



- 1. Classifying a baby as high risk indicates that:**
 - a. The infant is sick.
 - b. The infant will probably die.
 - c. The infant has a greater chance of developing a problem than most infants.
 - d. The infant must be treated urgently.

- 2. Why is it important to monitor a high-risk infant?**
 - a. To obtain hospital records
 - b. To reassure the parents
 - c. To detect problems
 - d. To treat the infant

- 3. How should you manage an infant with a clubbed foot?**
 - a. Refer the infant to an orthopedic clinic within the first 72 hours after delivery.
 - b. Refer the infant to a level 3 hospital for surgical correction.
 - c. Ask the mother to bring the infant back at 2 weeks for a further examination.
 - d. A clubbed foot corrects spontaneously and, therefore, does not need to be treated.

- 4. Dislocation of the hip should be diagnosed by:**
 - a. Taking an X-ray of the hips of all infants
 - b. By inspecting the infant for a mass in the groin
 - c. By performing an Apt test on all infants before discharge
 - d. By doing a Barlow's test on all infants after delivery

- 5. Infants with ambiguous genitalia:**
 - a. Should all be brought up as females
 - b. Should be referred to a plastic surgery clinic when they are 1 month old.
 - c. Should be seen again at 6 months when it is easier to decide whether they are male or female
 - d. Should be referred urgently to a level 3 hospital for further investigation.

- 6. Infants that appear normal but have a single umbilical artery:**
 - a. Have Down syndrome.
 - b. Should be carefully examined for other abnormalities.
 - c. Can be discharged as these are common minor abnormalities that cause no problem.
 - d. Should be referred urgently to a genetics clinic for chromosome analysis.

- 7. Vomiting green bile after delivery suggests a diagnosis of:**
 - a. Oesophageal atresia
 - b. Duodenal atresia
 - c. An absent anus
 - d. Meningocele

- 8. Oesophageal atresia should be suspected if:**
 - a. Intra-uterine growth restriction is diagnosed
 - b. Oligohydramnios was present during the pregnancy
 - c. Polyhydramnios was present during the pregnancy
 - d. The mother develops hypertension during pregnancy.

- 9. How does oesophageal atresia often present in the newborn infant?**
 - a. A distended abdomen and a double bubble on X-ray
 - b. The infant dribbles saliva and a nasogastric tube cannot be passed into the stomach
 - c. An infant vomits bile.
 - d. The infant has a hoarse cry.

- 10. What is the immediate management of a meningomyelocele?**
- Cover it with sterile gauze
 - Leave it exposed
 - Paint it with gentian violet
 - Cover it with sterile transparent dressing (Opsite) or clingwrap.
- 11. Which of the following is a sign of Down syndrome?**
- Small eyes
 - No anus
 - Convulsions
 - Hypotonia (floppy)
- 12. Infants born with the fetal alcohol syndrome often have:**
- An upward slant of the eyes
 - A long, smooth upper lip
 - Hydrocephalus
 - Single palmar creases
- 13. When speaking to parents of an infant with birth defects, it is best:**
- To tell them as soon as possible.
 - To wait until all the results of the special investigations are available.
 - Not to allow them to see the infant until they have had a chance to get over the shock
 - To let them discover for themselves that their infant is abnormal
- 14. What is cephalhaematoma**
- A bleed into the subaponeurotic space of the skull
 - A bleed into the subdural space
 - A bleed under the periosteum of the parietal bone
 - A bleed into the brain
- 15. A subaponeurotic haemorrhage**
- May cross the midline
 - Never crosses the midline
 - Does not cause pallor or shock
 - Is common
- 16. A traumatic forceps delivery may cause**
- A periventricular haemorrhage
 - Haemorrhagic disease of the newborn
 - Brachial palsy
 - Subaponeurotic haemorrhage
- 17. A facial palsy**
- Usually recovers spontaneously after a few days
 - Usually only recovers after a few months
 - Usually requires surgical decompression of the facial nerve
 - Usually does not recover

18. A brachial palsy is most commonly seen in:

- a. Preterm infants born by vaginal delivery
- b. Large infants with impacted shoulders
- c. Infants born by elective caesarean section
- d. Infants delivered by vacuum extraction

19. What is the importance of enlarged breasts at birth?

- a. They are abnormal and indicate a hormonal imbalance.
- b. They are normal in girls but abnormal in boys
- c. They are normal only if the breasts return normal by 1 week.
- d. They are normal in girls and boys and may last for a few months.

20. When should a baby be examined?

- a. At around an hour after birth
- b. Before discharge from hospital
- c. If there is maternal concern about the baby's condition
- d. All of above