



NIHS RESIDENCY TRAINING PROGRAM

Pediatrics

Final Written Examination

Examination Format:

National Institute for Health Specialties NIHS (Emirate Board) final specialty written examination shall consist of two papers each with 100-125 Single Best Answer MCQs. Up to 10 % unscored items can be added for pretesting purposes.

Passing Score:

The pass mark in the Final Written Examination will be determined according to the scientific standards and based on reliable practices in assessment.





Suggested References:

- Nelson Textbook of Pediatrics, 20th Edition. Robert M. Kliegman, Bonita M.D. Stanton, Joseph St. Geme, Nina Schor, and Richard E. Behrman (Main reference).
- The Harriet Lane Handbook, Johns Hopkins Hospital, Branden Engorn, and Jamie Flerlage, MD.
- Red Book. AAP Committee on Infectious Diseases. Larry K. Pickering, Carol J. Baker, and David W. Kimberlin
- Pediatric Secrets. Richard A. Polin, and Mark F. Ditmar
- Professionalism and Ethics, Handbook for Residents, Practical guide, Prof. James Ware, Dr. Abdulaziz Fahad Alkaabba, Dr. Ghaiath MA Hussein, Prof. Omar Hasan Kasule, SCFHS, Latest Edition
- Essentials of Patient Safety, SCHS, Latest Edition
- Nelson Pediatric Symptom-based diagnosis Robert M, Kliegman Patricia S. Lye
- Nelson Pediatrics Board Review, 1st Edition Certification and Recertification

Note:

This list is intended for use as a study aid only. NIHS does not intend the list to imply endorsement of these specific references, nor are the exam questions necessarily taken solely from these sources.





Blueprint Outlines:

| No. | Sections | Percentage |
|--------------|---|-------------|
| 1 | General Paediatrics/ Growth & Development | 20% |
| 2 | Adolescent and behavioural/ ambulatory | 10% |
| 3 | Acute care (PICU/ED/NICU) | 15% |
| 4 | Cardiology | 7% |
| 5 | Neurology | 7% |
| 6 | Gastroenterology/ Nutrition | 5% |
| 7 | Pulmonary/ Allergy & Immunology | 6% |
| 8 | Nephrology/ Rheumatology/Dermatology | 6% |
| 9 | Infectious diseases/Preventive medicine/ Immunization | 7% |
| 10 | Hematology & Oncology | 5% |
| 11 | Endocrinology/ Genetics & Metabolic | 6% |
| 12 | Pediatric Surgery/Ophthalmology/ENT | 6% |
| Total | | 100% |

Notes:

- Blueprint distributions of the examination may differ up to +/-5% in each category.
- Percentages and content are subject to change at any time. See the website for the most up-to-date information.
- Research, Ethics, Professionalism, and Patient Safety are incorporated within various domains.





Example Questions

EXAMPLE OF K2 QUESTIONS

Question 1

6-month-old girl admitted with a history of recurrent cellulitis associated with a low-grade fever. In the past history it was noted that her umbilical cord separated at the age of 5 weeks. There is no bleeding tendency in the family (see lab results).

| Test | Results | Normal Values |
|-------------|---------|-----------------------------|
| WBC | 25.0 | 4-10.5 × 10 ⁹ /L |
| Neutrophils | 75 | 54% - 62% |
| Lymphocytes | 20 | 25% - 30% |

Which of the following is the most likely diagnosis?

- A. Complement deficiency
- B. Leukocyte adhesion defect
- C. Severe combined immunodeficiency
- D. Human immunodeficiency virus infection

EXAMPLE OF K1

Question 2

A 1-week-old full term newborn is macrosomic, has an umbilical hernia, hepatomegaly and is on a high dextrose concentration infusion to control his blood sugar. The blood ketone bodies were negative.

Which of the following tests has the most diagnostic value?

- A. High insulin
- B. Low cortisol
- C. High fatty acid
- D. Hyperthyroidism

