

Neonatal Jaundice

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This month's quiz is based on the article "A 5-Day-Old Neonate with Jaundice," which begins on page 13 of this issue. Choose the single best answer for each question.

1. All of the following are causes of pathologic jaundice EXCEPT

- (A) Blood group incompatibility
- (B) Metabolic disorders
- (C) Sepsis
- (D) Unconjugated hyperbilirubinemia

2. Which of the following statements regarding breastfeeding and jaundice is correct?

- (A) Breastfeeding-associated jaundice is due to poor milk quality
- (B) Infants experiencing breastfeeding-associated jaundice should be placed on formula, and breastfeeding efforts should be halted immediately
- (C) Maternal factors such as improper technique, fatigue, and engorged nipples may contribute to poor breastfeeding and decreased caloric intake
- (D) There is no evidence linking breastfeeding with an increased incidence of jaundice

3. All of the following statements about the physical examination of a jaundiced infant are correct EXCEPT

- (A) A complete neurologic examination is warranted to exclude encephalopathy
- (B) A growth evaluation is needed to assess for feeding difficulties
- (C) Examination of the infant's skin should include inspection for color, petechiae, and signs of dehydration
- (D) Examination of the infant's skin revealing jaundice from the head to the upper torso excludes any serious signs of systemic jaundice

4. Which of the following statements regarding prevention of jaundice is correct?

- (A) All newborns should be routinely monitored for jaundice prior to discharge from the hospital

- (B) If the mother seeks prenatal care too late in the pregnancy, jaundice cannot be prevented
- (C) Infants not receiving enough breastmilk can be given dextrose water to prevent dehydration
- (D) Mothers should breastfeed at least 3 times per day

5. All of the following statements regarding phototherapy are correct EXCEPT

- (A) Conventional and fiberoptic phototherapy are often used in combination
- (B) Fiberoptic phototherapy is superior to conventional phototherapy
- (C) Phototherapy reduces bilirubin levels by 30% to 40% after 24 hours of treatment
- (D) The infant should be monitored during phototherapy for burns, dehydration, and skin rashes

6. When should phototherapy be discontinued in the jaundiced infant?

- (A) After the infant's breastfeeding has improved
- (B) When the infant's skin returns to normal tone
- (C) When the total serum bilirubin level reaches 14 mg/dL
- (D) Within 48 hours of treatment

7. Which of the following statements is correct regarding exchange transfusion in jaundiced infants?

- (A) Exchange transfusion has a mortality rate of 15 to 20 per 1000 infants
- (B) Exchange transfusion is a common procedure for jaundiced infants
- (C) Infants with signs of acute bilirubin encephalopathy or total serum bilirubin greater than the recommended threshold should receive exchange transfusion
- (D) The infant's blood is filtered, and recycled blood is returned to the body, eliminating excess bilirubin

For answers, see page 26.

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Answers to the Clinical Review Quiz, which appears on page 41. The article on neonatal jaundice begins on page 13.

1. (D) Unconjugated hyperbilirubinemia for jaundice prior to discharge from the hospital
2. (C) Maternal factors such as improper technique, fatigue, and engorged nipples may contribute to poor breastfeeding and decreased caloric intake
3. (D) Examination of the infant's skin revealing jaundice from the head to the upper torso excludes any serious signs of systemic jaundice
4. (A) All newborns should be routinely monitored
5. (B) Fiberoptic phototherapy is superior to conventional phototherapy
6. (C) When the total serum bilirubin level reaches 14 mg/dL
7. (C) Infants with signs of acute bilirubin encephalopathy or total serum bilirubin greater than the recommended threshold should receive exchange transfusion

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