



Questions for this month's clinical challenge are based on articles in this issue. The style and scope of questions is in keeping with the multiple choice questions of the RACGP Fellowship exam. The quiz is endorsed by the RACGP Quality Improvement and Continuing Professional Development Program and has been allocated 4 Category 2 points per issue. Answers to this clinical challenge are available immediately following successful completion online at www.gplearning.com.au. Clinical challenge quizzes may be completed at any time throughout the 2011–2013 triennium, therefore the previous months answers are not published.

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Single completion items



DIRECTIONS Each of the questions or incomplete statements below is followed by five suggested answers or completions. Select the most appropriate statement as your answer.

Case 1

Georgina Kincaid

Georgina, aged 2 years, is brought to see you by her mother. Georgina's child care teacher is concerned she lags 'behind' the rest of the class.

Question 1

Which of following developmental skills would you expect Georgina to be able to do by age 2 years:

- A. do up buttons
- B. climb stairs
- C. ride a tricycle
- D. have bowel control
- E. show clear hand preference.

Question 2

Georgina lives with her parents and younger siblings. Which of the following is NOT a risk factor for developmental delay:

- A. prematurity
- B. low parental education
- C. visual impairment
- D. social isolation
- E. macrosomia.

Question 3

You give the Parents' Evaluation of Developmental Status (PEDS) questionnaire to Georgina's mother. Which of the following statements is true:

- A. parents are unlikely to accurately assess developmental problems
- B. the PEDS questionnaire is administered by trained psychologists
- C. the PEDS questionnaire is suitable for

use in primary school aged children (5–11 years)

- D. the PEDS questionnaire may form part of broader developmental surveillance
- E. an experienced clinician's judgment of developmental delay is generally accurate.

Question 4

The following week Georgina's mother brings in her youngest child, Simon (aged 8 months), with gastroenteritis. She asks you to assess Simon's development during the visit. What is the most appropriate course of action:

- A. arrange review of Simon next week
- B. refer for developmental assessment given Georgina has a developmental delay
- C. ask Georgina's mother about Simon's developmental milestones
- D. refer for counselling to help deal with Georgina's diagnosis of developmental delay
- E. administer the Denver Developmental Screening test.

Case 2

Jack Worthington

Jack, aged 2 years, presents with reduced social interaction with his parents and other children. Jack's parents report that he appears disinterested in them, does not wave goodbye when they leave, prefers to play by himself and only plays with his old blocks, despite being offered new toys.

Question 5

Which of the following is a 'red flag' for autism:

- A. difficulty in sitting still
- B. not walking unaided by 18 months of age
- C. not saying single words by 16 months of age
- D. constant crying
- E. short stature.

Question 6

Jack's parents report Jack's language is less developed than his peers. Which of the following is true of language development in children with autism:

- A. language regression is rare
- B. repetition of phrases is referred to as neologisms
- C. metaphors are often well understood
- D. initiation of conversation is difficult
- E. the creation of words and own language is rare.

Question 7

Jack is diagnosed with autism and started on an early intervention program. What is NOT part of early intervention:

- A. role play
- B. video modelling
- C. timetables
- D. picture scripts
- E. auditory integration.

Question 8

Jack has persistent difficulty sleeping at night. Which medication would be the most appropriate to prescribe:

- A. dexamphetamine
- B. sedating antihistamine
- C. risperidone
- D. temazepam
- E. diazepam.

Case 3**Ryan Philips**

Ryan, aged 3 years, is brought in by his parents. Ryan's mother is finding Ryan increasingly difficult to manage. He yells at other children, throws his food across the room and refuses to go to bed at night.

Question 9

Ryan's father thinks problem behaviour is 'normal' in young children and Ryan's behaviour will improve as he gets older. Which of the following statements is true of problem behaviour in children:

- A. 50% of children experience externalising behavioural problems
- B. internalising behavioural problems (ie. anxiety and depression) are more common than externalising behavioural problems (ie. aggression, hyperactivity)
- C. 10% of behavioural problems develop into childhood mental health problems
- D. behavioural difficulties can arise when children strive to achieve milestones
- E. child factors do not contribute to problem behaviours.

Question 10

Ryan usually falls asleep around 10 pm and gets up at 6 am each morning. He refuses mealtime food, only drinking milk and having occasional snacks. Ryan's father travels with work, and is usually only home for 1–2 days per week. Which of the following is NOT a risk factor for problem behaviour:

- A. family stress and trauma
- B. low iron
- C. inadequate sleep
- D. insecure parent-child relationship
- E. parenting practices which include giving rewards.

Question 11

You provide Ryan's parents with information on addressing problem behaviours. Which of the following management strategies could be used with Ryan:

- A. employ a sticker chart with a new toy offered after 15 stickers
- B. avoid child care to ensure a consistent approach to problem behaviours
- C. lock Ryan's door to make him stay in bed
- D. provide short explanations to Ryan of what behaviour is expected

- E. enforce different consequences to assess which is the most effective in Ryan.

Question 12

Ryan's mother wants to know what consequences to enforce when Ryan behaves inappropriately. Which of the following actions would be appropriate:

- A. time out for 6 minutes
- B. withdrawal of television privileges for the next 24 hours
- C. quiet time in the same room
- D. lecturing Ryan on why the behaviour is inappropriate
- E. removal of a reward sticker previously given.

Case 4**Samantha Redding**

Samantha, 30 years of age, is breastfeeding her 3 month old daughter. Samantha has developed an upper respiratory tract infection and wants to know what medications are safe to take while she is breastfeeding.

Question 13

What is true of medications during breastfeeding:

- A. the A, B, C, D, X categories of pregnancy apply also during breastfeeding
- B. approximately 50% of the maternal dose is received by the infant
- C. a breastfed infant receives more maternal drug than a fetus during pregnancy
- D. the weight of the child does not need to be considered
- E. pharmaceutical research is rarely carried out on breastfeeding women.

Question 14

You discuss the most appropriate drugs to use during breastfeeding with Samantha. Which of the following properties is preferable in a drug that will be used by a breastfeeding mother:

- A. long half-life
- B. low protein binding
- C. high oral availability
- D. topical treatments
- E. recently undertaken phase III trials.

Question 15

Samantha usually takes echinacea and anti-histamines to help with symptoms of an upper respiratory tract infection. Which of the following commonly used treatments is safe in breastfeeding:

- A. echinacea
- B. pseudoephedrine
- C. beclomethasone
- D. sedating antihistamines
- E. aloe.

Question 16

You discuss options of analgesia with Samantha. Which nonsteroidal anti-inflammatory drug is preferred in breastfeeding:

- A. ibuprofen
- B. aspirin
- C. naproxen
- D. paracetamol
- E. diclofenac.