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Answer Key: 1 B,D,E; 2 B,D; 3 B,D; 4 A; 5 C; 6 B; 7 C; 8 D; 9 E; 10 D; 11 A; 12 B; 13 C; 14 A,D,E; 15 B,D,E; 16 B,D; 17 B,C,D; 18 A,B,C,D,E; 19 A,B,E.

Discussion of some of the questions follows:
(3) Jaundice due to biliary atresia or hepatitis occurs later and has an increased direct bilirubin fraction. Both may have splenomegaly, pale stools, and urinary bilirubin. In atresia there is no bile pigment in the duodenal fluid nor will bile flow be stimulated by phenobarbital.
(16) See page 334.
(17) Poly X or Y occurs in approximately 1/1,000 live births. No characteristic abnormalities are found in females, but aggressiveness and tall stature have been described in males. The incidence of Klinefelter syndrome is 1/1,000 and is associated with advanced maternal age. Some patients are mildly retarded and all have infertility. Turner syndrome occurs in 1/10,000 live births, and 75% of the time is due to a paternal loss of the X or Y. Y is unknown.
(18) The reasons why Down syndrome occurs should be elucidated to evaluate the risk of recurrence. All of the choices are possible. Nondisjunction (failure of synapsis during meiosis) can be paternal or maternal (associated with advanced age). If nondisjunction occurs during mitotic division, it results in mosaicism (multiple cell populations). Although the parent may be clinically normal, the infant may inherit the abnormal cell population. Chromosomal breaks can result in translocation, and this pattern is age independent. Environmental insults (diagnostic abdominal roentgenograms and virus infections, i.e., infectious hepatitis) can also occur at any age, and are possible, although not proven, causes.
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