## **NEONATOLOGY**

## **PAPER-II**

Time: 3 hours NEONAT/D/20/19/II

Max. Marks:100

## **Important Instructions:**

- You are provided with 5 answer sheet booklets. Each individual answer sheet booklet consists of 10 pages excluding the covering jackets.
- Answers to all the questions must be attempted within these 5 answer sheet booklets which must be later tagged together at the end of the exam.
- No additional supplementary answer sheet booklet will be provided.
- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

## Write short notes on:

1.	Write ILAE classification of neonatal seizure and write an algorithm of neonatal seizure management.	5+5
2.	a) Algorithm for postnatal workup of antenatal renal collecting system dilatation.	5+5
	b) Algorithm for evaluation and treatment of refractory hypoglycaemia.	
3.	Recent recommendation of PRBC transfusion in preterm infant and enumerate QI practices to optimize transfusion need.	4+6
4.	Describe Pattern of Artifacts in Point of care Lung USG. Describe lung USG finding in Pneumothorax, TTNB and Pneumonia.	3+3+2+2
5.	<ul><li>a) Distribution of clinical phenotype of preterm infants.</li><li>b) Chromosomal Microarray.</li></ul>	5+5
6.	Postnatally acquired CMV infection in ELBW infants – Risk factors, presentations and management.	2+3+5
7.	A 27 weeks preterm with birth weight of 890 grams received surfactant, was on ventilation, deteriorated on end day 2 with tachycardia, and increase need of FiO <sub>2</sub> . Discuss causes, how to approach and classify severity of hsPDA and current pharmacotherapy for hsPDA.	2+2+3+3
8.	<ul><li>a) Enumerate Development Supportive Care for VLBW infants.</li><li>b) Hearing Screening protocol for at risk New born.</li></ul>	6+4
9.	<ul><li>a) How to investigate an infection outbreak in NICU?</li><li>b) Describe the core components of hospital antibiotics stewardship.</li></ul>	5+5
10.	A 25 weeks preterm now 34 weeks PMA still on ventilator has repeated	4+6

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episodes of desaturations: how would you investigate and list outline of

respiratory management of this neonate.