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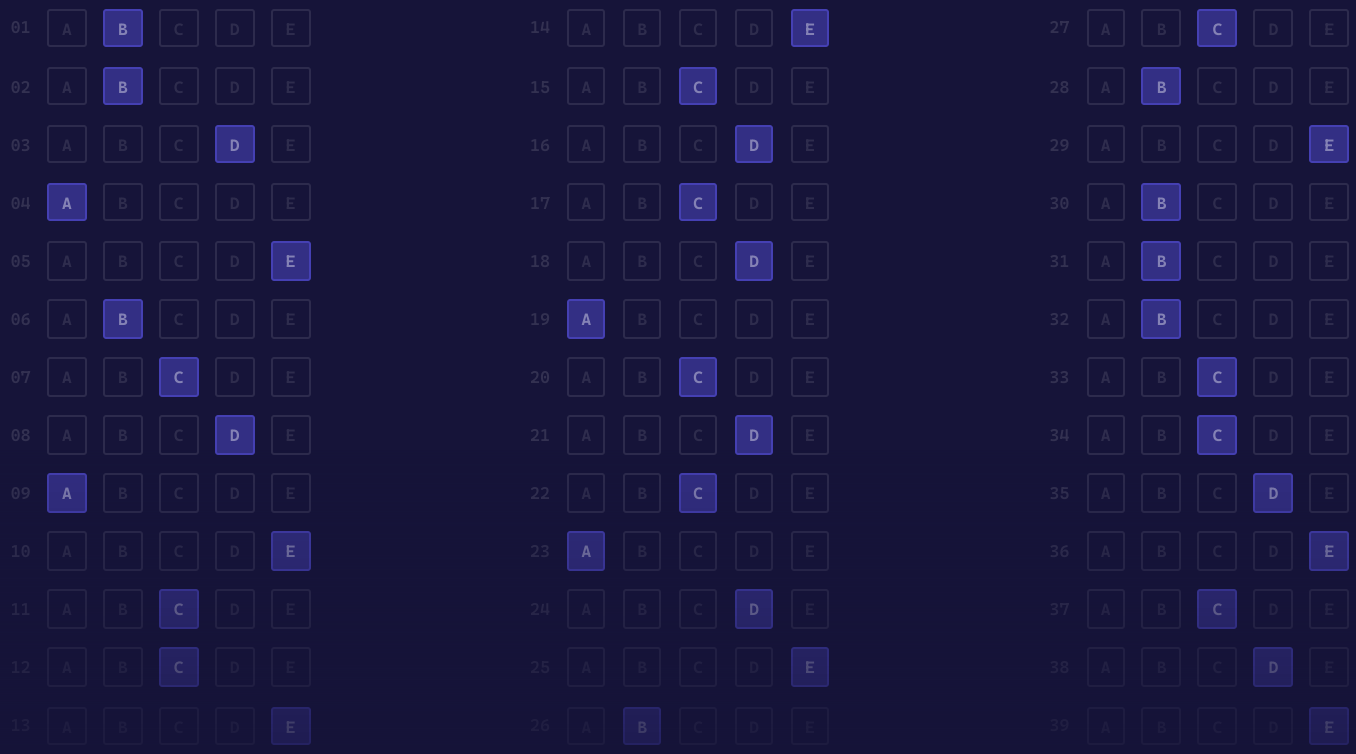

PRACTICE QUESTIONS

TTBU - The Testing Board Ukraine

EPUPD

English Prof. Exam Pediatric

EDITION	QUESTIONS	ISSUED
Demo	9	September 4, 2026

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Before you begin

What this is

9 practice questions for TTBU - The Testing Board Ukraine `EPUPD`, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, `EPUPD`
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

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QUESTION 1 SINGLE CHOICE

A 6-month-old infant is brought to the clinic for a routine well-child visit. The pediatrician notes that the infant can sit with support, roll from front to back, and babble consonants. Which of the following terms best describes this stage of development?

A Neonatal period

B Infancy

C Toddlerhood

D Preschool age

ANSWER B

WHY Infancy refers to the period from 1 month to 12 months of age. The milestones described (sitting with support, rolling, babbling) are characteristic of a 6-month-old infant. The neonatal period covers the first 28 days of life, toddlerhood begins around 12 months, and preschool age typically refers to children aged 3-5 years.

QUESTION 2 MULTIPLE CHOICE

When obtaining informed consent from a parent or guardian before a pediatric procedure, which of the following elements must be included? (Choose two.)

A The nature and purpose of the procedure

B A guarantee of successful outcome

C The risks and benefits of the procedure

D The cost of medical equipment used

ANSWER A · C

WHY Informed consent requires that the parent/guardian understands the nature and purpose of the procedure (A) and its risks and benefits (C). A guarantee of successful outcome (B) is never appropriate as medicine cannot guarantee results. The specific cost of equipment (D) is not a required element of informed consent, although general financial information may be discussed.

QUESTION 3 SINGLE CHOICE

A 4-year-old child presents with a barking cough, inspiratory stridor, and hoarseness. The pediatrician diagnoses croup (laryngotracheobronchitis). Which of the following is the most appropriate initial intervention?

A Immediate endotracheal intubation

B Cool or humidified air exposure

C Intravenous antibiotics

D Bronchoscopy

ANSWER B

WHY Croup typically presents with a barking cough, inspiratory stridor, and hoarseness due to viral inflammation of the upper airway. Initial management for mild cases includes cool or humidified air exposure, which can reduce airway edema. Endotracheal intubation (A) is reserved for severe respiratory failure. Antibiotics (C) are not indicated as croup is viral. Bronchoscopy (D) is not indicated for routine croup management.

QUESTION 4 TRUE FALSE

According to standard pediatric immunization schedules, the first dose of the measles, mumps, and rubella (MMR) vaccine is recommended at 12 months of age.

A True

B False

ANSWER A

WHY True. According to standard pediatric immunization schedules, the first dose of MMR is typically administered at 12 months of age, with a second dose given between 4-6 years of age. This timing allows for adequate maternal antibody waning and optimal immune response in the child.

QUESTION 5 SINGLE CHOICE

A 3-year-old child weighing 15 kg presents with moderate dehydration due to acute gastroenteritis. Using the standard WHO/ORT maintenance calculation, what is the approximate hourly fluid requirement for this child?

A 25 mL/hour

B 40 mL/hour

C 65 mL/hour

D 100 mL/hour

ANSWER C

WHY For children weighing 10-20 kg, maintenance fluid requirement is approximately 50 mL/kg/day. For a 15 kg child: 15 × 50 = 750 mL/day, divided by 24 hours = approximately 31 mL/hour. However, with moderate dehydration, replacement adds approximately 40 mL/kg over 24 hours (additional 600 mL/day = 25 mL/hour). Combined maintenance plus replacement deficit replacement (half over first 8 hours) gives approximately 65 mL/hour initial rate. The answer C reflects the standard hourly rate calculation for this scenario.

QUESTION 6 SINGLE CHOICE

In pediatric medical documentation, what does the abbreviation 'TLC' most commonly stand for when referring to a child's clinical assessment?

A Total Lung Capacity

B Tender Loving Care

C Treatment Last Chance

D Therapeutic Level Check

ANSWER A

WHY TLC stands for Total Lung Capacity in pulmonary function testing and clinical assessment. This is a standard medical abbreviation used when documenting respiratory assessments in pediatric patients, particularly those with asthma or other chronic lung conditions.

QUESTION 7 SINGLE CHOICE

A 2-week-old newborn presents with multiple yellow-orange papules on the face. The pediatrician identifies these as common neonatal lesions. What is the correct medical term for these lesions?

A Milia

B Erythema toxicum neonatorum

C Sebaceous hyperplasia

D Neonatal acne

ANSWER C

WHY Sebaceous hyperplasia presents as multiple yellow-orange papules on the face of newborns, typically on the nose, cheeks, and forehead. These are due to maternal androgen stimulation of sebaceous glands. Milia (A) are small white papules. Erythema toxicum neonatorum (B) presents with erythematous macules, papules, and pustules. Neonatal acne (D) presents with comedones and inflammatory papules, usually appearing later at 3-6 weeks.

QUESTION 8 SINGLE CHOICE

When prescribing medications for pediatric patients, what does the term 'weight-based dosing' refer to?

A Prescribing the same dose regardless of patient weight

B Calculating medication dose based on the patient's body weight in kg

C Dosing based on the patient's age in years

D Using the maximum adult dose

ANSWER B

WHY Weight-based dosing refers to calculating medication doses based on the patient's body weight, typically expressed in mg/kg/dose or mg/kg/day. This is standard practice in pediatrics because children vary significantly in size and weight, making weight-based dosing essential for safety and efficacy. Standard adult doses (A and D) are inappropriate for children, and age-based dosing (C) is less precise than weight-based dosing.

QUESTION 9 SINGLE CHOICE

An 8-year-old child presents with a Glasgow Coma Scale (GCS) score of 8. How should this be classified according to standard pediatric assessment?

A Mild brain injury

B Moderate brain injury

C Severe brain injury/comatose

D Normal neurological status

ANSWER C

WHY A GCS score of 8 or less indicates severe brain injury/coma. GCS scoring: 13-15 indicates mild brain injury, 9-12 indicates moderate brain injury, and ≤8 indicates severe brain injury. A GCS of 8 or below typically requires airway protection (intubation) and indicates a medical emergency requiring immediate intervention.