Self-Assessment Quiz

1. You are asked by the parents, shortly after the birth of their child, to be the pediatrician for their 3,650 gm male child. You should:
   A. Check the obstetric record for history of pregnancy and delivery.
   B. Tell the nurse to inform the mother that you will answer her questions when she comes to her first office visit.
   C. Defer first breast-feeding for 24 hours to allow the mother to rest.
   D. Discuss individual differences in infants' feeding behavior.
   E. Warn the mother who wishes to breast-feed to avoid chocolate, spices, and coffee in her diet.

   During your examination of the baby and discussions with the mother the observations or situations (2 to 5) would lead to actions (lettered A to E):
   2. Mother states that she didn't want this baby at this time.
   4. Mild forefoot adduction and tibial torsion.
   5. Mother has painful uterine contractions with breast feeding.
      A. Suppress prolactin secretion with estrogen therapy.
      B. Ask nursing service to observe mother for signs of depression.
      C. Ask for surgical consultation.
      D. Reassure mother of need for no special therapy.
      E. Ask for psychiatric consultation.

   6. TRUE statements regarding pubertal development include:
      A. Testicular enlargement usually precedes the onset of pubic hair.
      B. Presence of pubic hair in a girl rules out the diagnosis of gonadal failure.
      C. Onset of menarche usually heralds the end of the growth spurt.
      D. Both sexes experience an increase in lean body mass early in puberty.
      E. Menarche generally occurs within two years of onset of breast development.

   7. Characteristics usually associated with constitutional delay of growth but NOT normal variant short stature include:
      A. Delayed onset of puberty.
      B. Significant septemeric illness.
      C. Retarded bone age.
      D. Normal adult height.
      E. Familial history of short stature.

   8. Which of the following should be seriously considered in the treatment of a 12 year old with classic XO (Turner) syndrome?
      A. Gonadectomy.
      B. Testosterone enanthate.
      C. Human chorionic gonadotropin.
      D. Estrogen.
      E. Oxandrolone.

   9. In an adolescent with delayed puberty, a history of hypoxia is most suggestive of which of the following syndromes?
      A. Prader-Willi.
      B. Laurence-Moon-Biedl.
      C. Turner.
      D. Klinefelter.
      E. Kallmann.

   10. True statements regarding the management of status epilepticus include:
        A. Valproic acid (Depakene) is the drug of first choice administered intravenously.
        B. Stabilization of vital functions should await control of seizures.
        C. Most patients will require general anesthesia for control of seizures.
        D. Respiratory depression from diazepam (Valium) is a serious complication of therapy in patients with status epilepticus.
        E. Phenytoin is an effective drug for control of status when used intravenously.

   11. TRUE statements about status epilepticus include:

   12. PL 94-142 requires that all handicapped children:
        A. Be evaluated by a physician.
        B. Be mainstreamed.
        C. Receive an "appropriate education."
        D. Have an individual educational plan (IEP).
        E. Be included in the provisions unless severely handicapped.

   13. "Related services" under PL 94-142 include all but which one of the following:
        A. Physical therapy.
        B. Medical treatment.
        C. Occupational therapy.
        D. Counseling services.
        E. Audiology.

   14. "Due process" under PL 94-142 requires that:
        A. Parents must give consent for a child's evaluation and placement.
        B. Parents must attend planning meetings at which time their child's educational plan will be formulated.
        C. Children must be tested in the English language.
        D. Child's placement must be reviewed regularly.
        E. Entire evaluation must be done at specified intervals.

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