Self-Evaluation Quiz

The questions in this self-evaluation quiz are based on the articles in this issue of the journal. Each of the questions or statements is followed by five possible answers or completions. Select all of the correct answers to each of the questions and circle the corresponding letters. The answers appear on the inside front cover of this issue.

To earn two hours of Category 1 credit and two hours of PREP credit for this quiz, you must currently be enrolled in PREP or subscribing to PEDIATRICS IN REVIEW. You will receive two quiz reply cards this year along with a letter acknowledging your enrollment or subscription. Each card provides space to answer the questions from five issues of the journal. Please use CARD #1 for responses to the questions in the July through November issues and CARD #2 for the December through April issues. To receive proper credit, both cards MUST be returned by June 30, 1987.

We invite your specific comments about the relevance of each of the articles and any other comments you wish to make about the journal. You may enclose your comments with your quiz reply cards, or send them directly to PEDIATRICS IN REVIEW, American Academy of Pediatrics, 141 Northwest Point Road, PO Box 927, Elk Grove Village, IL 60007.

1. Which of the following is least likely to be true? Pearly penile papules:
   A. Essentially occur only in postpubertal boys and men.
   B. Are a sexually transmitted but benign condition.
   C. Are present in about 20% of men.
   D. Are primarily located around the corona.
   E. Consist of lesions that individually are 1- to 3-mm tall white papules.

2. Which of the following infections due to Pseudomonas aeruginosa occur in immunologically competent hosts?
   A. "Hot tub folliculitis."
   B. Otitis externa.
   C. Yellow-green staining of toenails.
   D. Infection of the toe webs.
   E. "Gram-negative folliculitis."

3. A 10-year-old girl has a painful itchy rash that started one day after she used a neighbor's hot tub. The lesions are 2- to 4-mm erythematous papules and pustules that are mostly in the areas covered by her swim suit. She has a purulent conjunctivitis but is otherwise well. Which one of the following features of her illness would be least typical for P. aeruginosa folliculitis acquired in this manner?
   A. Painful itchy nature of the rash.
   B. 10- to 11-day incubation period.
   C. Distribution of the lesions.
   D. Associated purulent conjunctivitis.
   E. Absence of fever of lymphadenopathy.

4. True statements pertaining to Gianotti-Crosti syndrome as seen in the United States include:
   A. Whereas hepatitis is very common, generalized lymphadenopathy is rare.
   B. Skin lesions are usually asymptomatic, slowly progressive, pink to red, 5- to 10-mm papules.
   C. Skin lesions are usually acral (face, arms, legs, buttocks).
   D. Most patients are otherwise well, children younger than 10 years of age.
   E. Although associated viral infections are common, hepatitis B is uncommon.

5. Which of the following statements pertaining to psychologic injury and children is least likely to be true?
   A. Adjustment of the child and family before the injury may be more important in predicting the type and severity of the child’s reaction than the injury itself.
   B. The younger the child is, the less adaptive his response is and the more damaging the long-term negative sequelae.
   C. Past experience with a major traumatic experience usually renders the child less vulnerable to a current injury.
   D. An acute single episode of injury is generally less psychoanalytic than chronic or recurrent injuries.
   E. Subjective meaning of the injury to the child may be more important than the objective reality of the injury.

6. True statements include:
   A. A child’s response to a specific family problem may mimic a psychiatric or behavioral disorder.
   B. The physician should use his or her patient’s behavioral difficulties as clues to help identify a parental problem.
   C. Children whose parents have mental illness or drug abuse problems are more likely to display general psychiatric difficulties, as well as the same type of psychiatric problems as their parents.
   D. The more severe the mental illness or drug abuse, the more likely it is that the parent will be willing to acknowledge the problem.
   E. A child experiences marital violence vicariously and internalizes it in ways that affect his or her relationship with parents, peers, and future marital partner.

7. Factors that increase the risk for iron deficiency in infants include:
   A. Prematurity.
   B. Low birth weight.
   C. Delayed clamping of the umbilical cord.
   D. Frequent infections.
   E. Whole cow milk in diet at 4 months of age.

8. Which of the following will increase the amount of iron absorbed from a meal?
   A. Beans.
   B. Orange juice.
   C. Spinach.
   D. Cow milk.
   E. Tea.

9. Which of the following is least likely to be a true statement?
   A. Most infants do not absorb much iron from the diet until after 2 months of age.
   B. Breast-feeding supplemented with iron-fortified cereals will always meet the iron requirements of healthy infants through 1 year of age.
   C. Iron-fortified formulas cause no more gastrointestinal side effects than nonfortified formulas.
   D. Isolated iron deficiency has not been proven to cause increased susceptibility to infections.
   E. Ferrous sulfate drops should not be given with meals.

10. The single most convincing test/ evidence for iron deficiency is:
   A. Low serum ferritin level.
   B. Increased free erythrocyte protoporphyrin levels.
   C. Low hemoglobin value.
   D. Low mean corpuscular volume.
   E. Therapeutic response to iron.

11. A 6-year-old girl had a generalized tonic-clonic afebrile seizure lasting five minutes two days ago. The past history and physical and neurologic examination findings are unremarkable. Which of the following studies would be indicated at this time?
   A. Fasting blood sugar.
   B. Lumbar puncture.
   C. Skull roentgenograms.
   D. Computed tomographic scan.
   E. EEG.

12. Idiopathic seizure has been diagnosed in the girl mentioned above. Which one of the following would be most likely to be appropriate in her management?
   A. Phenobarbital.
   B. Phenyltoin (Dilantin).
   C. Carbamazepine (Tegretol).
   D. Sodium valproate (Depakene).
   E. No anticonvulsant.

13. Which of the following is least likely to be a true statement?
   A. A seizure lasting less than 30 minutes does not cause permanent brain damage.
   B. A seizure triggered by fever can usually be accurately differentiated from a febrile seizure by the EEG.
   C. First seizures are rarely associated with status epilepticus.
   D. Most seizures are treated primarily because of their psychosocial risks.
   E. Use of anticonvulsant medications does not definitely decrease the mortality risk for seizures.

14. Which of the following is not a true association?
   A. Generalized tonic-clonic seizures, abnormal neurologic examination findings, nonepileptiform EEG—risk for second seizure about 30%.
   B. Partial complex seizure, abnormal neurologic examination findings, focal epileptic EEG—risk for second seizure greater than 95%.
   C. Absence seizure—recurrent risk less than 20%.
   D. Second seizure—risk for recurrence 50% or greater.
   E. Seizures controlled for 2 years on anticonvulsants—after slow weaning, chance of recurrence about 25%.

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### AAP Continuing Education Calendar

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<td>February</td>
<td>Current Concepts in Pediatric Medicine (with the San Diego Children's Hospital)</td>
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These programs feature subject matter which is coordinated with the PREP curriculum and are eligible for PREP credits.

For further information, contact: CME, Department of Education, American Academy of Pediatrics, PO Box 927, Elk Grove Village, IL 60007. (800) 433-9016. In Illinois (800) 421-0589.