



## SAUDI BOARD RESIDENCY TRAINING PROGRAM

### PEDIATRIC NEUROLOGY

#### Final Written Examination

##### Examination Format:

A Saudi 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 passing score is 70%. However, if the percentage of candidates passing the examination before final approval is less than 70%, the passing score must be lowered by one mark at a time aiming at achieving 70% passing rate or 65% passing score whichever comes first. Under no circumstances can the passing score be reduced below 65%.



**Suggested References:**

1. Swaiman's Pediatric Neurology.
2. Neurology of the Newborn – Joseph Volpe.
3. Bradley's Neurology in Clinical Practice.
4. Up-to-date online resource.
5. Pediatric Neuroimaging by James Barkovich
6. Continuum journal – last five years.
7. Neurology of Hereditary metabolic diseases by Kolodny and Pastores
8. Seminars in Pediatric Neurology- last five years.
9. Clinical neurophysiology of infants, childhood and adolescence by Holmes et al.
10. Wyllie's textbook of Epilepsy
11. Professionalism and Ethics, Handbook for Residents, Practical guide, Prof. James Ware, Dr. Abdulaziz Fahad Alkaabba, Dr. Ghaiath MA Hussein, Prof. OmarHasan Kasule, SCFHS, Latest Edition.
12. Essentials of Patient Safety, SCHS, Latest Edition.

**Note:**

This list is intended for use as a study aid only. SCFHS 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	Congenital and developmental disorders of the nervous system	6%
2	Stroke and cerebrovascular disorders	10%
3	Seizures, epilepsy, and epileptic syndromes	16%
4	Headache and pain disorders	7%
5	Disorders of Development, language, and behavior, including psychiatric disorders in children & adolescents	6%
6	Neurologic complications of systemic diseases: including neuroinfectious diseases, complications of rheumatologic, immune deficiency, and autoimmune disorders	10%
7	Neuromuscular disorders in childhood and adolescence	7%
8	Traumatic injury to brain and spine /sports injuries	5%
9	Neuro-oncology: tumors of the central and peripheral nervous system	5%
10	Neuro-ophthalmology: Disorders of eye and vision related to neurologic disorders	5%
11	Movement disorders	7%
12	Neurogenetic disorders (including metabolic, neurocutaneous, and neurogenetic syndromes)	16%
<b>Total</b>		<b>100%</b>

**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 SCFHS website for the most up-to-date information.
- Research, Ethics, Professionalism and Patient Safety are incorporated within the various domains



## Example Questions

### EXAMPLE OF K1

#### Question 1

A 6-year-old child with epilepsy is taking carbamazepine.

Which of the following is the most common side effect?

- A. High ALT
- B. Low sodium
- C. High creatinine
- D. Thrombocytosis

### EXAMPLE OF K2 QUESTIONS

#### Question 2

A 2-month-old baby presented with clusters of flexor movements that the pediatrician diagnosed as infantile colic. Clinical examination confirmed hypotonic baby with slightly brisk reflexes. He has one hypopigmented macule on the back. The mother showed the events on video which occurred mostly as clusters upon waking up from sleep or when going to sleep.

Which of the following is the most appropriate investigation?

- A. EEG
- B. CT brain
- C. Serum Lactate
- D. Urine organic acids