Stage 1 (B) Clinical stage 2
 (C) Clinical stage 3 (D) Clinical stage 4
090. Total Osmolarity of the current WHO ORS is
 (A) 210 (B) 245
 (C) 275 (D) 310
091. Ringer's Lactate has a Sodium content of –
 (A) 120 mEq/L (B) 130 mEq/L
 (C) 140 mEq/L (D) 145 mEq/L
092. A common cause of persistent diarrhoea in AIDS patient is –
 (A) Cryptococcosis (B) Coccidiomycosis
 (C) Cryptosporidiosis (D) Chromoblastomycosis
093. Number of nephrons each kidney contains on an average is-
 (A) 1 lakh (B) 0.5 million
 (C) 0.75 million (D) 1 million

094. Serum creatinine does not rise till the GFR falls below –
 (A) 70% (B) 20%
 (C) 10% (D) 5%
095. A patient with haematuria and decreased levels of C3 may be because of all except –
 (A) PSGN (B) Lupus Nephritis
 (C) Subacute bacterial endocarditis (D) Ig A nephropathy
096. Indications of renal biopsy in SLE are –
 (A) All patients (B) Patients with low C3 levels
 (C) Patients with progressive renal failure (D) Patients with massive proteinuria
097. Rapidly progressive Glomerulonephritis is characterised by –
 (A) Mesangial proliferation (B) Crescent formation
 (C) Glomerulosclerosis (D) Thickening of glomerular membrane
098. All of the following are true in case of Haemolytic Uremic Syndrome except –
 (A) It occurs in preschool and school age children
 (B) Peripheral smear shows schistocytes and thrombocytopenia
 (C) PT and APTT are prolonged
 (D) Proteinuria is usually low grade
099. Which of the following is correct with reference to Idiopathic Hypercalciuria?
 (A) It is an Autosomal recessive disease (B) There is painless haematuria
 (C) Serum Calcium is normal (D) 24 hour excretion of calcium is < 4 mg/Kg
100. Most common cause of Unilateral Cystic kidney mass is-
 (A) Autosomal Dominant Polycystic Kidney Disease
 (B) Autosomal Recessive Polycystic Kidney Disease
 (C) Multi-cystic Dysplastic Kidney
 (D) Hydronephrosis
101. Proportion of filtered bicarbonate absorbed in Distal Renal Tubules is –
 (A) 50% (B) 90%
 (C) 10% (D) 20%
102. Urinary pH in Proximal RTA in presence of Systemic Acidosis is-
 (A) <5.5 (B) <7.0
 (C) > 5.5 (D) > 6.0
103. Urinary Anion Gap is calculated to distinguish between Distal RTA and –
 (A) Proximal RTA (B) Gastrointestinal bicarbonate wasting
 (C) Organic Acidemias (D) Fanconi Syndrome
104. A patient of Acute Kidney Injury has a urinary sodium of 100 mEq/L, urinary osmolarity of 250 mosm/Kg, FeNa of 2% and low urinary protein. His diagnosis is –
 (A) Hypovolemia (B) ATN
 (C) AGN (D) SIADH

105. Renal scarring in case of Urinary Tract Infections is best demonstrated by –
 (A) Intravenous Pyelography (B) DMSA scan
 (C) DTPA scan (D) Voiding Cystourethrogram
106. By the age of 5 years the percentage of children still incontinent at night is –
 (A) 5 - 10% (B) 15 - 20%
 (C) 20 - 30% (D) 2 - 5%
107. Holoprosencephaly is commonly seen in –
 (A) Cri du Chat Syndrome (B) Edward Syndrome
 (C) Klienfelter Syndrome (D) Arnold Chiari Syndrome
108. Maternal Zika virus infection can result in Fetal –
 (A) Polymicrogyria (B) Megaloencephaly
 (C) Microcephaly (D) Hydrocephalous
109. Premature Fusion of Metopic sutures (Craniosynostosis) results in
 (A) Scaphocephaly (B) Plagiocephaly
 (C) Trigonocephaly (D) Oxycephaly
110. Generalized Epilepsy with Febrile Seizures Plus (GEFS+) is usually inherited as
 (A) Autosomal Dominant (B) Autosomal Recessive
 (C) Polygenic inheritance (D) X linked recessive
111. Which of the following drugs is not recommended for the prophylaxis of febrile seizures –
 (A) Phenobarbitone (B) Valproic Acid
 (C) Benzodiazepines (D) Carbamazepine
112. A patient of 2 years of age, multiple seizure types, developmental delay and EEG showing 1-2 spike and slow wave pattern has –
 (A) West Syndrome (B) Landau Klefner Syndrome
 (C) Otharra Syndrome (D) Lennox Gastaut Syndrome
113. Drug of choice for West Syndrome in a patient of Tuberos Sclerosis is –
 (A) Lamotrigine (B) Topiramate
 (C) Clobazam (D) Vigabatrine
114. Drugs used for management of an attack of migraine include all except –
 (A) Sumatriptan (B) Ibuprofen
 (C) Prochlorperazine (D) Flunarizine
115. Which of the following is not associated with Tuberos Sclerosis-
 (A) Ash leaf lesions (B) Subependymal nodules on MRI
 (C) Periungual desquamation (D) Shagreen patches
116. CT scan cranium shows unilateral calcification and cerebral atrophy in –
 (A) Linear nevus Syndrome (B) Von HippelLindau Syndrome
 (C) Strauge Weber Syndrome (D) PHACE Syndrome
117. Which of the following ataxias is associated with abnormal RBCs?
 (A) Ataxia Telengectasia (B) Freiderich Ataxia
 (C) Roussy Levy Syndrome (D) Abetalipoprotienemia

118. Dystonia, choreo-athetosis with “eye of the tiger” sign on MRI is seen in
 (A) Wilson disease (B) Tardive Dyskinesia
 (C) Hallervorden-Spatz Disease (D) Huntington’s Chorea
119. Leigh disease is a-
 (A) Peroxisomal disorder (B) Mitochondrial Encephalomyelopathy
 (C) Leukodystrophy (D) Demyelinating disorder
120. The most common Autoimmune Encephalopathy in children is –
 (A) Acute Disseminating Encephalomyelitis (B) Anti NMDR Encephalitis
 (C) Hashimoto Encephalopathy (D) Bickerstaff Encephalitis
121. To study the etiology of a rare disease the study design most suited would be –
 (A) Cohort study (B) Double blind clinical trial
 (C) Case control study (D) Cross sectional study
122. Which parameter indicates how good a test is in excluding people without the condition –
 (A) Sensitivity (B) Specificity
 (C) Positive predictive value (D) Negative predictive value
123. When the predictor variable is continuous and the outcome variable is dichotomous which statistical test will you use to estimate sample size?
 (A) Student t test (B) Chi squared test
 (C) Correlation coefficient (D) Odd’s ratio
124. In statistical terms power of a study is –
 (A) 1-alpha (B) Alpha – 1
 (C) 1- beta (D) Beta -1
125. 30 out of 50 patients on “Medical treatment” of a disease survive, while 40 out of 50 patients on a “surgical treatment” of the same disease survive. The Odd’s Ratio of death amongst surgical treatment patients is –
 (A) 0.75 (B) 0.5
 (C) 0.25 (D) 2.0
126. Diagnostic test for confirmation of Hirschprung disease is –
 (A) Rectal Biopsy (B) Invertogram
 (C) X-ray abdomen (D) Barium enema
127. The most common type of Tracheo-oesophageal Fistula is –
 (A) Type A (B) Type B
 (C) Type C (D) Type D
128. The diagnostic features of a child with Duodenal Atresia are all except –
 (A) Bilious vomiting (B) Onset soon after birth
 (C) Abdominal Distention (D) Double bubble appearance
129. The most reliable viral marker of Hepatitis B acute infection is –
 (A) Hbs Ag (B) HBV DNA
 (C) Anti HBcIgM (D) HBe Ag

130. What proportion of perinatally acquired Hepatitis B infection goes on into carrier state?
 (A) 5% (B) 10%
 (C) 50% (D) 90%
131. Which of the following is true with regards to Hepatitis C infection?
 (A) 70-75% develop acute hepatitis
 (B) 30-40% develop chronic Hepatitis
 (C) 10-15% develop Hepatocellular carcinoma
 (D) 1-3% develop asymptomatic chronic carrier state
132. Which hepatitis is associated with highest mortality in pregnancy?
 (A) Hepatitis A (B) Hepatitis B
 (C) Hepatitis C (D) Hepatitis E
133. Highest Serum Ascites Albumin Gradient (SAAG) is seen in –
 (A) Tuberculous peritonitis (B) Nephrotic syndrome
 (C) Portal Hypertension (D) Pancreatic Ascites
134. Confirmatory test for diagnosis of Celiac Disease is –
 (A) Anti Endomyseal antibody (B) HLA DQ2/ DQ8 tests
 (C) Anti t TG antibody (D) Mucosal biopsy/ Histopathology
135. Which of the following is not a feature of Allagille syndrome?
 (A) Broad forehead, small chin, saddle nose
 (B) Butterfly vertebrae
 (C) Proliferation of bile ducts on liver biopsy
 (D) Pulmonary arterial stenosis
136. Red cell Distribution Width indicates which characteristic of RBC morphology?
 (A) Microcytosis (B) Poikilocytosis
 (C) Anisocytosis (D) Macrocytosis
137. A case of Thalassemia Minor who has Hb A₂ normal A₂ levels but raised Fetal Hb levels is likely to have –
 (A) Associated Iron Deficiency anaemia (B) Beta/Delta thalassemia trait
 (C) Silent carrier of B – Thalassemia trait (D) Double heterozygote state
138. Target cells are seen in all except –
 (A) Iron deficiency anaemia (B) Thalassemias
 (C) Liver disorders (D) B 12 deficiency anaemia
139. Ferrous Sulphate has bioavailability of –
 (A) 20% (B) 10%
 (C) 33% (D) 28%
140. To differentiate between Sickle cell anaemia and Sickle Thalassemia (B zero) which of the following tests will be most appropriate?
 (A) Level of HbS on Electrophoresis
 (B) Hb A₂ on Electrophoresis
 (C) Presence of Adult Haemoglobin on Electrophoresis
 (D) Electrophoresis of both parents

141. Good dietary source of Vitamin B12 is
 (A) Green leafy vegetables (B) Flesh foods
 (C) Fresh fruits (D) Sprouted beans
142. Peripheral smear examination of a patient with B12/Folic Acid deficiency shows all except. –
 (A) Hypersegmented Polymorphs (B) Megaloblasts
 (C) Thrombocytopenia (D) Schistocytes
143. To determine the need for chronic blood transfusion therapy in a case of Sickle disease which investigation is useful?
 (A) Liver Biopsy (B) MR Angiography
 (C) Trans cranial Doppler assessment (D) High Performance Liquid Chromatography
144. Inhibitors in a case of Haemophilia A should be treated with –
 (A) IVIG (B) Corticosteroids
 (C) Recombinant Factor VII a (D) Monoclonal antibodies
145. The most common hereditary haemorrhagic disorder in children is –
 (A) Prothrombin deficiency (B) Haemophilia A
 (C) Von Villebrand Disease (D) Fibrinogen deficiency
146. A child of 7 years of age with proportionate short stature has a height, 4 STD below median, a height age of 3 years and a bone age of 5 years. His diagnosis is –
 (A) Hypopituitarism (B) Hypothyroidism
 (C) Familial Short stature (D) Achondroplasia
147. Indications of Human Growth Hormone Therapy include all except –
 (A) Turner Syndrome (B) Chronic Renal Failure
 (C) Idiopathic Short stature (D) Constitutional Delay of Puberty and Growth
148. Skeletal changes of hypothyroidism include all except –
 (A) Delayed maturation (B) Beaking of lumber vertebrae
 (C) Epiphyseal Dysgenesis (D) Bullet shaped metacarpals
149. Most common cause of Congenital Hypothyroidism is –
 (A) Congenital Thyroid Dysgenesis (B) Maternal Iodine deficiency
 (C) Central Hypothyroidism (D) Defective synthesis of Thyroxin
150. DiGeorge Syndrome consists of following except –
 (A) Hyperparathyroidism (B) Tracheo oesophageal Fistula
 (C) Conotruncal defects of heart (D) Thymic Aplasia
151. In a case of polyuria, upon water deprivation testing, if urinary osmolarity is <300 the diagnosis is –
 (A) Primary polydipsia (B) Chronic renal failure
 (C) SIADH (D) Diabetes Insipidus
152. What is common between SIADH and Cerebral Salt wasting?
 (A) Polyuria (B) Hypervolemia
 (C) Hyponatremia (D) Dehydration

153. Primary neonatal TSH screening for Hypothyroidism is done at an age of
 (A) After 36 hours (B) On cord blood
 (C) Immediately after birth (D) After 72 hours
154. Most common cause of Central Precocious Puberty in girls is –
 (A) Idiopathic (B) Secondary to CNS tumours
 (C) Tuberculous meningitis (D) Cranial Irradiation
155. Glucocorticoids are mainly produced in
 (A) Zona Glomerulosa (B) Zona Fasciculata
 (C) Zona Reticularis (D) Adrenal Medulla
156. Commonest form of Adrenogenital Hyperplasia producing ambiguous genitals in females is
 (A) 21-Hydroxylase deficiency
 (B) 11 B Hydroxylase deficiency
 (C) 3 B Hydroxysteroid dehydrogenase deficiency
 (D) 17 alpha Hydroxylase deficiency
157. Which of the following types of Congenital adrenal Hyperplasias is associated with hypertension?
 (A) 21 Hydroxylase (B) 11 B Hydroxylase deficiency
 (C) Lipoid CAH (D) 3 B Hydroxysteroid dehydrogenase deficiency
158. A patient of Adrenal insufficiency with negative adrenal antibodies and high Very Long Chain Fatty Acids (VLCFA) is likely to be a case of
 (A) Addison Disease (B) Adrenoleukodystrophy
 (C) AAA Syndrome (D) Autoimmune Polyendocrinopathy Syndrome
159. Maturity onset Diabetes of Youth (MODY) is a type of Diabetes characterized by all except –
 (A) It is inherited by Autosomal dominant transmission
 (B) It is also called Type 2 Diabetes
 (C) Onset of symptoms is at a less than 25 years of age
 (D) Multiple type of genes can give lead to it
160. Renal Rickets differ from all other types in that –
 (A) Alkaline Phosphatase is not raised (B) Phosphate levels are raised
 (C) 25(OH)D is decreased (D) It is clinically a mild form of Rickets
161. Secundum type of ASD is characterized by all except –
 (A) Prominent pulsations in left parasternal region
 (B) Wide and fixed split second heart sound
 (C) qR pattern is seen on ECG on right chest leads
 (D) Right ventricular hypertrophy
162. Supracristal VSD is characterised by signs of –
 (A) Prolapse of Aortic valve (B) Cyanosis
 (C) Right Ventricular hypertrophy (D) Mid-diastolic murmur

163. Congenital Aortic stenosis is characterised by all except –
 (A) Pansystolic murmur over the aortic area
 (B) Ejection click over aortic area
 (C) Heaving apex beat
 (D) Syncope, dizziness, angina
164. Coarctation of Aorta is commonly associated with –
 (A) Congenital Rubella Syndrome (B) Marfan Syndrome
 (C) Holt Oram Syndrome (D) Turner Syndrome
165. Polysplenia is seen with which Cardiac anomaly –
 (A) Left Isomerism (B) Fallot's Tetralogy
 (C) Transposition of Great Vessels (D) Atrial Septal Defect
166. Degree of cyanosis in Fallot's tetralogy is dependent upon –
 (A) Size of VSD (B) Degree of Aortic override
 (C) Severity of Pulmonary stenosis (D) Patency of PDA
167. Which of the following is not correct in PDA –
 (A) Continuous murmur (B) Widely split second heart sound
 (C) Left ventricular hypertrophy (D) Mid diastolic murmur over the apex
168. A patient with cyanotic CHD, Left ventricular hypertrophy and oligoemic lung fields on X-ray may have –
 (A) Fallot's Tetralogy
 (B) Total anomalous pulmonary venous return (TAPVR)
 (C) Tricuspid Atresia
 (D) Transposition of great vessels
169. The Congenital Heart Disease Maternal Diabetes Mellitus is associated with –
 (A) Ventricular Septal Defect (B) D Transposition of Great Vessels
 (C) Truncus Arteriosus (D) Hypoplastic Left Heart Syndrome
170. Complete Heart Block is associated with –
 (A) Abstein Anomaly (B) Double Outlet Right Ventricle
 (C) L-Transposition of Great Vessels (D) Primum ASD
171. Drug of choice for treatment of SVT is –
 (A) Adenosine (B) Verapamil
 (C) Digoxin (D) B-blockers
172. Drug of choice for treatment of Long qT Syndromes is –
 (A) Digoxin (B) Phenytoin
 (C) Procainamide (D) Beta Blockers
173. Iron deficiency anaemia in a patient of Tetralogy of Fallot's increases the risk of all except –
 (A) Congestive Cardiac Failure (B) Hypercynotic Spells
 (C) Cerebral Thrombosis (D) Cerebral abscess

174. Which of the following is not a sign of Digoxin Toxicity?
 (A) Depression of ST segment (B) AV block
 (C) Ventricular Extra systole (D) Supraventricular Tachycardia
175. Figure of 8 appearance on X-ray is seen in which Congenital Heart Disease?
 (A) Transposition of Great Vessels
 (B) Coarctation of aorta
 (C) Vascular rings
 (D) Total anomalous pulmonary venous return (TAPVR)
176. Episodic Viral Wheeze is characterised by all except –
 (A) Usually occurs in school age (B) Children tend to grow out of disease with age
 (C) Always associated with viral infections (D) Asymptomatic between episodes
177. Most common organism responsible for Chronic Otitis Media is –
 (A) Streptococcus pneumoniae (B) Staphylococcus epidermidis
 (C) Pseudomonas aeruginosa (D) Moraxella catarrhalis
178. Most common presenting feature of bilateral Serous Otitis Media is –
 (A) Earache (B) Fever
 (C) Deafness, delayed language (D) Serous discharge from ears
179. Characteristics of Bronchiolitis are all except –
 (A) First episode of wheezing (B) Peak age is 2 to 6 months
 (C) Hyperinflation of lungs and chest (D) High fever and toxemia
180. Management of ARDS includes all except –
 (A) Open lung ventilation (B) Permissive hypercapnia
 (C) Non Invasive ventilation (D) Inverse Ratio Ventilation
181. Cystic Fibrosis is diagnosed by Sweat Chloride levels –
 (A) >20 mEq/L (B) >60 mEq/L
 (C) 100 mEq/L (D) 150 mEq/L
182. 3 tiers of care of “Mission BalamSukham” consist of all except-
 (A) Nutrition Rehabilitation Centre (B) Child Nutrition Care Centre
 (C) Village Child Nutrition Centre (D) Child Malnutrition Treatment Centre
183. Mission Indradhanush is a programme related to –
 (A) Providing 7 components of nutrition to children
 (B) Providing 7 vaccines to children
 (C) Child education in 7 subjects
 (D) Treatment of 7 deadly diseases of childhood
184. All the following regarding ready to use food is true except –
 (A) It does not contain moisture
 (B) It provides micronutrients crucial for treatment of SAM
 (C) It has a shelf life of 15 days
 (D) It requires no cooking
185. The key worker for implementation of Home based Newborn Care is –
 (A) Anganwadi worker (B) ASHA worker
 (C) ANM (D) Health supervisor

186. All the following regarding Bal Sakha Yojana is true except –
 (A) This scheme covers newborn babies born in rural areas
 (B) It is a public – private partnership scheme
 (C) Beneficiaries include BPL families, APL tribal families and Middle class parents with income < 2 lakh per annum
 (D) It covers babies up to 30 days of life
187. What is the vector for Japanese Encephalitis virus?
 (A) Anopheles Mosquitos
 (B) Culex Mosquitos
 (C) Hard tick
 (D) Soft tick
188. Cherry Red Spot is seen in –
 (A) Neuronal Ceroid Lipofuscinosis
 (B) Alexander Disease
 (C) Hurler Syndrome
 (D) Sandhoff Disease
189. Rocker bottom feet are seen in –
 (A) Tele pes Equino Varus
 (B) Achonroplasia
 (C) Freidrich Ataxia
 (D) Patau Syndrome
190. Follicular Hyperkeratosis is seen in-
 (A) Vitamin B3 deficiency
 (B) Vitamin A deficiency
 (C) Thiamine deficiency
 (D) Vitamin E deficiency
191. Osteoporosis of bone is one of the prominent features of –
 (A) Vitamin D deficiency
 (B) Vitamin C deficiency
 (C) Hypervitaminosis A
 (D) Selenium deficiency
192. Which out of the following is the commonest cause of bacterial diarrhoea?
 (A) ETEC
 (B) EPEC
 (C) Salmonella typhimurium
 (D) Shigella sonnei
193. Antigenic drift is seen in –
 (A) Chickenpox virus
 (B) Influenza virus
 (C) Dengue
 (D) Adeno virus
194. A patient with prosthetic valve has developed bacterial endocarditis. What is the most likely organism?
 (A) Staphylococcus aureus
 (B) Streptococcus viridance
 (C) Staphylococcus epidermidis
 (D) Pseudomonas aeruginosa
195. In Malaria the form of parasite that is transferred from mosquito to human is –
 (A) Sporozoit
 (B) Merozoit
 (C) Gametocyte
 (D) Hypnozoit
196. The agent responsible for Primary Atypical Pneumonia is –
 (A) Legionella pneumophilla
 (B) Streptococcus Pneumonie
 (C) Klebsiella pneumonie
 (D) Mycoplasma pneumonie
197. Most common malignancy in AIDS is –
 (A) Kaposi sarcoma
 (B) B cell Lymphoma
 (C) Leukaemia
 (D) Burkit's Lymphoma

198. Which of the following is not used for the diagnosis of Congenital Developmental Dysplasia of Hip?
- (A) Galezzi (B) Ortoleni
(C) Hawking (D) Barlow
199. A child with hypernatremia was being treated when he developed convulsions. What treatment should be given immediately?
- (A) Inj. Phenytoin
(B) 3% NaCl solution IV
(C) Mannitol
(D) Reduce the Sodium concentration of the IV fluid
200. Which is the most common form of extra pulmonary tuberculosis in children?
- (A) Meningitis (B) Abdominal
(C) Lymph nodes (D) Skeletal