

KAMINENI INSTITUTE OF MEDICAL SCIENCES

Narketpally - 508 254

QUESTION AND ANSWER WITH NAMES NOTED BY CHAIRPERSON - CLINICAL MEETING ON 18.09.2014

1. **Question:** - Was the mother screened for Wilson disease? Did you ask about the history of consumption of food in copper utensils in antenatal period? (Dr. T. Venkatramanaiah, Professor & HOD of Forensic Medicine).

Answer: - As WD is an autosomal recessive inborn error of metabolism, genetic screening was advised for the parents. (Dr. Pranitha, PG in Paediatrics).

Answer: - Since WD is an IEM, dietary consumption in copper utensils has no role. The child is coming for regular follow up. We will advise the family for screening (Dr. C.S. Jain, Professor & HOD of Paediatrics).

2. **Question:** - What was the Apgar score for the child? (PG).

Answer: - LSCS was done at an outside hospital. The baby cried immediately at birth. No h/o birth asphyxia / convulsions / NICU admission. So the Apgar score must be normal (Dr. C.S. Jain, Professor & HOD of Paediatrics).

3. **Question:** - Why is cerebral palsy one of the differential diagnosis? (PG).

Answer: - Cerebral palsy is one of the most common causes of developmental delay. Even if there is no h/o of birth asphyxia, there could be an antenatal insult resulting in CP. Birth asphyxia is not the only cause for CP (Dr. K. Sailaja, Assoc. Professor of Paediatrics).

4. **Question:** - Why is cefotaxime used when the differential diagnosis is viral fever? (UG).

Answer: - Bacterial infection cannot just be excluded by history & clinical examination. LBP showed neutrophil leucocytosis, it could have been superadded bacterial infection (Dr. Pranitha, PG in Paediatrics).