

جامعة سوهاج
قسم طب الاطفال
امتحان اخر العام لطلاب الفرقة الخامسة
مادة طب الأطفال...الزمن ساعتان
الاثنين 27 سبتمبر 2018 (الدور الاول)
الورقة الأولى

Some important notes before you answered

- All questions must be answered
- Answer each big question in a separate paper sheet
- Be sure that you have 7 pages of questions

First Questions 14marks

I-Give a short account on the followings questions : (3 marks for each)

- 1-Complications of erythema infectiosum?
- 2-Complications of chicken pox?

II-Read the following case scenario and answer below questions : (3 marks)

A 12 year old boy presenting with a 3 week history of fever, lethargy. Physical examination reveals marked cervical and inguinal adenopathy, enlarged tonsils with exudates, palpable spleen 2 cm below costal margin. WBC differential has 50% lymphocytes (10% atypical). Which of the following is the most likely diagnosis?

- a) Measles
- b) HIV disease
- c) Varicella
- d) Infectious mononucleosis
- e) Streptococcal throat infection

III-Choose the best answer: (1 mark each)

1-complications of measles don't include:

- a) Pneumonia
- b) Guillian Barre syndrome
- c) Hepatosplenomegaly
- d) Skin Infection
- e) gastroenteritis

2-congenital rubella infection is not associated with:

- a) Microcephaly
- b) Cataract
- c) patent ductus arteriosus
- d) large for gestational age

- e) thrombocytopenic purpura
- 3-the most common complication of mumps in childhood is:
- a) ulcerative colitis
 - b) Hypoglycemia
 - c) deafness
 - d) nephritis
 - e) meningoencephalitis
- 4-which of the following is not a complication of varicella:
- a) Hemorrhagic vesicles
 - b) Reye syndrome
 - c) Orchitis
 - d) Encephalitis
 - e) Pneumonia
- 5- Which of the following is not true regarding Roseola Infantum:
- a) The causative agent is the human herpes virus (type 6)
 - b) Incubation period 1-2 weeks
 - c) It is associated with papulo vesicular rash
 - d) Mostly affect infants between 6 and 15 months
 - e) Leukocytosis in the first 2 days

Second Questions.....11marks

I-Give a short account on the followings: (2marks for each)

- a) Protective mechanisms of human milk?
- b) Assessment of nutritional status in children?

II-Read the following case scenario and answer below questions... (2marks)

An 18 month-old child on examination he is edematous, has a dark desquamating skin rash, has very thin hair which is reddish in color

- a) What is your diagnosis?
- b) What is the pathogenesis of this case?
- c) What are its constant features?
- d) What are its complications?
- e) How can you manage this case?

III Choose one correct answer of the following (1 mark each)

1-Breast fed babies require supplementation with vitamin

- a) Vitamin A
- b) Vitamin B
- c) Vitamin C
- d) Vitamin D

2-The important reflex for breast feeding is

- a) Tonic neck reflex
- b) Grasp reflex

- c) Rooting reflex
 - d) Cough reflex
- 3-One of the following is correct about marasmus
- a) In 1st degree marasmus weight loss is 25-35% of expected weight
 - b) In 2nd degree marasmus there is loss of subcutaneous fat from thighs and buttocks
 - c) Muscle wasting is not a constant feature
 - d) Nutrition should provide not more than 110 kcal/kg/day
- 4-Treatment of hyper-vitaminosis D include
- a) Calcium supplementation
 - b) Antibiotics
 - c) Magnesium
 - d) Steroids
- 5-Compared to cow's milk, breast milk contains higher content of
- a) Sodium
 - b) Calcium
 - c) Carbohydrate
 - d) Protein

Third Questions...11 marks

I-Give a short account on the followings questions... (2 marks for each)

- a) Clinical manifestation and diagnosis of childhood brain tumor in general?
- b) Enumerate Complications of chemotherapy?

II-Read the following case scenario and answer below questions.2marks

5 years old boy known to be down syndrome (trisomy 21) started to complain with generalized bone pain 3 weeks ago. On examination, the boy was pale with multiple echymotic patches in both lower and upper limbs. There was liver about 5 cm below costal margin and spleen about 4 cm below costal margin.

- a) What is your possible diagnosis?
- b) Mention the needed investigation to confirm your diagnosis?
- c) Outline the specific treatment of this case?

III-Choose the correct answer...1 mark for each

1-All of the following are signs of good prognosis in acute lymphoblastic leukemia (ALL) except:

- a) Low WBCS
- b) Age 2-7 years
- c) Low LDH level
- d) CNS involvement at diagnosis

2-In tumor lysis syndrome all are correct except

- a) Hyponatremia

- b) Hypocalcemia
- c) Hyperphosphatemia
- d) Hyperkalemia

3-Most common solid tumor outside CNS in

- a) Hepatoblastoma
- b) Nephroblastoma
- c) Neuroblastoma
- d) Retinoblastoma

4-Most common clinical presentation of wilms tumor is

- a) Abdominal mass
- b) Headache
- c) Hypotension
- d) Chest pain

5-High risk stage in neuroblastoma is

- a) Stage I
- b) Stage II
- c) Stage III
- d) Stage IVs

Fourth Questions.....11 marks

I-Give a Brief note on each of the following: 2 marks for each

- 1- Clinical manifestation, investigations and prevention of hepatitis B virus infection?
- 2- Enumerate Causes, diagnosis of portal hypertension?

II-Read the following case scenario and answer below questions... (2 marks):

A 10 year old girl presented with jaundice about 4 weeks ago associated with mild abdominal pain and dark urine. On examination there were enlarged liver 5cm below costal margin and there was arthritis in both knee joints. Investigations showed direct hyperbilirubinemia with total serum bilirubin 14mg/dl and direct bilirubin 10mg/dl. Investigations for hepatitis viruses A, B, C were negative.

- a) Mention two differential diagnosis of this case?
- b) List investigations required confirming your diagnosis?

III-Put True or false and correct the false one

- a) Hepatitis A virus is RNA virus
 - b) Choledocal cyst cause indirect neonatal hyperbilirubinemia
 - c) Kayser-Fleischer ring is present in cystic fibrosis
 - d) Heart failure cause exudates ascitis
 - e) Veno-occlusive disease is intrahepatic obstruction of hepatic veins by thrombotic lesions
-

Fifth Questions 14 marks

1. Give short account on: 3 marks for each

- a. Diagnosis, investigations of chronic hemolytic anemia in general?
- b. Diagnosis and treatment of megaloblastic anemia?

3-Read the following case scenario and answer the below questions..3 marks

A 3month old boy presented by bleeding at site of intramuscular injection. On examination, the boy was generally well about mild pallor after bleeding. His CBC and PT (prothrombin time) were normal but his PTT (partial thromboplastin time) was prolonged.

- a) What is you possible diagnosis?
- b) How to confirm your diagnosis and treat this case?

III-Put True or false and correct the false one

- a) In iron deficiency anemia coomb test is positive
- b) Sickle cell anemia is microcytic hypochromic anemia
- c) Anemia due to G6PD enzyme deficiency occurs mainly in boys
- d) Hereditary spherocytosis treated mainly by splenectomy
- e) In thalassemia serum ferritin level is low

Sixth Question..... 11 marks

Question (1): Enumerate...2marks for each

- a. Predisposing factors for recurrent urinary tract infections
- b. Laboratory findings in chronic kidney disease

Question (2): Read the following case scenario and answer below question...2 marks

A Six years old boy presented to the nephrology clinic with sudden onset of gross hematuria, oliguria, periorbital edema and hypertension. Previous history of tonsillitis was recorded 2 weeks ago.

- a. What is the most likely diagnosis?
- b. Enumerate the investigations should be done and the expected results?
- c. What are the indications of renal biopsy in this disease?

Question (3): Put true in correct statement and false in wrong one with correction of false statement...1 mark for each

- A. Early systemic antibiotic therapy for streptococcal throat infection can prevent the occurrence of acute poststreptococcal glomerulonephritis.
- B. Without treatment, nephrotic syndrome in children is associated with a high risk of death, most commonly from infections.
- C. Cyclophosphamide is the drug of choice in case of steroid resistant nephrotic syndrome.

- D. Serum creatinine is a sensitive and rapid measure of decreased kidney function following acute kidney injury.
- E. Intravenous sodium bicarbonate should be given in case of acidosis in AKI till normalization of serum bicarbonate and blood PH

Seventh Question..... 14 marks

Questions 1: Discuss in short clinical picture, investigations & treatment of congenital hypertrophic pyloric stenosis? *3 marks*

Questions 2: Mention 4 Differences between functional Constipation and Hirschsprung Disease? *3 marks*

Questions 3: Read the following case scenario and answer the following questions: *3 marks*

Samy, 10 months old boy, presented with gastroenteritis .On examination, he was irritable, thirsty, with mildly sunken eyes, dry tongue and skin pinch goes back in less than 2 seconds .His weight was 10 kg (he lost about 6% of his body weight).

- a) What is the degree of dehydration?
- b) Describe the treatment plan according to the degree of dehydration?

Questions 4: Write (T) for True statement and (F) for False one in the followings: *1 marks for each*

- a. Regurgitation is forceful expulsion of gastric contents through the mouth
- b. Fruit Juices can be used as home made fluids in the treatment of dehydration.
- c. Lower lobe pneumonia can cause abdominal pain
- d. The most important single virus causing diarrhea is Adenovirus.
- e. In Isotonic dehydration Serum sodium= 130-150 mmol/L.

Eighth Question..... 14 marks

A) Give a short note on each of the following (3marks each)

- a) Causes of congenital hypothyroidism.
- b) Biochemical criteria for diabetic ketoacidosis in children.

B) Read the following case, and then answer the questions.. 3 marks

A 5 year-old boy presented to Pediatric Endocrinology clinic by his parents for concerns about his growth. The mother said he was the shortest among all children at his KG2 class. She also noted that his shoes size did not change for 1.5 year and he still use clothes for 2 to 3 year-old boys. On examination; he is healthy and well nourished. He had small sized genitalia for age but no

other abnormalities could be found. His height was 88 cm (below 3rd centile). His mother's height was 159 cm while his father's height was 168 cm. His upper to lower body segment ratio and arm to span ratio were normal for age. CBC, serum calcium, liver function tests, serum creatinine, thyroid profile, and celiac screening all were normal. Growth hormone stimulation test showed low serum growth hormone level with poor response to stimulation. Bone age X-ray was typical for a two year old boy.

- a) Calculate the mid-parental height for this boy.
- b) What is the cause for this boy short stature?
- c) What is the treatment required to correct this boy short stature?

C) Choose the correct answer for each of the following: (1 mark each)

1-Causes for male under-verilization include all of the following except:

- a. Leydig cell hypoplasia
- b. Classic congenital adrenal hyperplasia (21- α hydroxyase deficiency)
- c. 5-alpha-reductase deficiency
- d. Partial androgen insensitivity syndrome

2-Diagnostic criteria for Diabetes Mellitus in children include:

- a. Fasting blood glucose >125 mg/dl
- b. Postprandial blood glucose <200 mg/dl
- c. Random blood glucose <140 mg/dl
- d. Hb A1c >4.5 %

3-Complications of DKA include all of the following except:

- a. Cerebral edema
- b. Cardiac arrhythmia
- c. Bleeding tendency
- d. Hypokalemia

4-Disproportionate short stature is a characteristic feature of:

- a. Turner syndrome
- b. Hypothyroidism
- c. Cushing syndrome
- d. Achondroplasia

5-Neonatal screening for congenital hypothyroidism is done:

- a. On the 1st day after birth
- b. On the 7th day after birth
- c. On the 14th day after birth
- d. On the 21st day after birth

Good Luck

The total score is 100

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مادة طب الأطفال...الزمن ساعتان
الاحد 8 اكتوبر 2018
(الدور الاول)
الورقة الثانية

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First Questions--14 marks

I-Give a short account on the followings questions (3 marks for each)

- a) Risk Factors for Recurrence of Febrile seizures and Risk Factors for Occurrence of Subsequent Epilepsy
- b) Early Clinical Predictors of Cerebral Palsy

II-Read the following case scenario and answer below questions (3 marks)

II-Read the following case scenario then answer questions (3 marks)

A 6 months old boy has been presented by recent onset brief jerking movement of both extremities with sudden flexion of the neck and limbs associated with crying lasting 1-3 seconds. This movement occurring in clusters each lasting about 15 minutes. The baby appeared as having colic. On examination he was found to have facial angiofibromas, hypopigmented skin patches and CT of the brain showed periventricular calcifications.

- a) What is the most possible diagnosis?
- b) What is the cause of jerking movement?
- c) Mention the drug of choice for this case?

III-Choose the best answer: (1 mark each)

1-Prenatally determined causes of hydrocephalus include the followings EXCEPT

- a) Aneurysm of the great vein of Galen
- b) Neonatal intraventricular haemorrhage
- c) Sex-linked stenosis of the Sylvian aqueduct
- d) Dandy-Walker syndrome.

2-The followings are general features of neuromuscular disorders EXCEPT

- a) Muscle hypertrophy, atrophy, or wasting
- b) Generalized hypotonia
- c) Exaggerated deep tendon reflexes
- d) Muscles pain or myalgia

3-One of the following is a cause for cerebral palsy

- a) Hypothyroidism
- b) Pre-term delivery
- c) Werdnig-Hoffmann disease
- d) Neonatal meningitis

4-Concerning Ketogenic Diet in treatment of Epilepsy, one of the following is true

- a) Calories are provided from carbohydrate
- b) It requires restriction of protein and fat intake.
- c) Can be used in benign seizures
- d) The diet is absolutely contraindicated in fatty acids oxidation

5-Concerning Duchenne muscular dystrophy, the followings are true EXCEPT

- a) Inherited as X-linked dominant pattern
- b) A high CPK in a sister of an affected individual suggests that she may be a carrier
- c) It may be associated with toe walking
- d) Ankle reflexes remain until late

6-The following are Preventable Causes of Mental Retardation Except

- a) Galactosemia
- b) Phenylketonuria
- c) Perinatal Asphyxia
- d) Mucopolysaccharidosis

Second Questions.....11 marks

II-Read the following case scenario and answer below questions :(3 marks)

A 10 year old boy was referred because of poor school performance and hyperactivity. It was observed during the interview that the child is making rapid and sudden not purposeful movements by his face, neck and shoulders and makes an incomprehensible repeated sound.

- a) What the most possible diagnosis in this case?
- b) What treatment is appropriate in this case?

II-Give a short account on the followings questions :(3 marks for each)

Discuss DSM 5 criteria of encopresis, causes and possible investigations.

III-Choose the best answer: (1 mark each)

1-Regarding breath holding attacks all the following are true except

- a. Usually occur in association with a high fever
- b. May be precipitated by pain
- c. May be associated with a short lasting convulsions
- d. May be preceded by crying
- e. Are associated with a systole

- 2-The following are included in DSM 5 criteria for enuresis except
- Repeated voiding of urine into bed or clothes (whether involuntary or intentional)
 - Behavior must be clinically significant as manifested by either a frequency of once a week for at least 3 consecutive months
 - Chronological age is at least 5 years of age (or equivalent developmental level)
 - The behavior is not due exclusively to the direct physiological effect of a substance
- 3-The principle features of hyperactive child include the following except
- Poor concentration
 - Hypersomnia
 - Excessive talking
 - Impulsivity
 - Restlessness
- 4-Autism has the following except
- Onset occurs before the age of 3 year.
 - It is disorder of communication.
 - Signs include lack of eye contact
 - A well developed delusional system is apparent
 - There is avoidance of human communication
- 5-All of the followings are true about temper tantrum except
- Considered normal human developmental stage
 - Common in children after 6 years
 - Occur equally in boys and girls
 - Exacerbated by family stress

Third Questions....21 marks

I-Give a short account on the followings questions...(3 marks for each)

- Mention four disadvantage of self-inflation Ambu-bag.
- Mention four criteria of breast milk induced jaundice

II-Read the following case scenario and answer below questions

- A boy was delivered in the 32 gestational weeks. He takes the routine care of premature infants. However on the 2nd day of life he developed multiple episodes of apnea-bradycardia.
 - What are the causes of apnea in this child?
 - Mentions two drugs used to control apnea and its doses?
- Neonatology team is called to the delivery of a full term infant with history of cord prolapse. Intensive resuscitation was done and the baby at 5 minute still had lips cyanosis, with crying, some muscle tone, grimacing, and heart rates of 80 beat/minute. After stabilization in NICU convulsions developed.

- a) What is the suspected Apgar score at 5 minute?
- b) Mentions two drugs used to control convulsion and its doses?

III-Choose the correct answer

1. The parameters used in Apgar score include all of the following except:
 - a) Respiratory rate
 - b) Heart rate
 - c) Muscle tone
 - d) Reflex stimulation
2. With reference to RDS, all of the following statements are true except:
 - a) Usually occurs in infants born before 34 weeks of gestation
 - b) Is more common in babies born to diabetic mothers
 - c) Leads to cyanosis
 - d) Is treated by administering 100% oxygen
3. A neonate with scaphoid abdomen with respiratory distress may had
 - a) Congenital pyloric stenosis
 - b) Volvulus
 - c) Congenital Diaphragmatic hernia
 - d) Choanal atresia
4. A 3 kg term baby delivered by cesarian section develops respiratory distress soon after birth. The liquor and umbilical stump were meconium stained. Breathing rate is 90/ minute, the possible diagnosis is:
 - a) Transient tachypnea of newborn
 - b) Meconium aspiration syndrome
 - c) Respiratory distress syndrome
 - d) congenitaldiagramtic hernia
5. Term infant with AFGAR score of 2 at 1 min. and 6 at 5 min. has respiratory distress and mediastinal shift in chest x-ray. All are possible diagnosis except.
 - a) Congenital labor emphysema
 - b) Pneumothorax
 - c) congenial Diaphragmatic hernia
 - d) Transient tachypnea of newborn
6. Conjugated hyperbilirubinemia in infancy seen in all of the following except:
 - a) Choledochal cyst
 - b) Extra hepatic biliary atresia
 - c) Crigler - Najjar syndrome
 - d) d- Idiopathic neonatal hepatitis
7. A term neonate with unconjugated hyperbilirubinemia of 17 mg/dl on 15 days. All are common causes except
 - a. Breast milk jaundice
 - b. Congenital cholangiopathy
 - c. G 6PD deficiency
 - d. Hypothyroidism
8. All of the following are the complications in the new born of a diabetic mother except:
 - a) Hyperbilirubinemia

- b) Hyperglycemia
- c) Hypocalcemia
- d) Hypomagnesemia

9. Transient tachypnea of new born (TTN) is commonly seen in which of the following situations:

- a) Term delivery requiring forceps
- b) Term requiring ventouse
- c) Elective cesarean section
- d) Normal vaginal delivery

10. True about low birth weight (LBW) is:

- a) Less than 1800 gms
- b) Less than 2000 gms
- c) Less than 2500 gms
- d) Less than 3000 gms

Fourth Questions.....14 marks

I-Give a Brief note on each of the following: 2.5 marks for each

- 1- Clinical manifestation, investigations of rheumatic fever (new guidelines)
- 2- Diagnosis, investigation of pulmonary hypertension in children?

II-Read the following case scenario and answer below questions... (2.5 marks):

A- A two days old child presented immediately after birth by central cyanosis, RDS, HR=190 bpm, RR: 70 cycle/m, normotensive, oxygen saturation at room air was 50%, blood gas revealed metabolic acidosis, chest: ronchi and crepitation, Heart cardiomegaly with ↑ lung vasculature:

- a) Diagnosis and D.D?
- b) Lists main lines of investigations?
- c) Main lines of treatment?

B- A 6 years old child present to our PICU by fever of 12 days duration, stable all day and night, with anorexia, vomiting, skin rash appear, red urine and small firm tender nodules in palm of hand, abdominal examination revealed tender splenomegaly, HR:180bpm, RR:60cycle/m, normotensive, O₂ at room air was 94%

- d) What is the most likely Diagnosis?
- e) Lists main lines of investigations?
- f) Main lines of treatment?

III-Put True or false and correct the false

- a) Acute rheumatic arthritis is best treated by steroids in a dose of 2mg
- b) In case of TOF chest X-rays revealed cardiomegaly with lung congestion
- c) In muscular VSD, ECG revealed RBBB (right bundle branch block)

- d) ASD1 (premium ostium type) is the commonest types of ASDs
- e) Rheumatic chorea is best treated by Aspirin in a dose of 75 mg /kg for two weeks

Fifth Questions 14 marks

1. Give short account on: 3 marks for each

- a) Diagnosis, investigations of pneumococcal pneumonia.
- b) Causes, diagnosis of acute tracheo-laryno-bronchitis (Croup) in children?

II-Read the following case scenario and answer the below questions...3 marks for each

A 6-week-old infant suffers for 3 days from runny nose, fever to 38°C and increasingly dry cough. Now the child is increasingly worse, breathlessness looks pale and apathetic. On examination, the child has tachypnea, thoracic retractions. Bilateral wheezes and occasional fine crepitation are heard over the lungs with bilateral diminished air entry.

- a) What is the most likely diagnosis?
- b) What is the most common causative organism?
- c) What are the main lines of treatments?

III-Answer by true (T) or false (F) with correction of the false statement

- a) Oseltamivir is the drug of choice in influenza
- b) Antibiotics are efficient in treatment of bronchitis
- c) Empyema should be treated with antibiotics alone
- d) In pectus carinatum the sternum is indented outwards
- e) Discoloration of secretions in acute rhinitis should assume bacterial infection

Sixth Question..... 14 marks

I-Give a short account on 3 marks for each

- a. Non Invasive prenatal testing (NIPT).
- b. Prognostic factors for submersion injuries.

II-Read the following case scenario and answer below questions (3 marks)

A five years old male child came to the ER with recent history of dog bite. What are your therapeutic options (IN ORDER)?

III- From the column A choose the corresponding from column B

A	B
1-Snake Antivenom.	a-Karyotyping.
2-Scorpion Sting.	b-Encephalopathy.
3-Cytogenetic test.	c-Anaphylaxis.
4-Molecular genetic test.	d-Regional lymphadenitis.
5-BCG vaccine.	e-Prazocin.
6-Partussis vaccine.	f-FISH (Fluorescent in situ hybridization)

Seventh Question..... 12 marks

I- Give a short account on: 2.5 marks for each

- 1- Causes, complication of hyperkalemia in children?
- 2- Mention main lines of advanced life support in children?

II- Read the following case scenario and answer below questions : (2 marks)

A 5 months boy weighting 6 kilograms admitted to Sohag university pediatric emergency unit with persistent vomiting, diarrhea and low grade fever of two days duration. By examination there was a weak thready pulse, hypotension, dry tongue and loss of skin turgor. His serum Na (158 meq/l), serum K (3.4 meq/l) and blood PH (7.3 meq/l).

- a. What is your final diagnosis?
- b. How to manage this emergency situation?

III- From the column A choose the corresponding from column B; 1 mark for each

(A)	(B)
1- Grade I shock.	a- convulsions
2- Grade III shock.	b- Refractory metabolic acidosis
3- Hypermotremia.	c- Prolonged capillary refill time
4- Hypokalemia.	d- Multiple organ system failure
5- Grade IV shock.	e- Hypotonia

The total score is 100

Good Luck

مواعيد الامتحانات الشفوي والاكاديمي و خلافه تجدونه تفصيلا في الورقة المرفقة لهذا الامتحان ورجاء كل طالب يلتزم بموعده و غير مقبول التغير نهائيا

جدول أعمال الامتحانات الشفوية والاكلينيكية وخلافه لطلاب الفرقة

الخامسة للعام الجامعي 2018 دور اكتوبر

يوم الاثنين الموافق 2018/10/8م

- 1- امتحان الشفوي بالقسم لجميع الطلاب يبدأ الساعة الثامنة والنصف صباحا
- 2- امتحان اعمال السنة النظري (MCQ) لجميع الطلاب بمدرج ط
بمجمع المدرجات المركزية ابتداء من الساعة الثانية عشر ظهراً

يوم الثلاثاء الموافق 2018/10/9م

- 1- امتحان الاكلينيكي بقسم طب الاطفال ابتداء من الساعة الثامنة
والنصف ابتداء من رقم جلوس 5001 الي 5088
- 2- امتحانات الاشعة لكل الدفعة ابتداء من الساعة 11:45 صباحا بمبني
الفصول (مبني تدريس الاطفال) بعد الانتهاء من راوندات خامسة حديث

يوم الاربعاء الموافق 2018/10/10م

- 1- الامتحان الاكلينيكي بقسم طب الاطفال ابتداء من الساعة الثامنة
والنصف ابتداء من رقم جلوس 5089 الي 5177
- 2- امتحان الصور الاكلينيكية بقاعة أ.د/محمود رياض بالمستشفى -الدور
الرابع لجميع الطلاب ابتداء من الساعة الحادية عشر والنصف صباحا .

يوم الخميس الموافق 2018/10/11م

- 1- الامتحان الاكلينيكي بالقسم ابتداء من رقم جلوس 5178 الي 5255
والتخلفات