

M.MED.FAMILY MEDICINE
SECOND YEAR THEORY EXAM– AUG 2013
PAPER II - SURGERY AND ALLIED SCIENCES

TIME: THREE HOURS

MAXIMUM MARKS: 100

INSTRUCTIONS

- The paper will be for a total of **100 marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios (**40 marks**).
- **Part B** will have Objective type EMQs **extended matching questions** (**60 marks**).
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. Below this, some **options** are given followed by some **questions**. The options are lettered using the English Alphabets **A, B, C, D** and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazine deconoate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

- 3(i) What is the drug of choice for Acute Psychosis?
- 3(ii) What is the drug of choice for Bipolar illness?

PART – A
DESCRIPTIVE QUESTIONS

(ANSWER ALL QUESTIONS)

- 1.** 7 year old Meeran is brought to you with blindness. Answer the following questions regarding blindness

(5 x 4 = 20 marks)

- A.** What are the causes of childhood blindness at birth? How will you manage them?
- B.** What are the causes of childhood blindness at Pre-school and school age group? How will you manage them?
- C.** What is Amblyopia? When it occurs?
- D.** What are the four types of amblyopia? Write about their causes.
- E.** What are the principles of treatment of amblyopia?

- 2.** 3 year old Avinash is brought to you with extensive burns, allegedly sustained by falling into to a trough of very hot water. When you saw him, the burns involved the following areas:

The chest and abdomen in the front and half of the back was burnt. The whole of the right upper limb, the whole of the right lower limb, roughly half of the face and the whole of the genital area were scalded.

(5 x 4 = 20 marks)

- A.** Calculate the extent of the burns.
- B.** Calculate the fluid requirement if his original weight was 20 kgs.
- C.** How will you manage him?
- D.** List indications for admission for a burns patient.
- E.** Describe about the acute management of burns admitted in the ward.

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

1. THEME: DIMINISHED VISION [QUESTIONS.1(i) - 1(vi)] (TOTAL: 6 MARKS)

From the options ‘A to N’ given below, choose the best answer for the questions 1(i) - 1(vi)

- | | |
|-----------------------------------|--|
| A. Primary angle closure glaucoma | H. 11-21 mmHg |
| B. Posterior Subcapsular cataract | I. Laser Iridotomy |
| C. Subluxation of lens | J. Shrinking and elongation of the lens |
| D. Spectacles with convex lens | K. Primary open angle glaucoma |
| E. Oral 50% glycerol | L. 16-31 mmHg |
| F. Trabeculectomy | M. Optic atrophy |
| G. Cycloplegic retinoscopy | N. Hypermature lens leaking lens protein into anterior chamber |

Questions

Mr. Shankar, 51 years of age comes to you with a history of diminished vision. You do a fundoscopy and see a pale disc.

1. (i) What is the diagnosis?

Mrs. Sharmila, 62 years of age comes to your clinic with complaints of diminished vision. On ophthalmic evaluation, visual acuity is 6/9. Colour of lens is grayish white, iris shadow is seen. Distant direct ophthalmoscopy showed central dark shadow against red glow.

1. (ii) What type of cataract does she have?

Eight year old Madan complained of headache and decreased vision. Initial screening revealed that the vision is normal.

1. (iii) What is the next step in management?

Mr. Naidu, a 76 year old was brought to you with difficulty in vision in the left eye. On examination, you find out that he has uveitis along with cataract.

1. (iv) What is the cause of uveitis in untreated cataract?

Mrs. Sharada, a 47 year old housewife came to your clinic with decreased vision of 1 month's duration. She has mild headache and minimal photophobia but does not have any eye pain. Intraocular pressure was found to be high. Presence of optic nerve head changes were seen with visual field abnormalities.

1. (v) What is the normal intraocular pressure in the general population?

1. (vi) What does Mrs. Sharadha have?

2. THEME: DIAGNOSIS OF COMMON FOOT PROBLEMS [QUESTIONS.2(i) - 2(vi)]
(TOTAL: 6 MARKS)

From the options 'A to K' given below, choose the best answer for the questions 2(i) - 2(vi)

Options

- | | | | |
|----------|------------------------|----------|------------------------|
| A | Hallux rigidus | F | Plantar fasciitis |
| B | Verruca plantaris | G | Plantar warts |
| C | Corn | H | Hallux valgus |
| D | Tarsal tunnel syndrome | I | Morton's Metatarsalgia |
| E | Gouty tophi | J | Talipes equinovarus |
| | | K | Talipes calcaneovalgus |

Questions:

30 years old Mohali Sahib comes to you with pain in the heel which is worse in the mornings for the past 2 weeks. He has recently started jogging. On examination there is tenderness along the medial tuberosity of the calcaneum.

2.(i) What is the diagnosis?

55 year old Sheila comes to you with history of pain and deformity in both feet. On examination she has lateral deviation of both big toes along with a medial prominence along the first metatarsal head.

2.(ii) What is the diagnosis?

42 year old Sethu comes with pain and swelling painful swelling at the top of his third toe where it comes in contact with the shoe. On examination, there is a circumscribed hyperkeratotic lesion with a central conical core of keratin.

2.(iii) What is the diagnosis?

47 year old Meena has come with sharp pain in the forefoot radiating to the toes .The pain is exacerbated by walking and relieved by rest. On examination tenderness is localized in the third inter-digital space.

2.(iv) What is the diagnosis?

48 year old Savithri comes with sharp, burning pain and sensory disturbance in the medial part of the forefoot not related to weight bearing. The pain is often worse at night.

2.(v) What is the diagnosis?

Parents of 2 month old Tina bring her to you with complaints of a foot deformity which has been present since birth. They are very anxious and are keen for a speedy resolution of the problem. The foot is both turned and twisted inwards so that the sole faces posteromedially.

2.(vi) What is the diagnosis?

3. THEME – TREATMENT OF COMMON FOOT PROBLEMS [QUESTIONS. 3(i) – 3(vi)]
(TOTAL: 6 MARKS)

From the options ‘A to K’ given below, choose the best answer for the questions. 3(i) – 3(vi)

- A. Analgesics, ultra sound therapy
- B. Analgesics, rest, warm water soaks and removal of pressure on the affected area
- C. Analgesics, wax bath
- D. Analgesics, change the offending footwear, metatarsal pad, Local inter-digital nerve blocks
- E. Analgesics, TENS
- F. Analgesics, stop the triggering activity, heel cups, exercises , fasciotomy
- G. Analgesics, remove the cause, warm water soaks ,salicylic acid preparations and debridement
- H. Analgesics, Local capsaicin injection
- I. Analgesics, rest, tendon stretching and strengthening exercises
- J. Reassurance
- K. Casting or splinting

Questions:

Select the most appropriate answer to the following clinical situations from the options A-K:
30 years old Murali comes to you with pain in the heel which is worse in the mornings for the past 2 weeks. He has recently started jogging. On examination there is tenderness along the medial tuberosity of the calcaneum.

3.(i) What is the treatment?

55 year old Sridevi comes to you with history of pain and deformity in both feet. On examination she has lateral deviation of both big toes along with a medial prominence along the first metatarsal head.

3.(ii) What is the treatment?

42 year old Suman comes with pain and swelling painful swelling at the top of his third toe where it comes in contact with the shoe. On examination, there is a circumscribed hyperkeratotic lesion with a central conical core of keratin.

3. (iii) What is the treatment?

47 year old Amutha has come with sharp pain in the forefoot radiating to the toes .The pain is exacerbated by walking and relieved by rest. On examination tenderness is localized in the third inter-digital space.

3. (iv) What is the treatment?

48 year old Kalyani comes with sharp, burning pain and sensory disturbance in the medial part of the forefoot not related to weight bearing. The pain is often worse at night.

3. (v) What is the treatment?

Parents of 2 month old Tina bring her to you with complaints of a foot deformity which has been present since birth. They are very anxious and are keen for a speedy resolution of the problem. The foot is both turned and twisted inwards so that the sole faces posteromedially.

4. (vi) What is the treatment?

4 THEME – DIAGNOSIS OF RED EYE [QUESTIONS. 4 (i) – 4(vi)] (TOTAL: 6 MARKS)

From the options ‘A to R’ given below, choose the best answer for the questions 4 (i) – 4(vi)

Options:

- | | |
|--|-----------------------------------|
| A. Congenital obstruction of lacrimal duct | K. Simple allergic conjunctivitis |
| B. Hyper acute bacterial conjunctivitis | L. Congenital glaucoma |
| C. Phlyctenular conjunctivitis | M. Ulcerative blepharitis |
| D. Scleritis | N. Cavernous sinus thrombosis |
| E. Episcleritis | O. Entropion |
| F. Vernal Conjunctivitis | P. Viral conjunctivitis |
| G. Bacterial conjunctivitis | Q. Orbital cellulitis |
| H. Pingecula | R. Pterygium |
| I. Squamous blepharitis | |
| J. Ectropion | |

Questions: Match the cases described below with the diagnoses listed above

- 4 (i).** 7 year old Mala is brought to you by her mother with recurrent history of a red swelling in the left eye. She has associated pain, irritation and photophobia. On examination she has a peri-limbal raised vascular nodule at the temporal limbus of the left eye. Her visual acuity is normal.
- 4 (ii).** 68 year old Arumugam has come with excessive tearing, irritation, redness and eye discomfort in the left eye. There is pain and photophobia. On examination, lid margin are inverted. Visual acuity is 6/60 in the affected eye.
- 4 (iii).** 14 year old Mani has come with seasonal complaints of severe itching and aropy discharge. There is no pain or photophobia. On examination, in the upper palpebral conjunctiva, papillary reaction is seen. There is a broad, gelatinous opacification of the superior limbus of cornea. Visual acuity is normal.
- 4 (iv).** 25 year old Subha has come with deep-seated right eye pain; pain radiates to the forehead, brow and sometimes jaw. Pain is made worse with eye movements. There is photophobia. On examination, there is a sectoral bluish discoloration of the temporal sclera of the right eye. Visual acuity and intraocular pressure is normal.
- 4 (v).** 52 year old Santhanu, a diabetic for 6 years has come with fever, severe pain right eye and photophobia for one day. On examination there is swelling in the right periorbital area. Conjunctiva is congested and chemosed. There is painful limitation of ocular movements; there are no other neurological deficits. Visual acuity is 6/60 in the affected eye.
- 4 (vi).** Mona has brought her 4 days old child with complaints of watering of both eyes since birth, on examination; there is no conjunctival or ciliary congestion. The tears are clear. The diameter of the cornea seems to be more than the other newborn babies.

5. THEME – THERMAL INJURIES [QUESTIONS. 5(i) – 5(vi)] (TOTAL: 6 MARKS)

From the options ‘A to S’ given below, choose the best answer for the questions 5(i)–5(vi):

Options :

- A. First degree burns
- B. Second degree burns
- C. Third degree burns
- D. Fourth degree burns
- E. Burn lung syndrome
- F. Sick Cell Syndrome
- G. Arc burns
- H. Contact burns
- I. Flash burns
- J. Lund and Brower’s formula
- K. Parkland formula
- L. Modified Brooke’s
- M. Wallace’s “Rule of Nines”
- N. 27%
- O. 18%
- P. 14%
- Q. 19%
- R. 48%
- S. 24%

Questions:

- 5. (i)** Ali a 37 year old man got burnt when he slept with his cigarette in his hand, but got up soon enough to douse the flame in the mattress quickly. On examination he has a burnt area on his loin region which is very painful, pink and moist. What is the likely depth of the burns?
- 5. (ii)** For children under 12 years of age, ----- chart is used to estimate the total body surface area involved in burns.
- 5. (iii)** Patekar, a 45 year old man, attempted suicide by pouring petrol over himself and lighting it with a match stick. His skin has turned black and leathery and he seems oblivious to pain. What is the likely depth of the burns?
- 5. (iv)** Name the condition which occurs in burn patients, late in the shock period and is characterized by restlessness, disorientation and acidotic breathing.
- 5. (v)** 28 year old Radha was boiling water on the kitchen platform. When she was trying to remove the big pot of water from the stove, she slipped and fell and spilled the boiling water all over her. The front of her chest (not abdomen) and half of both upper limbs were involved, what would be the extent of burns?
- 5.(vi)** The commonest type of electrical burns are -----

**6. THEME – TREATMENT OF THERMAL INJURIES [QUESTIONS 6(i) - 6(vi)]
(TOTAL: 6 MARKS)**

From the options ‘A to N’ given below, choose the best answer for the questions 6(i) – 6(vi)

Options:

- | | |
|--|----------------|
| A. Lund and Brower’s formula | H. 4 hours |
| B. Parkland formula | I. 8 hours |
| C. Modified Brooke’s | J. 18-24 hours |
| D. Hyperkalemia | K. 36-48 hours |
| E. Hypokalemia | L. 15% |
| F. Refer to a burns unit for specialist care | M. 50% |
| G. Can be treated as an outpatient | N. 25% |

Questions:

- 6 (i).** Ringer lactate solution should not be used for patients with -----
- 6 (ii).** Mani, a 6 yr old boy while playing with fireworks got burnt and rushed to your hospital. He had second degree burns involving 14% total body surface area. What will you do?
- 6 (iii).** Name the formula which is widely accepted for calculating the fluid requirement after burns.
- 6 (iv).** While replacing fluids in a burns patient, half of the calculated fluid volume is to be given in the first ----- hours post-burn.
- 6 (v).** In fluid resuscitation of a burns patient, fluid administration should be decreased ----- hours after the burn, as capillary integrity generally returns.
- 6(vi).** Adult burns of less than ----- TBSA (total body surface area) are usually not enough to initiate a generalized capillary leak, and these patients can be rehydrated successfully primarily via the oral route and can be safely managed by the general practitioner

7. THEME – TREATMENT OF EYE PROBLEMS [QUESTIONS 7(i) - 7(vi)] (TOTAL: 6 MARKS)

From the options ‘A to L’ given below, choose the best answer for the questions 7(i) – 7(vi)

Options

- | | |
|---|-------------------------------------|
| A. Trabeculectomy. | G. Oral 50% glycerol |
| B. Laser Iridotomy | H. Tab. Acetazolamide |
| C. Primary open angle glaucoma | I. 200,000 IU orally every 6 months |
| D. 5 years after the onset of diabetes | J. Subluxation of lens. |
| E. At the time of diagnosis | K. Primary angle closure glaucoma |
| F. 10 years after the onset of diabetes | L. 100,000 IU every 3-6 months |

Thankam, 51 years old lady is a newly diagnosed type 2 diabetic, coming to you. Her blood sugars are under control.

7. (i) When will you do first fundus examination for her?

Mrs. Shailaja brings her 7 month old baby to you for vaccination.

7. (ii) What is the WHO recommended schedule for prophylaxis against Vit A deficiency?

10 year old Manisha is diagnosed to have Type I DM.

7. (iii) When is the recommended time of the first ophthalmic examination for her?

Mr. Paranthaman, aged 71 years is brought to you with sudden onset of severe right sided headache and painful decreased vision in right eye. On examination, you can see ciliary congestion & shallow anterior chamber. You diagnose him to have acute primary angle closure glaucoma.

7. (iv) What is your possible diagnosis?

7. (v) What immediate treatment will you give to Mr. Paranthaman?

7. (vi) What is the surgery of choice for him?

8. THEME – DIAGNOSIS OF SHOCK [QUESTIONS. 8(i) – 8(vi)]

(TOTAL: 6 MARKS)

From the options ‘A to J’ given below, choose the best answers for the questions ‘ 8 (i) – 8(vi)’:

Options:

- | | |
|-----------------------|--------------------------|
| A. Distributive shock | G. Myocardial infarction |
| B. Hypovolemic shock | H. Myocarditis |
| C. Obstructive shock | I. 2-3 seconds |
| D. Cardiogenic shock | J. 6-10 seconds |
| E. 50 mmHg | K. 30 seconds |
| F. 60 mmHg | |

Questions:

Ranchi is a 34 year old woman who has come to you with one day history of nausea, vomiting and diarrhea. She feels very giddy and also complains of fever. On examination her BP is 94/50.

8(i). What is the kind of shock you think of first?

However you find out that she had only 3 episodes of diarrhea and that too very small volume stools. You begin to ask for more history and realize that she has been feverish for 2 days, well before the diarrhea started. Her extremities feel warm.

8(ii). Now what is your diagnosis?

8(iii). If the Mean arterial blood pressure falls significantly below ----- for an appreciable time, the end organ will not get enough blood flow, and will become ischemic.

8(iv). At normal room temperature, the distal capillary bed normally refills within -----

36 year old Monica, mother of two presented to a clinic with flu-like symptoms twice in the last 3 weeks. She received analgesics, antibiotics and vitamins. Now she has presented with weakness, dizziness, fever and with severe chest pain as well as chest tightness. Her BP was 84/56. The JVP was elevated and she had elevated cardiac enzymes. An ECHO was done which showed that there was global akinesia and her ejection fraction (EF) was <10%, with a cardiac output of 1.5 L/min.

8(v). What is the possible diagnosis for her cardiac condition?

Gayathri is a 20 year old who was bitten by a snake and she was given snake antivenom intravenously as the snake could not be identified and there was a possibility that it was poisonous. About 10 minutes later Gayathri began to feel dizzy and faint and her blood pressure was 70/50.

8.(vi). What is the kind of shock Gayathri has?

**9. THEME – CHILDHOOD BLINDNESS [QUESTIONS. 9(i) – 9(vi)]
(TOTAL: 6 MARKS)**

From the options ‘A to H’ given below, choose the best answer for the questions 9(i) – 9(vi)

Options :

- | | |
|--------------------------|---------------------|
| A. Buphthalmos | E. Retinoblastoma |
| B. Ophthalmia Neonatorum | F. Refractive Error |
| C. Astigmatism | G. Amblyopia |
| D. Vit A deficiency | H. Strabismus |

Questions: What is the correct diagnosis?

- 9. (i)** Radhika delivered a baby boy whose eyes were large with hazy cornea and he also had watering of eyes and photophobia.
- 9. (ii)** Child with a white reflex at the pupil
- 9. (iii)** Pranav has congenital ptosis, what condition can this lead to?
- 9. (iv)** 8 year old Sushma has difficulty in seeing what the teacher is writing on the blackboard in school.
What is the commonest cause for this in this age group?
- 9. (v)** Child with Bitot Spots
- 9. (vi)** Pratima is made fun of in school for her ‘cross eyes’

**10. THEME – MANAGEMENT OF SHOCK [QUESTIONS 10(i) - 10(vi)]
(TOTAL: 6 MARKS)**

From the options ‘A to M’ given below, choose the best answer for the questions 10(i) – 10(vi)

Options :

- | | |
|-------------------------|-------------------|
| A. Norepinephrine | E. 2 ml |
| B. Dopamine | F. 0.2 ml |
| C. Atropine | G. Nitroglycerine |
| D. Sodium nitroprusside | H. Adrenaline |

Questions:

Kavitha is a 8 year old child who was bitten by a snake and she was given snake antivenom intravenously. Kavitha began to feel dizzy and faint and her blood pressure was not recordable.

10(i) How will you manage?

10(ii) The weight of Kavitha is 20 Kg. What is the dose you will give?

40 years old Manish is brought to casualty with shock. The right aspects of management of cardiogenic shock are:

10(iii). If the systolic BP is between 70-100 mmHg then ----- is indicated.

10(iv) If the BP is less than 70 mmHg, then ----- is indicated.

10(v) If the systolic BP is greater than 100 mmHg, as may happen when the after load is high as in mitral & aortic regurgitation----- may be given.

10(vi) If cardiogenic shock accompanied by inappropriately high pre-load, as evidenced by high JVP then---- ----- is indicated.

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M.MED.FAMILY MEDICINE

Sub. Code: 4012

SECOND YEAR THEORY EXAM– FEB 2014

PAPER II - SURGERY AND ALLIED SCIENCES

Q.P. CODE: 434012

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MAXIMUM: 100 MARKS

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Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazine deconoate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

3(i) What is the drug of choice for Acute Psychosis?

3(ii) What is the drug of choice for Bipolar illness?

PART – A
DESCRIPTIVE QUESTIONS

(ANSWER ALL QUESTIONS)

- 1.** Mrs. Prabhavathy, a newly married 24 year old woman was severely burnt after her nylon sari caught fire while cooking. When you saw her, the burns involved the following areas:

Two thirds of the chest and abdomen in the front and one third of the back was burnt. The whole of the right upper limb, two thirds of the right lower limb, half of the left lower limb, roughly half of the face and the whole of the genital area was burnt.

(5 x 4 = 20 marks)

- A.** Calculate the extent of the burns.
- B.** Calculate the fluid requirement if her original weight was 55 kgs.
- C.** How will you manage her?
- D.** List indications for admission of a burns patient.
- E.** Describe about the acute management of burns admitted in the ward.
- 2.** Mr. Raju is brought to casualty with history of road traffic accident 30 minutes ago. He is conscious, GCS is 15/15. His pulse rate is 120 /minute; blood pressure is 80/50 mm of hg. There is no evidence of external injuries. Pulse oximeter shows a saturation of 96%; respiratory rate is 20/minute. Examination of abdomen shows a mildly tender, tense abdomen.

(5 x 4 = 20 marks)

- A.** Is Mr. Raju in shock? What are the evidences of shock in him? Calculate the mean arterial pressure in him.
- B.** Define orthostatic hypotension and its significance in Mr. Raju's case.
- C.** What are the types of shock and their causes?
- D.** How do you manage Mr. Raju?
- E.** What are the vasopressors of choice depending on the type of shock?

PART – B
EXTENDED MATCHING QUESTIONS

(ANSWER ALL QUESTIONS)

1. THEME:DIMINISHED VISION [QUESTIONS.1(i)-1(vi)] (TOTAL: 6 MARKS)

From the options ‘A to K’ given below, choose the best answer for the questions 1(i) – 1(vi)

Options :

- | | |
|---------------------------------|-----------------------------|
| A. Diabetic Retinopathy | G. Mature senile cataract |
| B. Acute angle closure glaucoma | H. Immature senile cataract |
| C. Retinal detachment | I. Amsler grid testing |
| D. No light perception | J. Pin hole testing |
| E. Cannot see 3/60 can see 1/60 | K. Fundus examination |
| F. Visual field <5° | |

Questions:

60-year-old Mr. Kannan presents with a history of gradual diminished vision in both eyes, right eye more than left eye. On examination of the lens, the colour of the lens in both eyes is grayish white and iris shadow is present. You have checked visual acuity for Mr. Kannan and recorded it as

RE – 6/60

LE – 6/24

- 1. (i) What is your diagnosis?**
- 1. (ii) According to the WHO when would you say or diagnose a person as blind?**

He informs you that he has been a diabetic on oral hypoglycemics for the past 2 years.

- 1. (iii) What other ocular examinations would you like to do?**

40 year old Mrs. Savithri presents with sudden onset of painless, diminished vision in the right eye. He has been using glasses for distance since the age of 10. She also complains of several black particles floating in the field of vision and flashes of light associated with the loss of vision.

- 1. (iv) What could be the diagnosis?**

15 Year old Sanjay complains of gradual painless diminution of vision for the past 4 years. You record his V/A as 6/24 in both eyes.

- 1. (v) Using what test would you determine if he has a refractive error?**

Mrs. Shalini had sudden loss of vision, associated with severe pain, redness, vomiting and prostration.

- 1. (vi) What must have been the cause of visual loss?**

2. THEME: DIAGNOSIS OF COMMON FOOT PROBLEMS
[QUESTIONS.2(i) - 2(vi)] (TOTAL:6 MARKS)

**From the options 'A to X' given below, choose the best answer for the questions
2(i) - 2(vi)**

- A. Pes cavus
- B. Pes planus
- C. Hammer toe
- D. Intoeing
- E. Club foot/CTEV
- F. Metatarsus abductus
- G. Femoral anteversion
- H. External tibial torsion
- I. Femoral reteroversion
- J. Bunions
- K. Melanoma
- L. Madura foot
- M. Neuropathic ulcer
- N. Plantar fasciitis
- O. Metatarsalgia
- P. Burning foot syndrome
- Q. Athlete's foot
- R. Stress fractures
- S. Frieberg's disease
- T. Talipes calcaneo valgus
- U. Corn
- V. Viral warts
- W. Callosity
- X. Subungual haematoma

Questions:

- 2.(i)** Shanthi, a 70-year-old lady comes to your OPD with complaints of pain and swelling on the medial side of her left foot for the past 6 months. She is not able to wear her shoes with ease and she has pain on walking too. She wants it removed. She removes her shoes and you notice that the medial side of the base of the first toe is swollen and her 1st toe is turned outward. What could be the most probable diagnosis?
- 2.(ii)** A 20-day-old neonate is brought to your clinic by the parents with complaints that their daughter has a deformed left foot since birth. They were told by a nurse that it will become well on its own, but it has not changed. On examination, she is sleeping and comfortable. The foot is turned up and out. You are able to bring it to normal position but it goes back to its deformed posture once you leave it. What is your diagnosis?
- 2.(iii)** Mr Manuel, a 60-year-old accountant, has come to you with foot pain for the last 10 days. The pain always occurred during walking. It just increased the night before, and he was not able to sleep last night. He had no history of trauma. He says that he had completed a vow to God by walking around the temple near home for 33 times about 2 weeks back. His thigh and legs felt sore then and it subsided with paracetamol. On examination there is no deformity or swelling. There is localized tenderness over the head of the 3rd metatarsal. You order for an X-ray foot and it appears normal. What is the likely diagnosis?
- 2.(iv)** Mr Govind, a 46-year-old temple priest, comes to you with complaints of localized pain in the foot for the last 2 months. He could tolerate it till now but for the last few days it has been painful to even do his duties in the temple. On examination of the sole you notice firm hyperkeratic lesions over the head of the first metatarsal. They are not painful to touch but painful when squeezed from the lateral sides. What is the diagnosis?
- 2.(v)** Mrs. Geetha, a 57-year-old, hypertensive on follow up with you, has comes for a routine follow up visit. On asking, if she has any other problems, she says that she has noticed for the past 2 weeks, a non-tender patch on her sole. What is you diagnosis?
- 2.(vi)** 25, year old Yuvraj comes to you with history of trauma to his big toe with a cricket ball while playing. He complains of severe pain. On examination his left big toe is swollen and tender, and there is a purple hue under the nail. What is you diagnosis?

**3. THEME – TREATMENT OF COMMON FOOT PROBLEMS [QUESTIONS. 3(i) – 3(vi)]
(TOTAL: 6 MARKS)**

From the options ‘A to N’ given below, choose the best answer for the questions. 3(i) – 3(vi)

- | | |
|-----------------------------------|-------------------------------|
| A. Wedge resection | I. Casting/splinting |
| B. Reassurance | J. Footwear with arch support |
| C. Podophyllin | K. Surgical removal |
| D. Salicylic acid | L. Miconazole cream |
| E. Intra-lesional bleomycin | M. False |
| F. Intra-lesional steroids | N. True |
| G. Physiotherapy | |
| H. Muscle strengthening exercises | |

Questions:

Select the most appropriate answer to the following clinical situations from the options A-N:

- 3.(i) Mrs. Kala, a 35-year-old, house wife comes to your OPD with painful swellings on both her feet. The swellings are present on both her soles and are painful on walking and on standing. Some pain relief was there when she wore MCR footwear, but now even that does not work. She is overweight and very busy at her house work and wants immediate relief. You notice hyperkeratotic lesions on her soles and they are painful to touch. What will be your next line of treatment?
3. (ii) A 6-day-old boy is brought to your clinic by the parents anxious about their son's foot. It has been deformed since birth. The doctor who had conducted her delivery had told her that it was because he was born “feet first”. She had advised some kind of massage but they want your opinion on it. You examine the foot and you see that it is turned down and in. What would you suggest to them as the first line of therapy?
3. (iii) Mrs Mary, an obese diabetic, on your follow up, comes to you with history of pain in her left heel, as soon as she gets up in the morning. It subsides with walking and comes back after rest. She has had physiotherapy for 2 weeks without much improvement. What is your next line of treatment?
3. (iv) Mr Ramu comes to you with a painful swelling in his right 1st toe since 2 weeks. The pain and swelling has been slowly increasing. He says that the nail had an injury a month back and was broken. The broken tip was removed and it had become better. He had been keeping his nails clean and trimming them. When you examine you notice that the lateral angle of the toe nail is turned in. There is no definite infection. What will be your choice of treatment?
3. (v) A 20 year old young house wife come to you with complaints of itching and burning in her feet, especially on her toes. What is your line of management?
3. (vi) Is it true that 1st line of treatment in clubfeet in a newborn is surgical correction of the deformity.

4. THEME – DIAGNOSIS OF RED EYE [QUESTIONS. 4 (i) – 4(vi)] (TOTAL: 6 MARKS)

From the options ‘A to K’ given below, choose the best answer for the questions 4 (i) – 4(vi)

Options:

- | | |
|-------------------------------|-------------------------|
| A. Allergic conjunctivitis | G. Viral conjunctivitis |
| B. Seborrhoeic conjunctivitis | H. Fungal keratitis |
| C. Anterior blepharitis | I. Acute blenorhoea |
| D. Posterior blepharitis | J. Episcleritis |
| E. Hordeolum externum | K. Scleritis |
| F. Hordeolum internum | |

Questions:

- 4 (i) .** 32 year old Mrs. Komala comes with frequent episodes of redness and watering of eye. On everting the eye, you find papillae. She does not wear glasses or contact lenses.
- 4 (ii) .** 8 year old Mani has come with flaky lesions in the bilateral lid margins and mild redness of the eyes. She also has dandruff.
- 4 (iii) .** 17 year old Vijaya has come with gritty sensation, redness of the eye and watery discharge from both the eyes. On examination there is conjunctival congestion in both the eyes, the discharge is watery. Preauricular lymph nodes are palpable bilaterally
- 4 (iv) .** Mr. Raju has come with mild redness of eye .On examination you see the pouting openings of meibomian glands with occasional tooth paste like discharge from the openings.
- 4 (v) .** Mrs. Banu has come with a swelling of lid of 2 days duration. The lesion is very painful and you can see the pus pointing at the base of an eye lash.
- 4 (vi).** 18 year old Malan has come with a painless swelling of in the lateral end of upper eyelid which is very slowly growing over the past 2 months. There is no symptom other than mild heaviness of lids and congestion of the eye. On examination, the swelling is 1x1 cm, painless, felt under the skin.

5. THEME – THERMAL INJURY [QUESTIONS. 5(i) – 5(vi)] (TOTAL: 6 MARKS)

From the options ‘A to M’ given below, choose the best answer for the questions 5(i)–5(vi):

Options :

- | | |
|----------------------------|---------------------|
| A. Silver sulphadiazine-1% | H. First degree |
| B. 1% Povidone Iodine | I. Second degree |
| C. 19% | J. Mafenide 10% |
| D. 48% | K. Acid burns |
| E. 24% | L. Electrical burns |
| F. 5000 ml | M. 2500 ml. |
| G. 2390 ml | |

Questions:

5 year old Sathish when playing in the kitchen has sat on a hot bucket of water. On getting up he upset the bucket of water on his legs also. When you see him, the scalds involve the whole gluteal region and the posterior aspect of the thigh and legs.

5. (i) What is the percentage of burns according to Lund and Brower’s formula?

23 year old Murugan, when he was burning the waste of the house, got fire on his dress. The burns, when you examined him involved the anterior thorax and abdomen and both fore arms.

5.(ii) What is the percentage of burns according to Wallace’ formula?

5.(iii) What is the first day IV fluid requirement for Murugan?

Subash, a seven year old boy has been using an ointment for burns in his forearm for around two weeks. The wound is healing well. But when he developed a bad sore throat and fever, his doctor checked a peripheral smear. His total count was 2200!

5.(iv) If it is due to the medication he was using, what is the ointment?

Sudhakar has come with the burns in the chest. The burn is very painful, pink and moist. There are few blisters.

5.(v) What is the degree of burns?

Answer the following question:

5.(vi) This ointment is painful for application, prevents epithelialization and cause metabolic acidosis:

6. THEME – TREATMENT OF RED EYE [QUESTIONS 6(i) - 6(vi)] (TOTAL: 6 MARKS)

From the options ‘A to I’ given below, choose the best answer for the questions 6(i) – 6(vi)

Options:

- | | |
|---|--|
| A. Systemic antibiotics, topical antibiotics
and urgent referral | E. Surgical excision |
| B. Epilation and antibiotic ointment | F. Systemic antibiotics, topical antibiotics |
| C. Observation | G. Artificial tears |
| D. Lid hygiene | H. Eye closure and tapping |
| | I. Cromol 4% drops |

Questions:

6 (i). Mr. Jeevan, 42 year old farmer has come with a fleshy triangular growth in the sclera of right eye towards cornea. Cornel margins are free. There are no other symptoms. What is the treatment?

6 (ii) .2 days old Juniata’s baby is brought with purulent discharge of both the eyes on the second day of life. The discharge is thick and purulent; there is chemosis and lid edema. How will you treat this child?

6 (iii). Mr.Kailash is diagnosed with Seborrhoeic blepharitis. What is the treatment?

6 (iv). Treatment for Mrs. Malini who is diagnosed with hordeolum externum

6 (v). Treatment for Mrs. Suraksha who is diagnosed with posterior blepharitis

6 (vi). Treatment for Mr. Madhu who is diagnosed with hordeolum internum

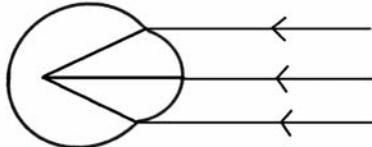
7. THEME – REFRACTIVE ERRORS [QUESTIONS 7(i) - 7(vi)] (TOTAL: 6 MARKS)

From the options ‘A to I’ given below, choose the best answer for the questions 7(i) – 7(vi)
Options :

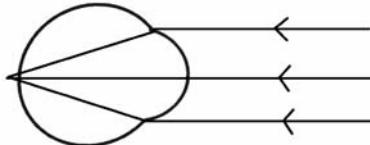
- A. Myopia
- B. Hypermetropia
- C. Astigmatism
- D. Emmetropia
- E. Cycloplegic retinoscopy
- F. Pin hole testing
- G. Vitamin supplements
- H. Strabismus
- I. Retinal detachment

Questions:

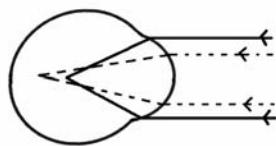
7. (i) Parallel rays of light coming are focused in front of the retina when accommodation is at rest.



7. (ii) Parallel rays of light are focused behind the retina when accommodation is at rest.



7. (iii) There are unequal refractive powers in different meridians therefore, the rays of light entering the eye cannot converge to a point.



5 year old Nisha is brought to you with symptoms of headache, burning of eyes and tired eyes at the end of the day. Her parents say that she has recently started school and also watches a lot of television.

7. (iv) What examination would you like to perform for Nisha?

7. (v) Her vision is normal, you still want to rule out ocular causes of her problems. So what will advice?

Shabnam, an 18 year old girl, comes to you with a history of painless diminished vision for distance for the past 10 years. She has been using glasses irregularly for her problem.

7. (vi) What would be her future complication ?

8. THEME – JAUNDICE [QUESTIONS. 8(i) – 8(vi)] (TOTAL: 6 MARKS)

From the options ‘A to J’ given below, choose the best answers for the questions ‘ 8 (i) – 8(vi)’:

Options:

- | | |
|--|-------------------------------|
| A. Obstructive jaundice | E. Pancreatic carcinoma |
| B. Hemolytic jaundice | F. Gilberts syndrome |
| C. Acute hepatitis due to Leptospira infection | G. Criggler Najars syndrome . |
| D. Hemolytic jaundice with falciparum malaria | H. Dubin Johnson syndrome |
| | I. Rotors syndrome |
| | J. Viral hepatitis |

Questions:

8 (i).Patient presents with anemia like fatigue, pallor, congestive failure and jaundice.

8(ii).14 year old school girl presents with prodrome of nausea, vomiting, low grade fever few days prior to jaundice

8(iii).38 year old male presents with fever, jaundice, haemorrhagic conjunctiva, skin and in renal failure.

8 (iv).22 year old male presents with recurrent jaundice, with total Bilirubin of 4 mg% and direct Bilirubin of 1mg %.

8(v). Patient presents with high fever, right upper quadrant pain, jaundice.

8. (vi).24 year old male presents with fever, chills, rigor and jaundice.

**9. THEME – CHILDHOOD BLINDNESS [QUESTIONS. 9(i) – 9(vi)]
(TOTAL: 6 MARKS)**

From the options ‘A to H’ given below, choose the best answer for the questions 9(i) – 9(vi)

Options :

- | | |
|--------------------------|---------------------|
| A. Buphthalmos | E. Retinoblastoma |
| B. Ophthalmia Neonatorum | F. Refractive Error |
| C. Astigmatism | G. Amblyopia |
| D. Vit A deficiency | H. Strabismus |

Questions:

9. (i) Radhika delivered a baby boy whose eyes were large with hazy cornea and he also had watering of eyes and photophobia.

9. (ii) Child with a white reflex at the pupil

9. (iii) Pranav has congenital ptosis, what condition can this lead to?

9. (iv) 8 year old Sushma has difficulty in seeing what the teacher is writing on the blackboard in school.
What is the commonest cause for this in this age group?

9. (v) Child with Bitot Spots

9. (vi) Pratima is made fun of in school for her ‘cross eyes’

10. THEME – SHOCK [QUESTIONS 10(i) - 10(vi)] (TOTAL: 6 MARKS)

From the options ‘A to M’ given below, choose the best answer for the questions 10(i) – 10(vi)

Options :

- | | |
|--|---|
| A. Hypovolemic shock | H. Less than 150mg% |
| B. Cardiogenic shock | I. 40 |
| C. Atropine | J. IV fluids + /- blood / packed cells/ albumin |
| D. Treat infection and stabilize patient | K. 60 |
| E. Obstructive shock | L. Adrenaline |
| F. Anaphylactic shock | M. Less than 120mg% |
| G. Septic shock | |

Questions:

10(i) Increased pulse pressure, warm and pink extremities, severely decreased diastolic BP is suggestive of _____ shock.

10(ii) 45 years old Sivaraman in a flight had sudden onset of breathing difficulty. On examination he has tachycardia, tachypnea and hypotension. He has decreased breath sounds on one side with elevation of JVP. What type of shock does he have?

40 years old Manish is brought to casualty with shock. The right aspects of management are:

10(iii) Maintain blood glucose less than _____.

10(iv) Maintain the mean arterial blood pressure to at least_____.

10(v) If he has hypovolemic shock, the management would be _____.

10(vi) If he has Anaphylactic Shock, the management would be _____.

(LF 0214)

M.MED.FAMILY MEDICINE

Sub Code: 4012

SECOND YEAR THEORY EXAM – AUGUST 2014

PAPER II - SURGERY AND ALLIED SCIENCES

QP CODE: 434012

TIME: THREE HOURS

MAXIMUM MARKS: 100

INSTRUCTIONS

- The paper will be for a total of **100 marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios **(40 marks)**
- **Part B** will have Objective type EMQs [**Extended matching questions**] **(60 marks)**
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. Below this, some **options** are given followed by some **questions**. The options are lettered using the English Alphabets **A, B, C, D** and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazine deconoate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

3(i) What is the drug of choice for Acute Psychosis?

3(ii) What is the drug of choice for Bipolar illness?

- ✓ Match each question to a **single best option** and write it in your paper in the column provided like this:

3(i)	
3(ii)	
3(iii)	
3(iv)	
3(v)	
3(vi)	

- ✓ Each option may be used more than once.
options may not be used at all.

Some

PART – A

DESCRIPTIVE QUESTIONS

(ANSWER ALL QUESTIONS)

1. 52 years old Mr. Sathish has come to you with the complaint of sudden, diminution of vision and severe pain on the right eye. There is no history of any trauma. [Total: 20 Marks]

- A. List the preventable causes of blindness (2 marks)

B. How will you classify Glaucoma? What are the main clinical findings you will look for to make a diagnosis of Glaucoma? (8 marks)

C. What are the clinical features of angle closure Glaucoma? How will you manage angle closure Glaucoma? (8 marks)

D. Discuss the role of screening in Glaucoma. (2 marks)

2. Mr. Pandian has come to you with the complaints of having tiredness, anorexia and jaundice. His blood test results showed increased total bilirubin and direct bilirubin levels. Indirect bilirubin levels are low. [Total 20 Marks]

A. List some common intrahepatic and extrahepatic conditions that can cause this type of jaundice. (4 marks)

B. What is Charcot's triad? Explain its significance. (4 marks)

C. What is Courvoisier's sign? What does it indicate? (4 marks)

D. How will you proceed to do investigations in this patient to come to a diagnosis? Explain it with the help of an algorithm. (8 marks)

PART - B

EXTENDED MATCHING QUESTIONS

(ANSWER ALL QUESTIONS)

- 1. THEME: FOOT DEFORMITIES [QUESTIONS 1(i)-1(vi)]** **(Total:6 Marks)**
From the options 'A to L' given below, choose the best answer for the questions 1(i) - 1(vi)

Options

- C. Femoral anteversion
- D. 2 – 3 years
- E. Femoral retroversion
- F. Talipes equinovarus
- G. 6 – 12 months
- H. Internal tibial torsion
- I. External tibial torsion
- J. 8 – 12 weeks
- K. Patellofemoral instability
- L. Slipped femoral epiphysis

Questions

Mrs. Thenmozhi brought her 4 years old child with the complaint of foot deformity. On examination, you found that the child has out-toeing and excessive wear along the lateral border of the shoes of the child. You put the child in a prone position with knees flexed at 90 degrees and measured thigh-foot angle and found that it was greater than 30 degrees of external rotation.

1. (i) What is your diagnosis?
1. (ii) What complication can occur in untreated cases?

Mrs. Suhasini brought her 1 year old child to you with anxiety about the foot deformity her child has. On examination you found that the child's feet showed out-toeing and the child walks with feet turned out at greater than 90 degrees from the line of forward progression (Charlie Chaplin posture).

1. (iii) What is your diagnosis?
1. (iv) At what age this deformity will resolve?

Mrs. Ponni came to you for a normal delivery. After conducting the delivery, you notice that the baby has some foot deformity. The foot is both turned and twisted inwards so that the sole faces postero-medially. The fore foot is adducted and supinated.

1. (v) What is your diagnosis?
1. (vi) At what age, will you send the baby to an orthopedic surgeon?

2. THEME – DIAGNOSIS OF FOOT PAIN [QUESTIONS 2(i) – 2(vi)] (Total: 6 Marks)

From the options ‘A to M’ given below, choose the best answers for the questions 2 (i) – 2(vi)

Options:

- | | |
|-------------------------------------|----------------------|
| A. Metatarsal stress fracture | F. Morton's neuroma |
| B. Metatarsalgia | G. Adson's Sign |
| C. Club Foot | H. Morton's sign |
| D. Tarsal navicular stress fracture | I. Mulder's Click |
| E. Tinel's sign | J. Plantar fasciitis |

K. Tarsal tunnel syndrome

M. Bony tumour of foot

L. Arthritis

Questions:

45-year-old Mrs. Hamsa came to you with the complaint of having pain on her left foot for the past 2 days. On further questioning, you found that she is having diffuse pain along the medial longitudinal arch of the left foot, which is worsened by weight-bearing activities. On inspection, there is mild swelling but there is no gross deformity.

2. (i) What is the possible diagnosis?

60 years old lady came to you with the complaint of having heel pain, which is most pronounced with the first steps she takes on getting up

2. (ii) What is the common cause of this type of heel pain?

53-year-old Mr. Francis presents with sharp, burning pain and sensory disturbance in the medial part of the forefoot not related to weight bearing. The pain is often worse at night. On examination, as you tap over the posterior tibial nerve just posterior to the medial malleolus, he experiences tingling sensation along the path of the nerve.

2. (iii) What is the name of this sign elicited?

2. (iv) What is your diagnosis?

A 39-year-old woman came to you with the complaint of having sharp pain in the forefoot radiating to the toes. The pain is exacerbated by standing or walking and is relieved by rest. On examination, tenderness is localized in one of the interdigital spaces and there is tenderness on squeezing the web space. Sensation diminished in the cleft of the involved interdigital space and adjacent toes.

2. (v) What is the possible diagnosis?

Mr. Nandhan, who is doing vigorous walking exercise to control his pre-diabetes sugar levels, came to you with the complaint of pain in the forefoot. On examination you found that he has flat foot and plantar callus beneath the metatarsal heads. There is tenderness on palpation of the metatarsal heads.

2. (vi) What is the possible diagnosis?

3. THEME – DIAGNOSIS OF SHOCK [QUESTIONS 3(i) – 3(vi)] (Total: 6 Marks)
From the options ‘A to I’ given below, choose the best answers for the questions 3(i) – 3(vi)

Options:

- A. Hypovolemic shock
- B. Myocardial infarction
- C. Obstructive shock
- D. Sepsis
- E. Cardiogenic shock
- F. Distributive shock
- G. Adult Respiratory Distress Syndrome
- H. Local inflammation
- I. Avascular necrosis of femur

Questions:

You gave a test dose of Inj. Penicillin to Ms. Sarala and immediately she developed respiratory distress, wheezing and urticarial rashes. She feels giddy and her blood pressure is very low.

3. (i) What kind of shock does Ms. Sarala have?

70 years old Mr. Ravi Kumar was hospitalised for a surgery and was put on aindwelling urinary catheter for more than a week. Suddenly he developed high fever, tachycardia and his blood pressure was low

- 3. (ii) What kind of shock does Mr. Ravi Kumar have?
- 3. (iii) What could be the cause for his shock?

Mrs. Vimala is a 34 year old woman who has come to you with one day history of nausea, vomiting and diarrhea. She feels very giddy and also complains of fever. On examination her BP is 94/50.

3. (iv)What kind of shock does Mrs. Vimala have?

55 year old Mr. Kuberan, a known diabetic and hypertensive, had a fracture of the neck of femur and he is at home undergoing conservative treatment with bed rest and traction for the last one week. He calls you with a sudden history of unease, sweating and chest pain and when you visit him, you find that his BP is 86/60.

- 3. (v)What kind of shock does Mr. Kuberan have?
- 3. (vi)What could be the cause for his shock?

4. THEME: DIAGNOSIS OF DIMINISHED VISION [QUESTIONS 4(i) - 4(vi)]

(Total:6 Marks)

From the options 'A to J' given below, choose the best answer for the questions 4(i) - 4(vi)

Options

- A.** Anisometropic amblyopia
- B.** Retinoblastoma
- C.** Stimulus deprivation amblyopia
- D.** Buphthalmos
- E.** Ametropic amblyopia
- F.** Vitamin A deficiency
- G.** Strabismic amblyopia
- H.** Ophthalmia neonatorum
- I.** Vernal Conjunctivitis
- J.** Angle Closure Glaucoma

Questions:

Mrs. Kamalam has brought her 6 months old baby to you with the complaint that the baby is not smiling or looking at her. On examination, you found that the baby has congenital cataract.

4.(i) What is the possible diagnosis?

Mrs. Ragini has brought her 8 years old child to you with the complaint that the child is having squint of the eye and blurred vision.

4.(ii) What is the possible reason for blurred vision?

You went for a health screening camp for the school children in your locality. 12 years old Arun who is studying in 7th standard class, had vision test during this camp and was found that his one eye had a large refractive error and the other eye is almost normal. There is no detectable organic ocular lesion.

4.(iii) What is the possible diagnosis?

During that school health camp, you also noticed that another girl had a vision test and was found that her both eyes are having high refractive errors. There is no detectable organic ocular lesion.

4.(iv) What is the possible diagnosis?

You have conducted a normal vaginal delivery in a Primary health centre. The newborn baby is having large eyes, hazy cornea and watering from both eyes. The eyelids are normal.

4.(v) What is the possible diagnosis?

Mr. Natarajan brought his child to you with the complaint of not able to see properly. On examination you found that the child is having white reflex at the pupil.

4.(vi) What is the possible diagnosis?

5. THEME: MANAGEMENT OF VITAMIN A DEFICIENCY [QUESTIONS 5(i)-5(vi)]
(Total:6 Marks)

From the options ‘A to M’ given below, choose the best answer for the questions 5(i) - 5(vi)

Options

- | | |
|--------------------------------|------------------------------|
| A. 2 years | H. 2,00,000 IU – single dose |
| B. 50,000 IU daily for 1 week | I. 3 months |
| C. 18 months | J. 9 months |
| D. 1,00,000 IU – single dose | K. Next day |
| E. 1 year | L. Next week |
| F. 10,000 IU daily for 2 weeks | M. After 4 weeks |
| G. 6 months | |

Questions

28 years old Mrs. Madhu came to you with the complaint of not able to see properly in the night time. She is 4 months pregnant now. On examination you found that she is having conjunctivalxerosis and Bitot’s spots.

5. (i) How will you treat her?

You are working in a primary health centre. Mrs. Helen is bringing her 3 months old baby for routine immunisation. The baby is active and normal, doesn’t have any Bitot’s spots. You want to give Vitamin Aprophylaxis for this baby under the child survival and safe motherhood programme.

5. (ii) At what age you will recommend first dose of Vitamin A supplementation?
5. (iii) At what age you will recommend second dose of Vitamin A supplementation?

Mrs. Gomathi brought her 9 months old baby to you for measles vaccination. On examination you found that the baby has Bitot’s spots.

5. (iv) What is the dose of Vitamin A, you will give to treat this baby?
5. (v) When will you give the second dose?
5. (vi) When will you give the third dose?

6. THEME – DIAGNOSIS OF BURNS[QUESTIONS 6 (i) – 6 (vi)]
(Total:6 Marks)

From the options ‘A to P’ given below, choose the best answer for the questions 6(i)–6(vi)

Options :

- | | |
|------------------------|-----------------------|
| A. Third degree burns | I. 27 % |
| B. Hypokalemia | J. Arc burns |
| C. Contact burns | K. Scalds |
| D. First degree burns | L. Cardiac arrhythmia |
| E. 45 % | M. Flame burns |
| F. Flash burns | N. 9% |
| G. 18 % | O. Hyponatremia |
| H. Fourth degree burns | P. Pulmonary edema |

Questions:

50-year-old Mr. Oliver had exposure to hot sun on a long day out during the peak summer. He developed sunburn on his skin, no blisters.

6. (i) What is the likely depth of this burn on him?

28-year-old Radhika was boiling water on the kitchen platform. When she was trying to remove the big pot of water from the stove, she slipped and fell and spilled the boiling water all over her.

6.(ii) What type of thermal injury would you call this?

6. (iii) If the front of her chest (not abdomen) and half of both upper limbs were involved, what would be the extent of burns?

40-year-old Mrs. Kumari had touched the live wires accidentally and sustained injuries.

6. (iv) What is the type of burns she would have had?

6. (v) What is the likely complication you can expect in this patient?

37-year-old Mr. Rahumangot burnt when he slept with his cigarette in his hand, but got up soon enough to douse the flame in the mattress. On examination he had a burnt area on his loin region which was very painful, pink and moist. Soon after few days, it got infected and became painless.

6. (vi) What is likely to be the depth of this burn wound?

7. THEME – TREATMENT OF SHOCK [QUESTIONS 7(i) – 7(vi)] (Total: 6 Marks)

From the options ‘A to M’ given below, choose the best answers for the questions 7(i) – 7(vi)

Options:

- A. Sodium nitroprusside
- B. 3 – 5 mg
- C. 5-15 µg/kg/min
- D. Adrenaline
- E. 5 to 20µg/min
- F. Nitroglycerine
- G. Noradrenaline
- H. 0.3 – 0.5 mg
- I. 2-20 µg/kg/min
- J. Dopamine
- K. 0.5 to 30 µg/min
- L. 6 – 10 mg
- M. Dobutamine

Questions:

Mr. Murali who got admitted with the problem of meningitis received a test dose of Inj. Penicillin by you and immediately he developed respiratory distress, wheezing and urticarial rashes. He feels giddy and his blood pressure is very low.

- 7. (i) What is your drug of choice to manage his shock?
- 7. (ii) What is the dose in which you will administer this drug?

60 years old Mrs. Lalitha was hospitalised for a surgery and having indwelling urinary catheter for more than a week. Suddenly she developed high fever, tachycardia and blood pressure was low with systolic less than 70 mmHg.

- 7. (iii) What is your drug of choice to manage her shock?
- 7. (iv) What is the dose in which you will administer this drug?

65 years old Mrs. Violet is brought to you with the complaint of Chest pain, shortness of breath, sweating, nausea and vomiting. On examination, she has marked tachycardia, cool and clammy extremities, poor peripheral pulses, and BP is 90/70.

- 7. (v) What is your drug of choice to manage her shock?
- 7. (vi) What is the dose in which you will administer this drug?

8. THEME: RED EYE [QUESTIONS 8(i) - 8(vi)]

(Total: 6 Marks)

From the options ‘A to N’ given below, choose the best answer for the questions 8(i) - 8(vi)

Options

- A. Herpes simplex keratitis
- B. Antibiotic eye drops

- C. Chemical keratitis
- D. Topical steroid drops
- E. Fungal keratitis
- F. Pterygium
- G. Atopy
- H. Genetic factor
- I. Tuberculosis
- J. Allergic conjunctivitis
- K. Phlyctenular conjunctivitis
- L. Vernal Conjunctivitis
- M. Topical antihistamines
- N. Refer for surgery

Questions:

30 year old Mr. Velu, an agricultural labourer, comes to you with history of redness in the right eye for two days. Patient gives you history of eye trauma caused by a leaf. He has associated symptoms of pain, watering and photophobia.

8. (i) What would be your diagnosis based on this history?

Manimala a 9 year old girl is brought to you by her mother with history of a red swelling in the left eye for the past one week. She has associated pain, irritation and photophobia. On examination the patient has a raised vascular nodule at the temporal limbus of the left eye.

8. (ii) What could be the diagnosis?
 8. (iii) How would you treat this patient?
 8. (iv) In severe or recurrent cases, what could be the cause?

45 year old Mr. Annamalai presents with a history of growth in both eyes for the past five years. Apart from mild discomfort he has no symptoms. On examination there is a triangular fleshy growth on both corneas. The growth in the right eye is approaching the center of the cornea.

8. (v) What is your diagnosis?
 8. (vi) How will you manage him?

9. THEME –TREATMENT OF THERMAL INJURIES [QUESTIONS 9(i) - 9(vi)]
(Total: 6 Marks)

From the options ‘A to L’ given below, choose the best answer for the questions 9(i) – 9(vi)

Options:

- | | |
|----------------------------|------------------|
| A. 1 - 2ml/kg/hr | E. 0.5-1ml/kg/hr |
| B. Silver sulphadiazine 1% | F. 5000 ml |
| C. 2390 ml | G. Mafenide 10% |
| D. 1% Povidone Iodine | H. 2500 ml |

- I. 0.25-0.5ml/kg/hr
- J. Isotonic sodium chloride
- K. Ringer lactate
- L. Neosporin

Questions:

40-year-old Mr. Muragan's dress caught fire when he was burning the waste of the house. The burns, when you examined him involved the anterior thorax and abdomen and both fore arms. You admitted him in your hospital under a specialist care.

- 9. (i) Which intra venous fluid you will prefer to give him first?
- 9. (ii) What is the first day IV fluid requirement needed for Mr. Murugan?

After some time, his blood test results came and it was found that he is having hyperkalemia

- 9. (iii) Now, which intra venous fluid you will avoid in him?

You catheterize him and adjust the IV fluids according to urine output. You know that the best guideline for fluid calculation is to be based on hourly urine output.

- 9. (iv) What is the desired level of hourly urine output, you will aim in this patient?

Mrs. Geetha brought her seven year old son with the complaint of burns in his forearm. You gave him some ointment to apply locally for two weeks.

- 9. (v) Name the ointment which is painful for application and prevents epithelialization?

After 2 weeks, again Mrs. Geetha brought her son to you. Now the wound is healing well. But he developed a bad sore throat and fever which was not subsiding. You checked his peripheral blood smear and his total count was 2200!

- 9. (vi) Name the ointment which can cause this side effect.

10. THEME: JAUNDICE [QUESTIONS 10(i) - 10(vi)]

(Total:6 Marks)

From the options 'A to H' given below, choose the best answer for the questions 10(i) - 10(vi)
Options

- A. Refer to a higher centre
- B. Hemolytic jaundice
- C. Cholestatic jaundice
- D. Hepatocellular jaundice
- E. Obstructive jaundice
- F. Explain and reassure
- G. Start Liv 52 tablets
- H. Stop all haematinics

Questions:

30 years old Mrs. Valli, who is on oral contraceptives for the past 2 years, had an ear infection followed by purulent ear discharge. She went to a local doctor who gave her Amoxycillin/Clavulanate combination and steroids. After few days she developed jaundice.

10. (i) What type of jaundice is Mrs. Valli likely to have developed?

45 years old Mr. Natarajan has been started on anti-tubercular therapy with Rifampicin, INH pyrazinamide and ethambutol. You advise him to undergo monthly laboratory testing for the first three months of therapy and then every three to six months to prevent the development of complication of therapy.

10. (ii) What type of jaundice do you anticipate Mr. Natarajan to develop?

20 years old Mr. Murugan is a known alcoholic and he is also on anti-Seizure medications for the past 5 years. He took many tablets of Paracetamol from the medical stores for body pain he had for the past 2 weeks. Now he developed jaundice.

10. (iii) What type of jaundice is Mr. Murugan likely to have developed?

50 year old Mrs. Radha comes to you with the complaint of itching all over the body and jaundice. She had no abdominal pain. Her blood test results showed conjugated hyperbilirubinemia and high levels of alkaline phosphatase.

10. (iv) What type of jaundice does Radha have?

23 year old pregnant lady in third trimester comes to you with the complaint of fatigue and pruritus. She has fever, vomiting and jaundice. Her LFT shows marked elevations of transaminases (ALT and AST).

10. (v) What does this patient suffer from?

10. (vi) How will you manage her?

(LG 0215)

M.MED.FAMILY MEDICINE

(Sub Code: 4012)

SECOND YEAR THEORY EXAM– FEBRUARY 2015

PAPER II - SURGERY AND ALLIED SCIENCES

QP .CODE: 434012

Time: Three hours

Maximum Marks: 100

INSTRUCTIONS

- The paper will be for a total of **100 marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios **(40 marks)**.
- **Part B** will have Objective type EMQs **Extended Matching Questions (60 marks)**.
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. Below this, **some options** given on the top followed by **some questions**. The options are lettered using the English Alphabets **A, B, C, D** and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6Marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazinedeconcoate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

3(i) What is the drug of choice for Acute Psychosis?

3(ii) What is the drug of choice for Bipolar illness?

- ✓ Match each question to a **single best option** and write it in your paper in the column provided like this:

3(i)	A
3(ii)	F
3(iii)	
3(iv)	
3(v)	
3(vi)	

- ✓ Each option may be used more than once. Some options may not be used at all.

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

1. 28 year old Mr. Madhan has been brought to the casualty by his friends. He was hit by a vehicle 30 minutes ago. His right thigh looks deformed and from an open wound from the middle of the thigh, he is profusely bleeding. His BP is 70 / 60 mm of Hg, pulse rate is 120/minute. (Total: 20 Marks)
 - A. What are the types of shock? Discuss briefly the history and clinical findings of each type. (10 Marks)
 - B. What are the six principles in management of shock? (6 Marks)
 - C. How will you manage Mr. Madhan before referring him? (4 Marks)
2. 20 year old Devi has come with burns involving both the lower limbs, anteriorly and posteriorly. Her weight is 42 kg. (Total 20 Marks)
 - A. What is the percentage of burns? How will you calculate it? (4 Marks)
 - B. How will you classify the burns according the depth of involvement? What are the signs and symptoms of each class? (6 Marks)
 - C. When you explain about the immediate referral, the family is not willing to go anywhere else. What is the fluid requirement for the first day and how will you calculate it? (4 Marks)
 - D. What are the principles of burns wound care? (6 Marks)

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

- 1. THEME: LIVER FUNCTION TESTS [QUESTIONS. 1(i) - 1(vi)]** (Total: 6 Marks)
From the options ‘A to I’ given below, choose the best answer for the questions 1(i) – 1(vi)

Options

- A. AFP (Alpha Feto Protein) less than 200 ng/ml
- B. Presence of cylindrical myosomic antibodies
- C. Aminotransferases highly elevated, Alkaline Phosphatase mildly elevated and PT normal
- D. Aminotransferases highly elevated, Alkaline Phosphatase mildly elevated and PT high
- E. Aminotransferases mildly elevated, Alkaline Phosphatase highly elevated and PT high
- F. Aminotransferases mildly elevated, Alkaline Phosphatase mildly elevated and PT almost normal
- G. Presence of anti-mitochondrial antibodies
- H. GGT highly elevated , Alkaline Phosphatase mildly elevated and PT normal
- I. AFP (Alpha Feto Protein) more than 500 ng/ml

Questions: From the options above choose the right investigation findings for the patients described below:

- 1(i). Investigation findings for 45 year old Mrs. Fiona who has hepatoma.
- 1(ii). Investigation findings for 20 year old Ms. Janis who is diagnosed with autoimmune hepatitis.
- 1(iii). Investigation findings for 40 year old Mr. Ganesh who is diagnosed to have Acute decompensated hepatic injury.
- 1(iv). Investigation findings for 45 year old Mr. Das who has alcoholic hepatitis.
- 1(v). Investigation findings for 36 year old Mrs. Leela who has calculous cholecystitis.
- 1(vi). Investigation findings for 55 year old Mrs. Devi who has chronic hepatic disease.

2. THEME: INVESTIGATION IN HEPATITIS B INFECTION [QUESTIONS. 2 (i) - 2(vi)] (Total: 6 Marks)

From the options ‘A to G’ given below, choose the best answer for the questions 2(i) – 2(vi)

Options

- A. Recent infection
- B. Virus replication is occurring in the liver
- C. Indicates exposure to HBV.
- D. Recent Hepatitis E infection
- E. High level of viral replication
- F. Immunity following infection
- G. Low infectivity in a carrier

Questions: From the options above choose the right interpretation for the patient results given below:

- 2(i) Mrs. Hema has hepatitis now. Her HBsAg is positive.
- 2(ii) Mrs. Kala has hepatitis now. Her HBeAg is positive.
- 2(iii) Mr. John’s investigations show presence of anti-HBs.
- 2(iv) Mrs. Devi’s investigations show presence of anti-HBe.
- 2(v) Mrs. Jamila’s investigations show a positive core IgM for Hepatitis B.
- 2(vi) Mr. Pradap’s investigations show a positive core IgG for Hepatitis B.

3. THEME 3 : RED EYE DIAGNOSIS [QUESTIONS. 3 (i) – 3 (vi)] (Total: 6 Marks)

From the options ‘A to I’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options

- A. Episcleritis
- B. Scleritis
- C. Viral Conjunctivitis

- D. Hordeolum Internum
- E. Pterygium
- F. Hordeolum Internum
- G. Phlycten
- H. Iritis
- I. Keratitis

Questions: Choose the correct diagnosis from the options above for each of the scenarios given below:

3(i) 52 year old Mr. Ganesh has come with red eye. His visual acuity is normal, he has conjunctival congestion, watery discharge. His cornea is clear, and pupil is normal and reacting.

3(ii) 11 year old Tharun gives you history of eye trauma caused by a leaf. He has associated symptoms of pain, watering and photophobia.

3(iii) 9 year old Mamta has come with unilateral red eye for the past one week. She has associated pain, irritation and photophobia. On examination she has a raised vascular nodule at the temporal limbus of the left eye.

3(iv) 45 year old Annamalai presents with a history of growth in both eyes for the past five years. Apart from mild discomfort he has no symptoms. On examination there is a triangular fleshy growth on both eyes on the lateral part of the sclera but impinging on to the periphery of the corneas.

3(v) The commonest reason for 22 year old Mr. Gopal Swami who is diagnosed to have ankylosing spondylitis to present with a red eye.

3(vi) The commonest reason for 28 year old Mrs. Leena who is diagnosed to have rheumatoid arthritis to present with a red eye.

4. THEME: RED EYE MANAGEMENT [QUESTIONS. 4 (i) – 4 (vi)] (Total: 6 Marks)
From the options ‘A to I’ given below, choose the best answer for the questions 4(i)–4(vi)

Options

- A. Lid hygiene and treat seborrhea
- B. Local antibiotics
- C. Lubricants
- D. Lid hygiene and doxycycline
- E. Homatropine and Local antibiotics
- F. Homatropine and indomethacin drops
- G. Excision and curettage
- H. Parenteral and local antibiotics
- I. Mast cell stabilizers

Questions: Choose the correct management from the options above for each of the scenarios given below:

4(i) Mrs. Geetha who has come to you with complaints of red eye. On examination, there are pouting openings of the meibomian glands discharging cheesy material.

4(ii) Mr. Hari has come with red eye. On examination, the lid margin is crusted and there is bleeding occurs on removing the crusts.

4(iii) Mr. Thilak has come to your clinic with red eye. On examination, there is a small swelling of the lid which had been there for a month. There is mild pain on palpation.

4(iv) Mrs. Lalis worried as she has developed a red eye. On examination, she has conjunctival congestion, watery discharge. Her cornea is clear, pupil is normal and reacting.

4(v) Mr. Kumar is a farmer and he sustained injury to his right eye while at work. He has come with red eye. On examination, you find that there is ciliary congestion, photophobia, severe pain and a central corneal ulcer.

4(vi) 14 year old Giri who has come with red eye. On examination, there is broad, gelatinous opacification of the superior limbus.

5. THEME – FOOT PROBLEMS 5(i) - 5(vi)] (Total: 6 Marks)
From the options ‘A to G’ given below, choose the best answer for the questions. 5(i)–5(vi)

Options

- A. Femoral Retroversion
- B. Talipes calcaneo valgus
- C. Internal Tibial Torsion
- D. Postural equinovarus
- E. Metatarsus adductus
- F. External Tibial Torsion
- G. Femoral Anteversion

Questions: Choose the correct diagnosis from the options above for each of the scenarios given below:

5(i) 6 days old Gautam has club feet on the right side. On examination, the bones are normal and there is no soft tissue contracture.

5(ii) 7 years old Madhu has in-toeing of foot. His feet are flexible and deformity corrects with passive motion.

5(iii) 3 days old Vasantha’s baby has a foot deformity. The right foot is hyperdorsiflexed, the heel is turned outward and the fore foot is abducted. The birth weight of the child is 3.9 kg.

5(iv) 4 year old Sumatra walks with her feet turned out at greater than 90 degrees from the line of forward progression.

5(v) 5 year old Hari presents with a history of out-toeing. Excessive wear is seen along the lateral border of his shoes.

5 (vi) 5 year old Lucy walks within-toeing and can sit in a characteristic ‘W’ shaped posture.

6. THEME – MANAGEMENT OF FOOT PROBLEMS [QUESTIONS. 6(i) -6 (vi)]
(Total: 6 Marks)

From the options ‘A to I’ given below, choose the best answer for the questions. 6 (i) – 6 (vi)

Options

- A.** Salicylic acid LA
- B.** Molten Vaseline
- C.** Formalin
- D.** Arch supports and shields
- E.** Plaster of Paris casts
- F.** Daily manipulation and taping to correct the deformity
- G.** Proper foot wear with wide toe box
- H.** Strengthening exercises
- I.** Mesh supports

Questions: From the options above choose the right management for the patients with foot problems described below:

6(i) Mr. Das has plantar warts not responding to salicylic acid

6(ii) Mrs. Helen has corn feet and does not want excision now

6(iii) 35 year old Mrs. Suma has bunions and asks for conservative management.

6(iv) 42 year old Mrs. Heera has metatarsalgia and you decide to manage her conservatively.

6(v) 57 year old Mr. Faizal has hammer toe and you decide to manage him conservatively

6(vi) 13 year old Gautam has ingrown toe nail and is mother asks for conservative management.

7. THEME – TREATMENT OF SHOCK [QUESTIONS 7(i) – 7(vi)]
(Total: 6 Marks)

From the options ‘A to J’ given below, choose the best answers for the questions 7(i) – 7(vi).

Options:

- | | |
|--------------------------------|--------------------------|
| A. Sodium nitroprusside | F. Ringer lactate |
| B. Adrenaline | G. 5% dextrose |
| C. Inj chlorpheniramine | H. Noradrenaline |
| D. Nitroglycerine | I. Dopamine |
| E. Digoxin | J. Dobutamine |

Questions: From the options above choose the right drug for the patients described below:

7(i) Drug of choice for Mr. Murali who developed respiratory distress, wheezing and urticarial rashes following a penicillin injection

7(ii) Drug of choice for 60 years old Mrs. Lalitha who suddenly developed high fever, tachycardia and blood pressure was low with systolic less than 70 mmHg. She was hospitalised for a surgery and having indwelling urinary catheter for more than a week.

7(iii) Drug of choice for 65 years old Mrs. Violet who has marked tachycardia, cool and clammy extremities, poor peripheral pulses, and BP is 90/70 mm Hg. She is brought to you with complaints of chest pain, shortness of breath, sweating, nausea and vomiting.

7(iv) Drug of choice for 25 years old Mrs. Megha who has marked tachycardia, cool and clammy extremities, poor peripheral pulses, and her BP is 90/70 mm Hg. She is brought to you with the complaints of uncontrolled bleeding following home delivery 1 hour ago.

7(v) Drug of choice for 45 years old Mr. Raj who has marked tachycardia, cool and clammy extremities, poor peripheral pulses, and BP is 80/70 mm Hg. He has been a diabetic and now has diabetic ulcer which is extending from left foot to left knee.

7(vi) Drug of choice for 20 year old Gayatri who developed hypotension and tachycardia 10 minutes after ASV(Anti Snake Venom); She was brought with a history of a poisonous snake bite and she was given snake anti venom intravenously.

8. THEME: MANAGEMENT OF VITAMIN A DEFICIENCY [QUESTIONS 8(i)-8(vi)]
(Total: 6 Marks)

From the options ‘A to I’ given below, choose the best answer for the questions 8(i) - 8(vi)

Options

- A. 200,000IU stat; repeat dose next day and after 4 weeks.
- B. 100,000IU stat; repeat dose next day and after 4 weeks.
- C. 50,000IU stat; repeat dose next day and after 4 weeks.
- D. 1000 Units every day for 14 days
- E. 1000 Units A/D for 14 days
- F. 50,000IU stat and every 6 months
- G. 100,000IU stat and every 6 months
- H. 200,000IU stat and every 6 months
- I. Not necessary

Questions: From the Options above choose the right treatment for the patients with Vitamin A deficiency described below:

8(i) Dose of vitamin A for 28 years old Mrs. Madhu who came to you with the complaint of

not being able to see properly in the night time. She is 4 months pregnant now. On examination she has early corneal xerophthalmia.

8(ii) Dose of vitamin A under CSSM for 3 months old Deena; the child does not show any evidence of vitamin A deficiency.

8(iii) Dose of vitamin A under CSSM for 14 months old Dani; the child does not show any evidence of vitamin A deficiency.

8(iv) Dose of vitamin A for Gomathi who has come to the hospital for measles vaccination; the child has Bitot's spots.

8(v) Dose of vitamin A for 16 years old Sumathy who has keratomalacia

8(vi) Dose of vitamin A for 15 days old Banu's baby; the mother did not receive any vitamin A during her pregnancy. Child is well.

9. THEME: TYPES OF JAUNDICE [QUESTIONS 9(i)-9(vi)] (Total:6 Marks)

From the options 'A to D' given below, choose the best answer for the questions 9(i) - 9(vi)

Options

- A. Haemolytic jaundice
- B. Cholestatic jaundice
- C. Hepatocellular jaundice
- D. Obstructive jaundice

Questions: From the Options above choose the right Type of Jaundice that is seen in the patients described below:

9(i) 30 years old Mrs. Valli, is on oral contraceptives for the past 2 years. She was given Amoxicillin/Clavulanate combination and steroids for external otitis by a GP. After a week she developed jaundice.

9(ii) 45 years old Mr. Natarajan has been started on anti-tubercular therapy with Rifampicin, INH, pyrazinamide and ethambutol. You are monitoring him for this jaundice.

9(iii) 60 years old Mr. Murugan is on antiepileptics after his stroke one year ago but still continues to drink. He has developed jaundice after taking tablets continuously for his osteo arthritis.

9(iv) 50 year old Mrs. Radha comes to you with the complaint of itching all over the body and jaundice. She had no abdominal pain. Her blood test results showed conjugated hyperbilirubinemia and high levels of alkaline phosphatase.

9(v) 23 year old Mrs. Belinda is 34 weeks pregnant. She comes to you with the complaint of fatigue and pruritus. She has fever, vomiting and jaundice. Her LFT shows marked elevations of ALT and AST.

9(vi) 7 year old Faizal from West Bengal has anaemia, splenomegaly and jaundice.

10. THEME – LOSS OF VISION [QUESTIONS. 10 (i) –10 (vi)] (Total: 6 Marks)

From the options ‘A to M’ given below, choose the best answer for the questions 10 (i) – 10 (vi) A single option may be used more than once.

Options

- | | |
|--------------------------------|-------------------------------------|
| A. Developmental cataract | H. Retinal detachment |
| B. Age related cataract | I. Age related macular degeneration |
| C. Presbyopia | J. Diabetic Retinopathy |
| D. Primary open angle glaucoma | K. Vitreous Haemorrhage |
| E. Corneal ulcer | L. Retinal Haemorrhage |
| F. Angle closure glaucoma | M. Retinal vascular occlusions |
| G. Lens induced myopia | |

Questions: From the Options above Choose the right diagnosis for the patients described below:

10(i) 43 year old Mr. Kesavan has complaints of difficulty in near vision, especially in dim light. He has headache every day in the evening.

10(ii) 48 year old Mrs. Rani presents with complaints of headache. There have been frequent changes in presbyopic glasses. She tells you that at times, she is not able to see a part of the visual field. Her IOP is 21 mm of Hg in right eye.

10(iii) Mr. Magesh, a farmer, presents with severe pain, diminished vision and photophobia after harvest season.

10(iv) Mr. Balan, a diabetic on irregular treatment has come with sudden onset of diminished distance vision. His random blood sugar is 567mg/dl.

10(v) 45 year old Mr. Srinivasan, a myopic, presents with complaints of sudden painless loss of vision associated with floaters and flashes of light.

10(vi) 60-year-old Mr. Kailash presents with a history of diminished vision in both eyes, right eye more than left eye.

M.MED.FAMILY MEDICINE
SECOND YEAR THEORY EXAM– AUGUST 2015
PAPER II - SURGERY AND ALLIED SCIENCES

Q.P. Code: 434012

TIME: THREE HOURS

MAXIMUM MARKS: 100

INSTRUCTIONS

- The paper will be for a total of **100 marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A& Part B**.
- **Part A** will be **descriptive typequestions** based on case scenarios (**40 marks**).
- **Part B** will have Objective type EMQs [**Extended Matching Questions**] (**60 marks**).
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. Below this, some **options** are given followed by some **questions**. The options are lettered using the English Alphabets **A, B, C, D** and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(v)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazinedeconoate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

- 3(i) What is the drug of choice for Acute Psychosis?
- 3(ii) What is the drug of choice for Bipolar illness?

PART – A
DESCRIPTIVE QUESTIONS

(ANSWER ALL QUESTIONS)

1. You are in a Primary Health Care setup where you need to look after anaesthesia and to monitor the team of health care workers who are involved in anaesthetic care.

(TOTAL: 20 MARKS)

- A. What are the basic anaesthetic equipments and supplies needed for a Family Physician's clinic if you are trained to offer small procedures? **(3 marks)**
- B. Classify the types of anaesthesia. **(4 marks)**
- C. How do you select the patient and procedure in a primary care setup? **(3 marks)**
- D. Discuss briefly about history taking and physical examination of a patient before anaesthesia **(3 marks)**
- E. What are the monitoring, recovery and discharge principles after sedation and analgesia? **(7 marks)**

2. Mrs. Shanthi has come with dry thermal injury which happened when she was trying to burn old leaves in her yard. **(TOTAL: 20 MARKS)**

- A. How do you calculate the Burn Surface Area (BSA) in a patient with burns? **(3marks)**
- B. How do you calculate the fluid for first day of burns? What will be Mrs. Shanthi's fluid requirement if her body weight is 50 kg and the BSA is 45% ? **(4 marks)**
- C. How do you classify the burn depth? What are the signs and symptoms of each degree? **(5 marks)**
- D. What are the principles of burn wound management? **(4 marks)**
- E. Indications for referral in a patient with burns. **(4 marks)**

PART – B
EXTENDED MATCHING QUESTIONS

(ANSWER ALL QUESTIONS)

- 1. THEME: MANAGEMENT OF ORTHOPEDIC CONDITIONS [QUESTIONS 1(i)-1(vi)] (TOTAL: 6 MARKS)**

From the options ‘A to F’ given below, choose the best answer for the questions 1(i) – 1(vi)

Options:

- | | |
|-----------------------------|------------------|
| A. Traction | D. Cast |
| B. Internal fixation | E. Sling |
| C. External fixation | F. Splint |

Questions

1. (i) Mr. Subhash has a contaminated grade 3 fracture of right humerus. The type of fracture management he needs is
 1. (ii) 7 year old Giri has a simple fracture of right ulna. It happened yesterday and the right forearm is badly swollen. The type of fracture management that should not be done in the primary management of his condition is
 1. (iii) 60 year old Mrs. Janet has a left acetabular fracture. The type of fracture management that can be done in the primary management for her condition is
 1. (iv) Mr. Yuvaraj had a shoulder injury 2 weeks ago. But he has come only today because the shoulder pain is still persisting. His X-ray shows a mal-aligned fractured left clavicle. The type of definitive fracture management for Mr. Yuvaraj is
 1. (v) 30 year old Mr. Kannan has had an internal fixation for his fracture humerus. The additional type of fracture management he needs is
 1. (vi) Mr. Sudan has sustained fracture of right femur in a road traffic accident. The type of fracture management that should be done in the primary management of his condition during transfer is
- 2. THEME: DIAGNOSIS OF ORTHOPEDIC CONDITIONS [QUESTIONS 2(i)-2 (vi)] (TOTAL: 6 MARKS)**

From the options ‘A to H’ given below, choose the best answer for the questions 2(i) – 2 (vi)

Options

- | | |
|--|---|
| A. Rotator cuff tear | E. Sub-acute rotator cuff tendinitis |
| B. Supraspinatus tendinitis | F. Chronic rotator cuff tendinitis |
| C. Supraspinatus tear | G. Biceps tendonitis |
| D. Acute calcific rotator cuff tendinitis | H. Rupture of biceps tendon |

Questions: What is the most probable diagnosis ?

2. (i) 30 year old Mrs. Subbulakshmi has come with complaints of recurrent episodes of shoulder pain that comes after a bout of unaccustomed activities. If examination is carried on during these episodes, you can elicit a painful arc in the shoulder movement (60-120 degrees) on abducting the arm. Pain increases and reaches a peak and eventually, returns to normal.
2. (ii) 55 year old Mr. Rangaswamy has with complaints of recurrent episodes of shoulder pain that comes after a bout of demanding activities. Pain is characteristically worse at night, and patient cannot lie on affected side. Pain and stiffness restrict daily activities.
2. (iii) 40 years old Mr. Lal has come with shoulder pain. Pain is felt along the anterior border of the acromion (that is the place he shows) especially when held in extension. There is also pain on active abduction between 60 and 120 degrees of motion.
2. (iv) 32 year old Mrs. Sudha has come with complaints of shoulder pain. Pain and tenderness are sharply localized to the bicipital groove.
2. (v) 55 year old Mr. Thilak has come with right upper arm pain. The pain started suddenly when he was trying to put a heavy box in the top shelf of the cupboard. He says that he heard something snapping in the arm. On examination, prominent swelling was noticed in the lower part of the arm. There is no evidence of bony injuries.
2. (vi) 34 year old Mr. Palani has come with complaints of inability to lift the right shoulder following an injury. On examination, there is difficulty in initiating abduction and the abducted arm suddenly drops to the side when it is lowered beyond 45 degree abduction.

3. THEME: DIAGNOSIS OF RED EYE [QUESTIONS 3(i)-3 (vi)] (TOTAL: 6 MARKS)

From the options ‘A to M’ given below, choose the best answer for the questions 3(i) – 3 (vi)

Options

- | | |
|---------------------------|-----------------------------------|
| A. Seborrhoeicblepharitis | H. Hordeolum externum |
| B. Scleritis | I. Acute bacterial conjunctivitis |
| C. Pinguecula | J. Uveitis |
| D. Viral conjunctivitis | K. Episcleritis |
| E. Ulcerative blepharitis | L. Pterygium |
| F. Keratitis | M. Vernal conjunctivitis |
| G. Endophthalmitis | |

Questions: What is the diagnosis?

3. (i) 21 year old Faizal has come with red eye. On examination, there are gelatinous thickened accumulation of tissue around limbus and presence of discrete whitish raised dots along the limbus. You identify them as Tranta’s spots.
3. (ii) 24 year old Ms. Swati has come with complaints of itching of both eyes. On examination, both the eyes are red and there is crusting in the lid margin. On removing the crusts, there is bleeding.
3. (iii) 27 year old Mrs. Geetha has come with pain eyes and photophobia for the past 2 weeks. On questioning further, you realize there is pain in the brow and continuous ocular pain

which is worse on moving the eye. There is no relief with analgesics. On examination there is a scleral nodule with bluish discolouration.

3. (iv) 33 year old Mrs. Swapna has come with complaints of itching and irritation of left eye. On examination, there is a nodule with sectoral congestion.
 3. (v) 8 year old Heera has come with complaints of itching eyes. On examination, there is bilateral redness of eye and watery discharge. There are no red flags. Preauricular lymph nodes are palpable bilaterally. There is history of family members having the similar complaints.
 3. (vi) 50 year old Mrs. Kanaka has come with sudden onset of severe photophobia, head ache, pain and diminished vision. There is ciliary congestion and pupil is constricted and irregular.

4. THEME: HEAD INJURY [QUESTIONS 4(i)-4 (vi)] (TOTAL: 6 MARKS)

From the options ‘A to I’ given below, choose the best answer for the questions 4(i) – 4 (vi)

Options

- A. Pontine injury
 - B. Traumatic optic nerve injury
 - C. Inadequate cerebral perfusion
 - D. Acute subdural hematoma
 - E. Acute extradural hematoma
 - F. Chronic subdural hematoma
 - G. Chronic extra dural hematoma
 - H. Transtentorial herniation
 - I. Horner's syndrome

Questions: What is your clinical diagnosis?

4. (i) 71 year old Mr. Krishnan had a fall in the bathroom and was unconscious for several minutes when his wife found him in the bathroom sitting dazed. The history is that he was confused for about 10 minutes and then was his normal self again. However after about 4 hours, he began to feel drowsy and confused again and began to complain of headache. When he was brought to you, his GCS is 12.
 4. (ii) Raju is a 17 year old college student who is brought to the hospital after an accident. While examining him, you found that one of his pupils does not constrict when light is directed at it but constricts when light is directed into the contralateral pupil.
 4. (iii) Mr. Mani was riding on his bike without a helmet. He was hit by a lorry and now he is causality. Examination shows unilateral dilated pupil that does not respond to either direct or consensual stimulation.
 4. (iv) Mr. Abdul was hit by a vehicle from the back when he was riding in the bike without a helmet. While examining him, you found that his both pupils are small and constricted.
 4. (v) 70 year old Radha comes to you with a one week history of acute onset of headache, confusion and some gait disturbance. She is not a known diabetic or a hypertensive. On examination she has some weakness of the right lower limb. There is no history of head injury except the fact that 3 weeks ago she had bumped her head into a wall in the darkness during a power cut.

4. (vi) The CT scan of Mrs. Tina who sustained a head injury before 6 hours shows a hypodense area which is convex toward the brain and restricted by suture lines.

5. THEME: CAUSES OF BACK ACHE [QUESTIONS 5(i)- 5 (vi)] (TOTAL: 6 MARKS)

From the options ‘A to I’ given below, choose the best answer for the questions 5(i) – 5(vi)

Options

- | | |
|------------------------|--------------------------------|
| A. Sciatica | F. Multiple Myeloma |
| B. Mechanical backache | G. Acute infective spondylitis |
| C. Lumbar spondylosis | H. Ankylosing Spondylitis |
| D. Spinal stenosis | I. Spondylolisthesis |
| E. Spinal tuberculosis | |

Questions: What is the clinical diagnosis?

5. (i) 60 year old Mrs. Leela has come with complaints of intermittent back ache which is usually precipitated by strenuous work or after a long duration of sitting in one position. The pain is usually relieved by lying down and often referred to the buttocks. On examination, lumbar movements are restricted and painful in the extremes. There are tender points over the back and the buttocks
5. (ii) 45 year old Mr.Dev has come with complaints of severe back pain which started 3 days ago while lifting a heavy weight. He says that at that time he was unable to straighten up. Along with back ache, he has developed unilateral leg pain which radiates below the knee to the foot or toes. Now low back pain is less severe than the leg pain.
5. (iii) 55 year old Mr.Gopal comes with complaints of back ache. Along with back ache, he has complaints of pain, heaviness, numbness and paraesthesia along the thighs and legs. The pain occurs only while standing or after walking 5-10 minutes. The pain is consistently relieved by sitting, squatting or leaning against a wall to flex the spine. He says that the pain is more when he climbs down the stairs than climbing up the stairs.
5. (iv) 16 year old Diana has come with complaints of back ache for the past 1 month. There is associated history of fever, loss of appetite and weight for the past 2 months. There is history of paraesthesia and muscle weakness in both the lower limbs. On examination she has flexor spasm of the right leg and there is a swelling in the right groin.
5. (v) 70 year old Mrs. Devi has come with back ache for the past 3 months. She complains of generalized weakness in addition to back ache. The back ache is constant and not relieved by rest. She looks cachexic and anemic.
5. (vi) 21 years old John has come with complaints of bilateral red eye for the past 1 week and back ache for the past one month. The back ache is in the lower lumbar region and it is more severe in the morning.

6. THEME: BACK ACHE INVESTIGATIONS [QUESTIONS 6 (i)- 6 (vi)]
(TOTAL: 6 MARKS)

From the options ‘A to H’ given below, choose the best answer for the questions 6(i) – 6(vi)

Options

- | | |
|---------------------------------|------------------------------|
| A. Spondylolisthesis | E. Multiple myeloma |
| B. Ankylosing spondylitis | F. Secondary carcinoma |
| C. Intervertebral disc prolapse | G. Tuberculosis of the spine |
| D. Osteoarthritis of the spine | H. Compression fracture |

Questions:Xray findings in patients with back ache

6. (i) 35 Year old Mr. Sathish has come with complaints of back ache for the past 3 months. His Xray spine shows narrowing of the disc space and local osteoporosis of adjacent vertebrae with wedging of vertebral body and paravertebral soft tissue shadows.
6. (ii) 54 year old Mr. Hiralal has come with urinary symptoms and back ache. His Xray spine shows preserved disc spaces but there are osteosclerotic changes in the vertebral bodies.
6. (iii) 50 year old Mrs. Janaki has come with backache for 5 months. She looks very pale; blood pressure is normal. Her Xray spine shows multiple punched-out osteolytic lesions.
6. (iv) 66 year old Mrs. Lakshmi has come with severe back ache. Her Xray spine shows wedging of the vertebral body with preservation of the disc space.
6. (v) 25 year old Mr. Giri has come with complaints of back ache. His Xray spine shows fusion of vertebral bodies with fusion of facet joints and sacro-iliac joints. There is also ossification of interspinous ligaments.
6. (vi) 55 year old Mrs. Fiona has come with complaints of back ache. Her Xray spine shows anterior and posterior lipping of the vertebral bodies with narrowing and lipping of the facet joints.

7. THEME: GROIN SWELLINGS [QUESTIONS 7 (i)- 7 (vi)] (TOTAL: 6 MARKS)

From the options ‘A to I’ given below, choose the best answer for the questions 7(i) – 7(vi)

Options

- | | |
|------------------------|-----------------------------|
| A. Infantile hydrocele | F. Acute epididymo orchitis |
| B. Chronic Haematocele | G. Tuberculous epididymis |
| C. Torsion of testis | H. Testicular tumor |
| D. Hydrocele | I. Inguinal hernia |
| E. Cyst of epididymis | |

Questions: What is the clinical diagnosis?

7. (i) 32 year old Mr. Shankar has come with complaints of right inguino scrotal swelling .On examination, the swelling is reducible, cough impulse is positive and transillumination is negative. The testis is palpable separately and it is not tender.
7. (ii) 4 year old Monish is brought by his parents with complaints of aninguino scrotal swelling noticed before 3 months. On examination, the swelling is not reducible, cough impulse is negative and transillumination is positive. The testis is not palpable separately and it is not tender.
7. (iii) 28 year old Mr. Krishnan has come with complaints of right scrotal swelling. On examination, the swelling is not reducible, cough impulse is negative and transillumination is positive. The swelling is not tender .Testis and epididymis are not definable
7. (iv) 24 year old Mr. Sudhakar, a sportsman has come with complaints of right scrotal swelling for the past 4 weeks.On examination, the swelling is not reducible, cough impulse is negative and transillumination is negative. The swelling is not tender.Testis and epididymis not definable.
7. (v) 12 year old Anish has come with complaints of right scrotal swelling .On examination, the swelling is not reducible, cough impulse is negative and there is brilliant transillumination. The swelling is not tender.Testis and epididymis defined separately.
7. (vi) 22 year old Raju has come with complaints of scrotal pain and swelling. There is history of high risk behaviour. On examination, the swelling is not reducible, cough impulse is negative and there is no transillumination. The swelling is warm and tender.Testis and epididymis defined separately.

8. THEME: GROIN SWELLINGS [QUESTIONS 8 (i)- 8 (vi)] (TOTAL: 6 MARKS)

From the options ‘A to N’ given below, choose the best answer for the questions 8(i) – 8(vi)

Options

- A. 6’O clock and 12 ’O clock position
- B. 1’O clock and 11 ’O clock position
- C. Between the medial malleolus and the calcaneum just behind the posterior tibial artery
- D. Between the medial malleolus and calcaneum, 2 cm lateral to the posterior tibial artery
- E. Between the lateral malleolus and calcaneum, 2 cm medial to the posterior tibial artery
- F. Web space at the base of the finger, just distal to the MCP
- G. At the junction of proximal and middle phalanx, in the lateral aspect
- H. At the junction of proximal and middle phalanx, in the dorsal crease
- I. Lateral to the Palmaris tendon, in proximal wrist crease.
- J. Medial to the Palmaris tendon, in distal wrist crease.
- K. Medial to the Palmaris tendon, in proximal wrist crease.
- L. Intervertebral space between L 4- L 5
- M. Intervertebral space between L 2 – L3
- N. Intervertebral space between L1- L2

Questions – Pick the sites for anesthesia:

8. (i) Mr. Viswanathan has come with a paraphimosis and you need to reduce it. The sites for block are
8. (ii) You want to give a wrist block for a procedure. The site is
8. (iii) Mrs. Savithri needs an amputation of right big toe and the second toe. The sites for block are
8. (iv) Mrs. Deepa has come with a felon in the right index finger. The site for block is
8. (v) The site for anaesthesia for Mrs. Devi who is posted for emergency LSCS
8. (vi) Mr. Wilson has come with a laceration in the proximal phalanx of the right second finger. You need to do suturing.

9. THEME: LOSS OF VISION [QUESTIONS 9 (i)- 9(vi)] (TOTAL: 6 MARKS)

From the options ‘A to L’ given below, choose the best answer for the questions 9(i) – 9(vi)

Options

- | | |
|------------------------------------|------------------------------------|
| A. Central retinal vein thrombosis | G. Retinitis pigmentosa |
| B. Nuclear sclerosis of lens | H. Central retinal vein thrombosis |
| C. Retinal detachment | I. Posterior sub capsular cataract |
| D. Primary open angle glaucoma | J. Acute angle closure glaucoma |
| E. Macular degeneration | K. Maculopathy |
| F. Migraine | L. Non infective uveitis |

Questions: What is the possible diagnosis?

9. (i) Mr. Rajendran, a 40 yearold teacher has come with complaints of sudden painless loss of vision in his right eye. Before loss of vision, he says that he had symptoms of flashes of light and dark patches before his eyes. When you ask about the thick glasses he is wearing, he tells you that he has been wearing glasses since he is ten years old.
9. (ii) Mrs. Louisa has been having complaints of gradual loss of vision. But the vision is little better in the night time.
9. (iii) Mr. Raju has come with sudden onset of severe pain left eye. There is also loss of vision in the left eye from the time of onset of pain.
9. (iv) Mrs. Nancy is 45 years old. She has been using reading glasses from the age of 40. now, she finds that she is able to read without glasses.
9. (v) Mr. Thomas is 50 years old. He has frequent episodes of nonspecific headache and needs frequent change in his presbyopic glasses. Occasionally, he feels that he is not able to see a part of an object he is looking at.
9. (vi) Dr. Kesavan is a 32 year old doctor working in Orissa for the past 9 months. He is on weekly prophylaxis for malaria with chloroquine from the time he started working in Orissa. He finds that his acuity of vision has come down for the past 5-6 months.

10. THEME: TREATMENT FOR RED EYE [QUESTIONS 10 (i)- 10(vi)]

(TOTAL: 6 MARKS)

From the options ‘A to I’ given below, choose the best answer for the questions 10 (i) – 10 (vi)

Options

- A.** Tarsal injection of gentamicin OD for a week
- B.** Ketorolac 0.5%, drops
- C.** Excision
- D.** Tab. Ciprofloxacin 500 mg OD for six weeks
- E.** Tab. Doxycycline 100 mg od for 6 weeks
- F.** Ciprofloxacin ointment bd for 6 weeks
- G.** Taping the lateral canthal skin supero-temporally with adhesive plaster
- H.** Tape the lid to the skin of the cheek with adhesive plaster
- I.** Topical steroids

Questions – What is the management?

10. (i)Mrs. Geetha, a 70 year old retired clerk has entropion in both the eyes. She is not willing for surgery. The temporary method of treating her condition is

10. (ii)26 year old Mr.Bhasker has chronic internalhordeolum.The definite treatment for his condition is

10. (iii)Treatment for 34 year old Mr. Abhijit who has persistent posterior blepharitis

10. (iv)Mrs. Devi has ectropionin both eyes due to post burn facial scarring. She is not willing for surgery. The temporary method of treating her condition is

10. (v)8 year old Asha has chronic dacryocystitis. The definitive treatment for her will be

10. (vi)13 year old Karthik has simple allergic conjunctivitis of moderate severity. The treatment of choice for him will be

(LI 0216)

M.MED.FAMILY MEDICINE

(Sub Code: 4012)

SECOND YEAR THEORY EXAM– FEBRUARY 2016

PAPER II - SURGERY AND ALLIED SCIENCES

QP .CODE: 434012

Time: Three hours

Maximum Marks: 100

INSTRUCTIONS

- The paper will be for a total of **100 marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios. **(40 marks)**
- **Part B** will have Objective type EMQs [Extended Matching Questions]. **(60 marks)**
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. Below this, some **options** are given followed by some **questions**. The options are lettered using the English Alphabets **A, B, C, D** and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(v)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazine deconoate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

- 3(i) What is the drug of choice for Acute Psychosis?
- 3(ii) What is the drug of choice for Bipolar illness?

- ✓ Match each question to a **single best option** and write it in your paper in the column provided like this:

3(i)	A
3(ii)	F
3(iii)	
3(iv)	
3(v)	
3(vi)	

- ✓ Each option may be used more than once. Some options may not be used at all.

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

1. 35 years old Mr. Wilson comes to you with the complaint of ulcer in the mouth for the past 3 days. On taking complete history and doing physical examination on him, you find that he is a smoker, consumes alcohol and has poor oral hygiene. **(Total = 20 marks)**
- A. What are the common causes of mouth ulcers? How will you treat them?
B. What are the agents that can cause oral cancer? What are the symptoms and signs of oral cancer?
C. What advise will you give to (i) Mr. Wilson (ii) a patient coming to you with oral cancer?
D. What are the causes of halitosis and what advice will you give to a patient coming to you with halitosis?
2. 40 years old Mrs. Nalini has come to you with the complaint of redness of the right eye for the past 2 days. There is no history of trauma. There is irritation and watering of the eye and stickiness of the eye when she wakes up in the morning. On examination, the whole of the right eye is red including the eyelids. There is no photophobia. **(Total = 20 marks)**
- A. What is global red eye? Mention some common causes of global red eye.
B. What are the causes of sectoral red eye?
C. What type of congestion does Mrs. Nalini have and why? How will you differentiate between conjunctival and ciliary congestion?
D. What are the red flags that you would look for when you take history from and examine a patient with red eye?

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

1. **THEME: GROIN SWELLINGS [QUESTIONS 1 (i)- 1 (vi)]** **(Total: 6 Marks)**
From the options ‘A to I’ given below, choose the best answer for the questions 1(i) – 1(vi)

Options

- | | |
|------------------------|-----------------------------|
| A. Infantile hydrocele | F. Acute epididymo orchitis |
| B. Chronic Haematocele | G. Tuberculous epididymis |
| C. Torsion of testis | H. Testicular tumor |
| D. Hydrocele | I. Inguinal hernia |
| E. Cyst of epididymis | |

Questions: What is the clinical diagnosis?

1. (i) 32 year old Mr. Shankar has come with complaints of right inguino scrotal swelling .On examination, the swelling is reducible, cough impulse is positive and transillumination is negative. The testis is palpable separately and it is not tender.

1. (ii) 4 year old Monish is brought by his parents with complaints of an inguino scrotal swelling noticed before 3 months. On examination, the swelling is not reducible, cough impulse is negative and transillumination is positive. The testis is not palpable separately and it is not tender.
1. (iii) 28 year old Mr. Krishnan has come with complaints of right scrotal swelling. On examination, the swelling is not reducible, cough impulse is negative and transillumination is positive. The swelling is not tender .Testis and epididymis are not definable.
1. (iv) 24 year old Mr. Sudhakar, a sportsman has come with complaints of right scrotal swelling for the past 4 weeks. On examination, the swelling is not reducible, cough impulse is negative and transillumination is negative. The swelling is not tender. Testis and epididymis not definable.
1. (v) 12 year old Anish has come with complaints of right scrotal swelling .On examination, the swelling is not reducible, cough impulse is negative and there is brilliant transillumination. The swelling is not tender. Testis and epididymis defined separately.
1. (vi) 22 year old Raju has come with complaints of scrotal pain and swelling. There is history of high risk behaviour. On examination, the swelling is not reducible, cough impulse is negative and there is no transillumination. The swelling is warm and tender. Testis and epididymis defined separately.

2. THEME: HEAD INJURY [QUESTIONS 2(i) - 2(vi)] **(Total: 6 Marks)**
From the options 'A to I' given below, choose the best answer for the questions 2(i) – 2(vi)

Options

- | | |
|----------------------------------|---------------------------------|
| A. Pontine injury | F. Chronic subdural hematoma |
| B. Traumatic optic nerve injury | G. Chronic extra dural hematoma |
| C. Inadequate cerebral perfusion | H. Transtentorial herniation |
| D. Acute subdural hematoma | I. Horner's syndrome |
| E. Acute extradural hematoma | |

Questions: What is your clinical diagnosis for the following patients?

2. (i) 71 year old Mr. Krishnan had a fall in the bathroom and was unconscious for several minutes when his wife found him in the bathroom sitting dazed. The history is that he was confused for about 10 minutes and then was his normal self again. However after about 4 hours, he began to feel drowsy and confused again and began to complain of headache. When he was brought to you, his GCS is 12.
2. (ii) Raju is a 17 year old college student who is brought to the hospital after an accident. While examining him, you found that one of his pupils does not constrict when light is directed at it but constricts when light is directed into the contralateral pupil.
2. (iii) Mr. Mani was riding on his bike without a helmet. He was hit by a lorry and now he is in casualty. Examination shows unilateral dilated pupil that does not respond to either direct or consensual stimulation.

2. (iv) Mr. Abdul was hit by a vehicle from the back when he was riding in the bike without a helmet. While examining him, you found that his both pupils are small and constricted.
2. (v) 70 year old Radha comes to you with a one week history of acute onset of headache, confusion and some gait disturbance. She is not a known diabetic or a hypertensive. On examination she has some weakness of the right lower limb. There is no history of head injury except the fact that 3 weeks ago she had bumped her head into a wall in the darkness during a power cut.
2. (vi) The CT scan of Mrs. Tina who sustained a head injury before 6 hours shows a hypodense area which is convex toward the brain and restricted by suture lines.

3. THEME: DIAGNOSIS OF RED EYE [QUESTIONS 3(i)-3 (vi)] (Total: 6 Marks)
From the options 'A to M' given below, choose the best answer for the questions 3(i) – 3 (vi)

Options

- | | |
|----------------------------|-----------------------------------|
| A. Seborrhoeic blepharitis | H. Hordeolum externum |
| B. Scleritis | I. Acute bacterial conjunctivitis |
| C. Pinguecula | J. Uveitis |
| D. Viral conjunctivitis | K. Episcleritis |
| E. Ulcerative blepharitis | L. Pterygium |
| F. Keratitis | M. Vernal conjunctivitis |
| G. Endophthalmitis | |

Questions: What is the clinical diagnosis for the following patients?

3. (i) 21 year old Faizal has come with red eye. On examination, there are gelatinous thickened accumulation of tissue around limbus and presence of discrete whitish raised dots along the limbus. You identify them as Tranta's spots.
3. (ii) 24 year old Ms. Swati has come with complaints of itching of both eyes. On examination, both the eyes are red and there is crusting in the lid margin. On removing the crusts, there is bleeding.
3. (iii) 27 year old Mrs. Geetha has come with pain eyes and photophobia for the past 2 weeks. On questioning further, you realize there is pain in the brow and continuous ocular pain which is worse on moving the eye. There is no relief with analgesics. On examination there is a scleral nodule with bluish discoloration.
3. (iv) 33 year old Mrs. Swapna has come with complaints of itching and irritation of left eye. On examination, there is a nodule with sectoral congestion.
3. (v) 8 year old Heera has come with complaints of itching eyes. On examination, there is bilateral redness of eye and watery discharge. There are no red flags. Preauricular lymph nodes are palpable bilaterally. There is history of family members having the similar complaints.
3. (vi) 50 year old Mrs. Kanaka has come with sudden onset of severe photophobia, head ache, pain and diminished vision. There is ciliary congestion and pupil is constricted and irregular.

4. THEME: TREATMENT OF RED EYE [QUESTIONS 4(i)- 4(vi)] (Total: 6 Marks)
From the options ‘A to I’ given below, choose the best answer for the questions 4(i) – 4(vi)

Options

- A. Tarsal injection of gentamicin OD for a week
- B. Ketorolac 0.5%, drops
- C. Excision
- D. Tab. Ciprofloxacin 500 mg OD for 6 weeks
- E. Tab. Doxycycline 100 mg od for 6 weeks
- F. Ciprofloxacin eye ointment bd for 6 weeks
- G. Taping the lateral canthal skin supero-temporally with adhesive plaster
- H. Tape the lid to the skin of the cheek with adhesive plaster
- I. Topical steroids

Questions – What is the management?

- 4. (i) Mrs. Geetha, a 70 year old retired clerk has entropion in both the eyes. She is not willing for surgery. The temporary method of treating her condition is
- 4. (ii) 26 year old Mr. Bhasker has chronic internal hordeolum. The definite treatment for his condition is
- 4. (iii) Treatment for 34 year old Mr. Abhijit who has persistent posterior blepharitis is
- 4. (iv) Mrs. Devi has ectropion in both eyes due to post burn facial scarring. She is not willing for surgery. The temporary method of treating her condition is
- 4. (v) 8 year old Asha has chronic dacryocystitis. The definitive treatment for her will be
- 4. (vi) 13 year old Karthik has simple allergic conjunctivitis of moderate severity. The treatment of choice for him will be

5. THEME: DIAGNOSIS OF DIMINISHED VISION [QUESTIONS 5(i) - 5(vi)] (Total: 6 Marks)

From the options ‘A to K’ given below, choose the best answer for the questions 5(i) - 5(vi)

Options

- A. Morgagnian cataract
- B. Phacolytic glaucoma
- C. Posterior Subcapsular cataract
- D. Nuclear sclerosis
- E. Primary angle closure glaucoma
- F. 21 mmHg
- G. Primary open angle glaucoma
- H. 31 mmHg
- I. Optic atrophy
- J. Hypermature cataract
- K. 11 mmHg

Questions

50 years old Mr. Kandasamy comes to you with the complaint of gradual painless, reduced vision and he was frequently changing his glasses to correct the vision. He has intolerance of bright light and he experiences blinding by headlights of oncoming vehicles while driving at night. On ophthalmic evaluation, visual acuity is 6/9. Distant direct ophthalmoscopy showed central dark shadow against red glow.

- 5. (i)** What is the possible diagnosis?
5. (ii) You are advising Mr. Kandasamy to go for surgery. But he is not willing. What could be the possible complication he might develop, if he is not operated?

Mr. Sadagopan was earlier presbyopic, using glasses for reading and near vision. Suddenly he got 'Second sight' and able to read without glasses.

- 5. (iii)** This symptom is seen in patients with

60 years old Mrs. Leela comes to you for receiving her monthly medicines for diabetes and hypertension. She also gives you the complaint of not able to see the part of a face or a page.

- 5. (iv)** What is the possible diagnosis?

Mrs. Shalini, a 47 year old housewife came to your clinic with painful diminution of vision. She has headache and nausea, vomiting. On examination, there was ciliary congestion, vertically oval, mid dilated pupil. Intraocular pressure was found to be high. Presence of optic nerve head changes were seen with visual field abnormalities.

- 5. (v)** What is the most likely diagnosis for Mrs. Shalini?
5. (vi) What is the upper limit of normal intraocular pressure?

6. THEME: MANAGEMENT OF ORTHOPEDIC CONDITIONS [QUESTIONS 6(i)-6(vi)]
(Total: 6 Marks)

From the options 'A to F' given below, choose the best answer for the questions 6(i) – 6(vi)

Options:

- | | |
|----------------------|-----------|
| A. Traction | D. Cast |
| B. Internal fixation | E. Sling |
| C. External fixation | F. Splint |

Questions

- 6. (i)** Mr. Subhash has a contaminated grade 3 fracture of right humerus. The type of fracture management he needs is
- 6. (ii)** 7 year old Giri has a simple fracture of right ulna. It happened yesterday and the right forearm is badly swollen. The type of fracture management that should not be done in the primary management of his condition is
- 6. (iii)** 60 year old Mrs. Janet has a left acetabular fracture. The type of fracture management that can be done in the primary management for her condition is
- 6. (iv)** Mr. Yuvaraj had a shoulder injury 2 weeks ago. But he has come only today because the shoulder pain is still persisting. His X-ray shows a mal-aligned fractured left clavicle. The type of definitive fracture management for Mr. Yuvaraj is
- 6. (v)** 30 year old Mr. Kannan has had an internal fixation for his fracture humerus. The additional type of fracture management he needs is

6. (vi) Mr. Sudan has sustained fracture of right femur in a road traffic accident. The type of fracture management that should be done in the primary management of his condition during transfer is

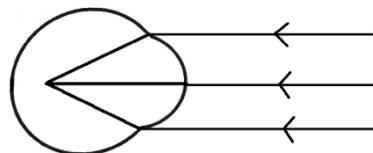
7. THEME – REFRACTIVE ERRORS [QUESTIONS 7(i) - 7(vi)] (Total: 6 Marks)
From the options ‘A to I’ given below, choose the best answer for the questions 7(i) – 7(vi)

Options:

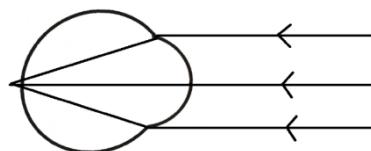
- A. Myopia
- B. Hypermetropia
- C. Astigmatism
- D. Emmetropia
- E. Cycloplegic retinoscopy
- F. Pin hole testing
- G. Vitamin supplements
- H. Strabismus
- I. Retinal detachment

Questions:

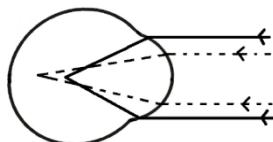
7. (i) In this condition, parallel rays of light are focused in front of the retina when accommodation is at rest.



7. (ii) In this condition, parallel rays of light are focused behind the retina when accommodation is at rest.



7. (iii) In this condition, there are unequal refractive powers in different meridians therefore, the rays of light entering the eye cannot converge to a point.



5 year old Nisha is brought to you with symptoms of headache, burning of eyes and tired eyes at the end of the day. Her parents say that she has recently started school and also watches a lot of television.

7. (iv) What examination would you like to perform for Nisha?

7. (v) Her vision is normal, you still want to rule out ocular causes of her problems. What you will advise?

7. (vi) Wshabnam, an 18 year old girl, comes to you with a history of painless diminished vision for distance for the past 10 years. She has been using glasses irregularly for her problem. What would be her future complication?

8. THEME: ANESTHESIA [QUESTIONS 8 (i)- 8 (vi)] (Total: 6 Marks)
From the options ‘A to O’ given below, choose the best answer for the questions 8(i) – 8(vi)

Options:

- A. 6’O clock and 12 ’O clock position
- B. 1’O clock and 11 ’O clock position
- C. Between the medial malleolus and the calcaneum just behind the posterior tibial artery

- D. Between the medial malleolus and calcaneum, 2 cm lateral to the posterior tibial artery
- E. Between the lateral malleolus and calcaneum, 2 cm medial to the posterior tibial artery
- F. Web space at the base of the finger, just distal to the MCP
- G. At the junction of proximal and middle phalanx, in the lateral aspect
- H. At the junction of proximal and middle phalanx, in the dorsal crease
- I. Lateral to the Palmaris tendon, in proximal wrist crease.
- J. Medial to the Palmaris tendon, in distal wrist crease.
- K. Medial to the Palmaris tendon, in proximal wrist crease.
- L. Intervertebral space between L 4- L 5
- M. Intervertebral space between L 2 – L3
- N. Intervertebral space between L1- L2
- O. 3’O clock and 9 ’O clock position

Questions – Pick the sites for anesthesia:

8. (i) Mr. Viswanathan has come with a paraphimosis and you need to reduce it. The sites for giving a regional block are
8. (ii) You want to give a wrist block for a procedure. The site of injection of the anesthetic agent is
8. (iii) Mrs. Savithri needs an amputation of right big toe and the second toe. The sites for block are
8. (iv) Mrs. Deepa has come with a felon in the right index finger which needs surgical drainage. The site for giving a regional block is
8. (v) The site for anaesthesia for Mrs. Devi who is posted for emergency LSCS is
8. (vi) Mr. Wilson has come with a laceration in the proximal phalanx of the right second finger. You need to do suturing. The site of injection of the anesthetic agent is

9. THEME: LOSS OF VISION [QUESTIONS 9 (i)- 9(vi)] **(Total: 6 Marks)**
From the options ‘A to L’ given below, choose the best answer for the questions 9(i) – 9(vi)

Options

- | | |
|------------------------------------|------------------------------------|
| A. Central retinal vein thrombosis | H. Central retinal vein thrombosis |
| B. Nuclear sclerosis of lens | I. Posterior sub capsular cataract |
| C. Retinal detachment | J. Acute angle closure glaucoma |
| D. Primary open angle glaucoma | K. Maculopathy |
| E. Macular degeneration | L. Non infective uveitis |
| F. Migraine | |
| G. Retinitis pigmentosa | |

Questions: What is the possible diagnosis?

9. (i) Mr. Rajendran, a 40 year old teacher has come with complaints of sudden painless loss of vision in his right eye. Before loss of vision, he says that he had symptoms of flashes of light and dark patches before his eyes. When you ask about the thick glasses he is wearing, he tells you that he has been wearing glasses since he is ten years old.

9. (ii) Mrs. Louisa has been having complaints of gradual loss of vision. But the vision is little better in the night time.
9. (iii) Mr. Raju has come with sudden onset of severe pain left eye. There is also loss of vision in the left eye from the time of onset of pain.
9. (iv) Mrs. Nancy is 45 years old. She has been using reading glasses from the age of 40. Now, she finds that she is able to read without glasses.
9. (v) Mr. Thomas is 50 years old. He has frequent episodes of nonspecific headache and needs frequent change in his presbyopic glasses. Occasionally, he feels that he is not able to see a part of an object he is looking at.
9. (vi) Dr. Kesavan is a 32 year old doctor working in Orissa for the past 9 months. He is on weekly prophylaxis for malaria with chloroquine from the time he started working in Orissa. He finds that his acuity of vision has come down for the past 5-6 months.

10. THEME – HEAD INJURY [QUESTIONS 10(i) - 10(vi)] (Total: 6 Marks)
From the options ‘A to L’ given below, choose the best answer for questions 10(i) – 10(vi)

Options

- | | |
|--|----------------------------------|
| A. Immediate referral | G. GCS=13 |
| B. Admission and observation in a secondary level hospital | H. GCS = 11 |
| C. Treatment as an outpatient | I. Severe |
| D. Discharge at request | J. Mild |
| E. GCS=15 | K. Moderate |
| F. GCS=10 | L. Referral to a tertiary centre |

Questions:

10. (i) Malini who recovered from her loss of consciousness 5 minutes after a head injury needs
 10. (ii) Murugan who had no neurological deficits after head injury needs
 10. (iii) Sam who recovered from retrograde amnesia after 15 minutes of head injury needs
 10. (iv) Sadiq with a head injury with a GCS of 8 needs

Mahesh is a 20 year old College student who was riding his motor cycle and hit a car on the side. He is brought to you by an auto-rickshaw driver. He smells of alcohol. His ABC seems fine. You then do his Glasgow Coma Scale and the results are as follows:

- *When you talk to him pointedly, he seems to open his eyes.*
 - *He does respond to questions but seems slightly confused.*
 - *When you ask him to raise his arm, he does so.*
 -
10. (v) What is his GCS score?
 10. (vi) What is the intensity of this head injury?

(LJ 0816)

M.MED. FAMILY MEDICINE

(Sub Code: 4012)

**SECOND YEAR THEORY EXAM – AUGUST 2016
PAPER II–SURGERY AND ALLIED SCIENCES**

QP .CODE: 434012

Time: Three Hours

Maximum Marks: 100

INSTRUCTIONS

- The paper will be for a total of **100 Marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios **(40 Marks)**.
- **Part B** will have Objective type EMQs **Extended Matching Questions (60 Marks)**.
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. In each set there are **some options** given on the top followed by some **questions**. The options are lettered using the English Alphabets A, B, C, D and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazinedeconate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

3(i) What is the drug of choice for Acute Psychosis?

3(ii) What is the drug of choice for Bipolar illness?

- ❖ Match each question to a **single best option** and write it in your paper in the column provided like this:

3(i)	
3(ii)	
3(iii)	
3(iv)	
3(v)	
3(vi)	

- ❖ Each option may be used more than once. Some options may not be used at all.

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

1. 52 years old Mr. Sathish has come to you with the complaint of sudden, diminution of vision and severe pain on the right eye. There is no history of any trauma. **(Total 20 Marks)**

- A. List any four preventable causes of blindness **(2 Marks)**
B. How will you classify Glaucoma? **(4 Marks)**
C. What are the symptoms and signs of angle closure Glaucoma? **(6 Marks)**
D. How will you manage angle closure Glaucoma? **(4 Marks)**
E. When and to whom will you do screening for Glaucoma? **(4 Marks)**

2. 68 year old Mr. Hariharan had a fall in the bathroom due to slip and was unconscious for several minutes. His wife pushed open the bathroom door and found him sitting dazed. He was confused for about 10 minutes and then was his normal self again. However after about 4 hours, he began to feel drowsy and confused again.

He was brought to you and has the following results of the Best of Eye/Motor/Verbal response

- Eye opening to pain
 - Incoherent words
 - Localizes pain
- (Total 20 Marks)**

- A. What is his GCS score and how will you express it? **(2 Marks)**
B. Is this mild/moderate or serious Head injury? **(2 Marks)**
C. What is the phenomenon called where Mr. Hariharan was “normal” between two events of confusion? **(2 Marks)**
D. Will you order a CT scan? Why? **(2 Marks)**
E. What are the appearances of various findings you will see in a CT scan picture? **(4 Marks)**
F. What is your line of management for Mr. Hariharan? **(4 Marks)**
G. What are the red flags for referral in a case of head injury? **(4 Marks)**

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

1. **THEME: ORAL HEALTH [QUESTIONS 1(i) TO 1(vi)]** **(Total: 6 Marks)**
From the options ‘A to N’ given below, choose the best answers for the questions 1(i)to1(vi)

Options:

- A. Malignant ulcer
B. Aphthous ulcer
C. Herpetic ulcer
D. Steroid lozenges
E. Excision & biopsy
F. Oral antibiotics

- | | |
|---------------------|---------------------|
| G. Phenytoin | K. < 4 hours |
| H. Sodium valproate | L. Chewing habits |
| I. < 6 hours | M. < 8 hours |
| J. Smoking | N. Alcohol drinking |

Questions:

30 year old Mr. Muthu was playing Khabadi game with his friends in the morning. During a hit, his tooth came out and the friends wanted to rush to the hospital, but Muthu told we can finish the game and go to the doctor in the evening.

1(i).What is the ideal time to replace the lost tooth?

25 year old Mrs. Sundari, known epileptic comes to you with the complaint of having problem in the gums. On examination you see hypertrophy of the gums and the teeth are normal.

1(ii).What could be the reason for her problem?

18 year old girl Ms. Dorothy comes to you with the complaint of painful ulcers on the inside of the cheeks and lips. She gets these ulcers recently for the past 3 months, comes and goes on and off. She is worried about her oral ulcers. On examination, you see the ulcer is white or yellow with the area around it bright red and margins are regular. No regional lymphadenopathy.

1(iii) What is your possible diagnosis?

1(iv) How will you manage her?

45 years old Mr. Balu comes to you with the cancer of the angle of the mouth.

1(v) What could be the most common cause for this?

50 years old Mrs. Ramani comes to you with the complaint of growth over the gingivobuccal sulcus and mandibular alveolus.

1(vi) What could be the most common cause for this?

2. THEME: DIAGNOSIS OF RED EYE [QUESTIONS 2(i) TO 2(vi)] (Total: 6 Marks)

From the options 'A to L' given below, choose the best answers for the questions 2(i) to 2(vi)

Options

- | | |
|-------------------------------|-----------------------------|
| A. Allergic conjunctivitis | G. Viral conjunctivitis |
| B. Seborrhoeic conjunctivitis | H. Fungal keratitis |
| C. Anterior blepharitis | I. Acute blennorrhoea |
| D. Posterior blepharitis | J. Episcleritis |
| E. Hordeolum externum | K. Scleritis |
| F. Hordeolum internum | L. Bacterial conjunctivitis |

Questions: What is the most likely diagnosis?

- 2 (i) 32 year old Mrs. Komala comes with frequent episodes of redness and watering of eye. On everting the eye, you find papillae. She does not wear glasses or contact lenses.
- 2 (ii) 8 year old Mani has come with flaky lesions in the bilateral lid margins and mild redness of the eyes. She also has dandruff.
- 2 (iii) 17 year old Vijaya has come with gritty sensation, redness of the eye and watery discharge

from both the eyes. On examination there is conjunctival congestion in both the eyes, the discharge is watery. Preauricular lymph nodes are palpable bilaterally

2 (iv) Mr. Raju has come with mild redness of eye. On examination you see the pouting openings of meibomian glands with occasional tooth paste like discharge from the openings.

2 (v) Mrs. Banu has come with a swelling of lid of 2 days duration. The lesion is very painful and you can see the pus pointing at the base of an eye lash.

2 (vi) 18 year old Malan has come with a painless swelling of in the lateral end of upper eyelid which is very slowly growing over the past 2 months. There is no symptom other than mild heaviness of lids and congestion of the eye. On examination, the swelling is 1x1 cm, painless, felt under the skin.

3. THEME: TREATMENT OF EYE CONDITIONS [QUESTIONS 3(i) to 3(vi)]

(Total: 6 Marks)

From the options ‘A to J’ given below, choose the best answers for the questions 3 (i) to 3 (vi)

Options

- | | |
|--|-----------------------------------|
| A. Systemic antibiotics, topical antibiotics and urgent referral | F. Systemic & topical antibiotics |
| B. Epilation and antibiotic ointment | G. Artificial tears |
| C. Observation | H. Eye closure and tapping |
| D. Lid hygiene | I. Cromol 4% drops |
| E. Surgical excision | J. Antifungal drops |

Questions :What is the treatment?

3 (i) Mr. Jeevan, 42 year old farmer has come with a fleshy triangular growth in the sclera of right eye towards cornea. Cornel margins are free. There are no other symptoms.

3 (ii) 2 days old Juniata’s baby is brought with purulent discharge of both the eyes on the second day of life. The discharge is thick and purulent; there is chemosis and lid edema.

3 (iii) Mr. Kailash is diagnosed with Seborrhoeic blepharitis.

3 (iv) Treatment for Mrs. Malini who is diagnosed with hordeolum externum.

3 (v) Treatment for Mrs. Suraksha who is diagnosed with posterior blepharitis.

3 (vi) Treatment for Mr. Madhu who is diagnosed with hordeolum internum.

4. THEME –DENTAL PROBLEMS & MANAGEMENT [QUESTIONS. 4(i) – 4(vi)]

(Total: 6 Marks)

From the options ‘A to T’ given below, choose the best answers for the questions 4 (i) – 4(vi)

Options :

- | | |
|------------------------|---------------------|
| A. Dental Caries | G. Oral cancer |
| B. Dental abscess | H. Oral candidiasis |
| C. Loose tooth | I. Fracture maxilla |
| D. Broken tooth | J. Gingivitis |
| E. Dead tooth | K. Pyorrhea |
| F. Aphthous Oral Ulcer | |

- L. Amoxycillin+Metronidazole+paracetamol
- M. Metronidazole+paracetamol
- N. Paracetamol only
- O. Remove the tooth
- P. Put the tooth back into the socket and refer
- Q. Steroid lozenges
- R. Candid mouth paint
- S. Send for biopsy
- T. Chlorhexidine mouth wash

Questions:

You are on an aeroplane and a 3 year old is crying incessantly with toothache. On examination, his first right lower premolar has a cavity and the gum around it looks swollen and red.

- 4. (i) What is the diagnosis?
- 4. (ii) How will you treat the child?

A school boy is brought to you from a football match with profuse bleeding from the mouth after he fell on his face trying to save the ball. On examination, you find that there is bleeding from his upper right central and lateral incisors. Also you notice that the lateral incisor, which is his primary tooth, has completely come off from the gum and is dangling in a small sliver of gum tissue.

- 4. (iii) What is the diagnosis?
- 4. (iv) How will you manage the patient?

55 year old Mrs. Mala comes to you complaining of a sore in the mouth. She shows you an ulcer in her mouth which has been troubling her for some time. She has used betel nut and paan for the last 30 years. She is also a diabetic. She uses dentures. On examination, you see an ulcer in the right buccal mucosa, 1 cm in diameter, with a whitish base. It cannot be rubbed off and does not bleed when rubbed.

- 4. (v) What could be the diagnosis?
- 4. (vi) How will you manage her?

5. THEME: ANAESTHESIA FOR A FAMILY PHYSICIAN [QUESTIONS 5 (i) TO 5 (vi)]
(Total: 6 Marks)

From the options ‘A to P’ given below, choose the best answers for the questions 5 (i) to 5 (vi)

Options

- | | |
|-------------------------|-------------------------------|
| A. Midazolam | I. Lignocaine with adrenaline |
| B. Hypotension | J. 1% Lignocaine |
| C. Nausea, vomiting | K. 2 hours |
| D. 0.5% Lignocaine | L. 10-15 minutes |
| E. 5% Bupivacaine heavy | M. 30 minutes |
| F. Pentazocine | N. 1 hour |
| G. Promethazine | O. Atropine |
| H. Diazepam | P. Ephedrine |

Questions:

You are planning to do a postpartum tubectomy for Mrs. Parvathy.

- 5 (i) Which drug will you prefer to use for pain relief?

- 5 (ii)** What will be the most common side effect?
5 (iii) To prevent that side effect which drug will you add?

Mr. Sankar comes to you with the complaint of paronychia in the right index finger. You are planning to give digital block..

- 5 (iv)** Which drug will you give for digital block?
5 (v) When will the drug begin to act?
5 (vi) What is the duration of anaesthesia you expect from this agent?

6. THEME: HEAD INJURY [6 (i) – 6(vi)] **(Total: 6 Marks)**

From the options ‘A to O’ given below, choose the best answer for the questions 6 (i) – 6 (vi)

Options:

- | | |
|--|----------------------------------|
| A. Severe head injury | H. Mild head injury |
| B. Pontine injury | I. Immediate referral |
| C. Treatment as an outpatient | J. GCS 9 |
| D. GCS 7 | K. Moderate head injury |
| E. Traumatic optic nerve injury | L. GCS 13 |
| F. Admission and observation in a secondary level hospital | M. Trans tentorial herniation |
| G. GCS 11 | N. Horner's syndrome |
| | O. Inadequate cerebral perfusion |

Questions

A 23 year old college student is brought to you with complaint that he was riding a bike without a helmet and had fallen while avoiding a cyclist. His ABCs seem fine, you then do his Glasgow coma scale and the results are as follows:

- *When you talk to him, he seems to open his eyes?*
 - *He mutters inappropriate words but there is no conversational exchange.*
 - *His hand crosses over and localizes pain when you gently rub his sternum.*
- 6 (i)** What is his GCS score?
6 (ii) Classify his head injury.
6 (iii) How will you manage him?

Mr. Nandagopal had a head injury and brought to the hospital. While examining him, you found that his both pupils are small and constricted.

- 6 (iv)** What does this indicative of?

69 years old Mr. Natarajan had a fall on the slippery ground and had head injury. His ABCs are fine. His pupils are normal. No history of unconsciousness or any amnesia.

- 6 (v)** How will you manage him?

Mr. Sathish had a head injury and was brought to the hospital. While examining him, you found that one of his pupils does not constrict when light is directed at it but constricts when light is directed into the contralateral pupil.

- 6 (vi)** What is this indicative of?

7. THEME: DIAGNOSIS OF RTHOPEDIC CONDITIONS [7 (i) – 7 (vi)] (Total: 6 Marks)
From the options ‘A to L’ given below, choose the best answer for the questions 7(i) – 7(vi):

Options:

- A. Rotator cuff tear
- B. Supraspinatus tendinitis
- C. Supraspinatus tear
- D. Acute calcific rotator cuff tendinitis
- E. Sub-acute rotator cuff tendinitis
- F. Chronic rotator cuff tendinitis
- G. Biceps tendonitis
- H. Rupture of biceps tendon
- I. Subluxation of shoulder
- J. Brachio radialis tendonitis
- K. Dislocation of shoulder
- L. Myasthenia gravis

Questions: Choose the correct Diagnosis:

7 (i) 30 year old Mrs. Subbulakshmi has come with complaints of recurrent episodes of shoulder pain that comes after a bout of unaccustomed activities. If examination is carried on during these episodes, you can elicit a painful arc in the shoulder movement (60-120 degrees) on abducting the arm. Pain increases and reaches a peak and eventually, returns to normal.

7 (ii) 55 year old Mr. Rangaswamy has come with complaints of recurrent episodes of shoulder pain that starts after a bout of demanding activities. Pain is characteristically worse at night, and patient cannot lie on affected side. Pain and stiffness restrict daily activities.

7 (iii) 40 years old Mr. Lal has come with shoulder pain. Pain is felt along the anterior border of the acromion (that is the place he shows) especially when held in extension. There is also pain on active abduction between 60 and 120 degrees of motion.

7 (iv) 32 year old Mrs. Sudha has come with complaints of shoulder pain. Pain and tenderness are sharply localized to the bicipital groove.

7 (v) 55 year old Mr. Thilak has come with right upper arm pain. The pain started suddenly when he was trying to put a heavy box in the top shelf of the cupboard. He says that he heard something snapping in the arm. On examination, prominent swelling was noticed in the lower part of the arm. There is no evidence of bony injuries.

7 (vi) 34 year old Mr. Palani has come with complaints of inability to lift the right shoulder following an injury. On examination, there is difficulty in initiating abduction and the abducted arm suddenly drops to the side when it is lowered beyond 45 degree abduction.

8. THEME: MANAGEMENT OF ORTHOPEDIC CONDITIONS [QUESTIONS 8 (i) TO 8 (vi)] (Total: 6 Marks)

From the options ‘A to F’ given below, choose the best answers for the questions 8 (i) – 8 (vi)

Options

- A. Traction
- B. Internal fixation
- C. External fixation
- D. Cast
- E. Sling
- F. Splint

Questions:

8 (i) Mr. Subhash has a contaminated grade 3 fracture of right humerus. The type of fracture management he needs is

8 (ii) 7 year old Giri has a simple fracture of right ulna. It happened yesterday and the right forearm is badly swollen. The type of fracture management that should not be done in the primary management of his condition is

8 (iii) 60 year old Mrs. Janet has a left acetabular fracture. The type of fracture management that can be done in the primary management for her condition is

8 (iv) Mr. Yuvaraj had a shoulder injury 2 weeks ago. But he has come only today because the shoulder pain is still persisting. His X-ray shows a mal-aligned fractured left clavicle. The type of definitive fracture management for Mr. Yuvaraj is

8 (v) 30 year old Mr. Kannan has had an internal fixation for his fracture humerus. The additional type of fracture management he needs is

8 (vi) Mr. Sudan has sustained fracture of right femur in a road traffic accident. The type of fracture management that should be done in the primary management of his condition during transfer is

9. THEME: INGUINO SCROTAL SWELLINGS [QUESTIONS 9 (i) TO 9 (vi)]

(Total: 6 Marks)

From the options 'A to I' given below, choose the best answers for questions 9(i) to 9(vi)

Options:

- | | |
|------------------------|--------------------------|
| A. Cyst of epididymis | F. Umbilical hernia |
| B. Infantile hydrocele | G. Para umbilical hernia |
| C. Vaginal hydrocele | H. Varicocele |
| D. Torsion | I. Tumor of testis |
| E. Haematocele | |

Questions: What is the diagnosis?

9(i). Forty-three-year-old Fatima Begum comes to you with a swelling in the umbilical region. She is obese and noticed the swelling two weeks ago because there was mild discomfort in that area.

9(ii). Sami Reddy comes to you with a vague swelling that he has felt in his left side of the scrotum. You are examining him lying down and you are unable to feel any swelling. You ask him to stand and on palpation you feel a soft swelling in the left root of scrotum. It is compressible but you cannot get above the swelling. The testis is felt separately from the swelling which is not transilluminant.

9(iii). A 45-year-old man comes to you with a painless swelling in the right scrotum for two months and no history of trauma. The swelling is confined to the scrotum and you can get above the swelling. It is not transilluminant.

9(iv). 27 year old Mr. Sudhakar, a football player comes with a scrotal swelling of 5 months duration which is not transilluminant, not tender and testis is not palpable separately.

9(v). 17 year old Murugan, has a brilliantly transilluminant scrotal swelling which can be felt separately from the testis.

9(vi). 32 year old Mr. Malik, with a transilluminant scrotal swelling with no cough impulse; testis cannot be felt separately from the swelling.

10. THEME: SITES FOR ANAESTHESIA [QUESTIONS. 10(i) - 10(vi)] (Total: 6Marks)
From the options 'A to N' given below, choose the best answers for the questions 10(i) – 10(vi)

Options:

- A. 6'O clock and 12 'O clock position.
- B. 1'O clock and 11 'O clock position.
- C. Between the medial malleolus and the calcaneum just behind the posterior tibial artery.
- D. Between the medial malleolus and calcaneum, 2 cm lateral to the posterior tibial artery.
- E. Between the lateral malleolus and calcaneum, 2 cm medial to the posterior tibial artery.
- F. Web space at the base of the finger, just distal to the MCP.
- G. At the junction of proximal and middle phalanx, in the lateral aspect.
- H. At the junction of proximal and middle phalanx, in the dorsal crease.
- I. Lateral to the Palmaris tendon, in proximal wrist crease.
- J. Medial to the Palmaris tendon, in distal wrist crease.
- K. Medial to the Palmaris tendon, in proximal wrist crease.
- L. Intervertebral space between L 4- L 5.
- M. Intervertebral space between L 2 – L3.
- N. Intervertebral space between L1- L2.

Questions: Pick the sites for anesthesia:

10(i). Mr. Viswanathan has come with a paraphimosis and you need to reduce it. The sites for block are

10(ii). You want to give a wrist block for a procedure. The site is

10(iii). Mrs. Savithri needs amputation of right big toe and the second toe. The sites for block are

10(iv). Mrs. Deepa has come with a felon in the right index finger. The site for block is

10(v). The site for anaesthesia for Mrs. Devi who is posted for emergency LSCS

10(vi). Mr. Wilson has come with a laceration in the proximal phalanx of the right second finger. You need to do suturing. The site for block is

(LK 0217)

M.MED. FAMILY MEDICINE

(Sub Code: 4012)

**SECOND YEAR THEORY EXAM – FEBRUARY 2017
PAPER II - SURGERY AND ALLIED SCIENCES**

QP .CODE: 434012

Time: Three Hours

Maximum Marks: 100

INSTRUCTIONS

- The paper will be for a total of **100 Marks**.
- Answer **all** the Questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios. **(40 Marks)**
- **Part B** will have Objective type EMQs **Extended Matching Questions**. **(60 Marks)**
 - ✓ This will have 10 sets of these questions.
 - ✓ Each set will have 6 questions.
 - ✓ Each question will carry 1 mark.
 - ✓ Each set has a **theme** on the top. In each set there are **some options** given on the top followed by some **questions**. The options are lettered using the English Alphabets A, B, C, D and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazinedeconate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

- 3(i) What is the drug of choice for Acute Psychosis?
- 3(ii) What is the drug of choice for Bipolar illness?

❖ Match each question to a **single best option** and write it in your paper in the column provided like this:

❖ Each option may be used more than once. Some options may not be used at all.

3(i)	
3(ii)	
3(iii)	
3(iv)	
3(v)	
3(vi)	

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

1. Thirty year old Ramesh sustained a serious head injury 6 months ago. He was in Intensive Care and required assisted ventilation for 5 days. He remained in hospital for 4 weeks before being discharged home to his family. At first the family was just happy that he survived, but now they are struggling to look after him. **(Total : 20 Marks)**
- A. Discuss in detail about the five steps approach in the management of head injury? **(10 Marks)**
- B. Elaborate on GCS and how will you classify head injury based on GCS? **(6 Marks)**
- C. List some of the long term complications after head injury? **(4 Marks)**
2. Twenty-nine year old Murugan comes to you with a swelling in the right side of the scrotum. **(Total: 20 Marks)**
- A. What are all the possibilities for the scrotal swelling? **(3 Marks)**
- B. How will you differentiate and diagnose a scrotal swelling based on clinical examination? Explain with an algorithm. **(8 Marks)**
- C. What are all the investigations will you do? **(4 Marks)**
- D. How will you manage different types of scrotal swellings? **(5 Marks)**

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

1. **THEME: ANESTHESIA FOR A FAMILY PHYSICIAN [QUESTIONS 1(i)-1(vi)]**
(Total: 6 Marks)
- From the options ‘A to N’ given below, choose the best answers for the questions 1(i) to 1(vi)**

Options:

- | | |
|--------------------------|-----------------------------------|
| A. Inhalation anesthesia | H. Field block |
| B. Bolus of Ketamine | I. Midazolam |
| C. Laryngospasm | J. Convulsions |
| D. Atropine | K. Digital block |
| E. 1% Lignocaine | L. Wrist block. |
| F. 2 % Lignocaine | M. 1% Lignocaine with Adrenaline |
| G. Penile block | N. 2 % Lignocaine with Adrenaline |

Questions:

Mrs. Leela has undergone drainage of breast abscess under Ketamine anesthesia. The procedure was uneventful. You have satisfactorily drained the abscess and dressed the wound. The patient is shouting and gesticulating wildly.

- 1(i).** What would you do?
- 1(ii).** Name the life threatening emergency that can happen during light anesthesia with Ketamine?

5 year old Umar has been bought for an elective circumcision.

- 1(iii).** What anesthesia would you plan?
- 1(iv).** What drug would you use?

40 year old, Mr. Venu has come to you with pain in the left index finger. You examine it and diagnose paronychia. You want to drain it without causing much pain.

- 1(v).** What anesthesia would you plan?
- 1(vi).** What drug would you use?

2. THEME: DIAGNOSIS OF RED EYE [QUESTIONS 2(i) – 2(vi)] **(Total: 6 Marks)**
From the options ‘A to L’ given below, choose the best answer for the questions 2(i) – 2(vi)

Options:

- | | |
|--------------------------------------|------------------------------------|
| A. Scleritis | G. Hordeolum internum |
| B. Allergic conjunctivitis | H. Viral conjunctivitis |
| C. Seborrhoeic conjunctivitis | I. Fungal keratitis |
| D. Anterior blepharitis | J. Acute blenorhoea |
| E. Posterior blepharitis | K. Episcleritis |
| F. Hordeolum externum | L. Bacterial conjunctivitis |

Questions:

2 (i). 32 year old Mrs. Komala comes with frequent episodes of redness and watering of eye. On everting the eye, you find papillae. She does not wear glasses or contact lenses.

2 (ii). 8 year old Mani has come with flaky lesions in the bilateral lid margins and mild redness of the eyes. She also has dandruff.

2 (iii). 17 year old Vijaya has come with gritty sensation, redness of the eye and watery discharge from both the eyes. On examination there is conjunctival congestion in both the eyes, the discharge is watery. Preauricular lymph nodes are palpable bilaterally.

2 (iv). Mr. Raju has come with mild redness of eye. On examination you see the pouting openings of meibomian glands with occasional tooth paste like discharge from the openings.

2 (v). Mrs. Banu has come with a swelling of lid of 2 days duration. The lesion is very painful and you can see the pus pointing at the base of an eye lash.

2 (vi). 18 year old Malan has come with a painless swelling of in the lateral end of upper eyelid which is very slowly growing over the past 2 months. There is no symptom other than mild heaviness of lids and congestion of the eye. On examination, the swelling is 1x1 cm, painless, felt under the skin.

3. THEME:TREATMENT OF RED EYE [QUESTIONS 3(i) - 3(vi)] (Total: 6 Marks)
From the options 'A to I' given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Systemic & topical antibiotics and urgent referral
- B. Epilation and antibiotic ointment
- C. Observation
- D. Lid hygiene
- E. Surgical excision
- F. Systemic & topical antibiotics
- G. Artificial tears
- H. Eye closure and tapping
- I. Cromol 4% drops

Questions:

3 (i). Mr. Jeevan, 42 year old farmer has come with a fleshy triangular growth in the sclera of right eye towards cornea. Cornel margins are free. There are no other symptoms. What is the treatment?

3 (ii). 2 days old Juniata's baby is brought with purulent discharge of both the eyes on the second day of life. The discharge is thick and purulent; there is chemosis and lid edema. How will you treat this child?

3 (iii). Mr. Kailash is diagnosed with Seborrhoeic blepharitis. What is the treatment?

3 (iv). Treatment for Mrs. Malini who is diagnosed with hordeolum internum?

3 (v). Treatment for Mrs. Suraksha who is diagnosed with posterior blepharitis.

3 (vi). Treatment for Mr. Madhu who is diagnosed with hordeolum externum?

4. THEME: REFRACTIVE ERRORS [QUESTIONS 4 (i) to 4(vi)] (Total: 6 Marks)
From the options 'A to J' given below, choose the best answers for questions 4 (i) to 4 (vi)

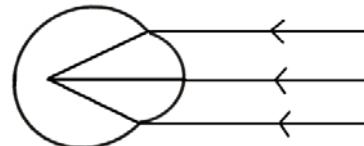
Options

- A. Emmetropia
- B. Cycloplegicretinoscopy
- C. Myopia
- D. Hypermetropia
- E. Astigmatism
- F. Pin hole testing
- G. Fundoscopy
- H. Presbyopia
- I. Retinal detachment
- J. Convergent squint

Questions:

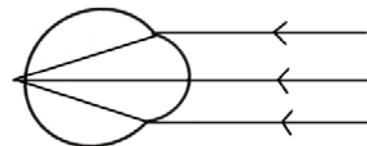
Mr. Damodharan brought his 12 year old son with the complaints of inattention at school; he is not able to look at the blackboard to read in the class. On examination you found that his eyeballs are relatively large and you realized that the following could be the reason for his problems.

4. (i) Name the refractive error - Parallel rays of light coming are focused in front of the retina when accommodation is at rest.



Mrs. Malathy brings her 10 year old son with the complaints of headache, tired and gritty eyes and diminished vision for near. On examination you found that his eyeballs are too small and you realized that the following could be the reason for his problems.

4. (ii) Name the refractive error - Parallel rays of light are focused behind the retina when accommodation is at rest.



4. (iii) If the above mentioned refractive error is not corrected, it can predispose to ----- problem in young children.

4. (iv) Name the refractive error that occurs due to the irregular shape of the cornea and causing unequal refractive power.

4. (v) All children with refractive errors should have a ----- test.

4. (vi) ----- is due to physiological age related insufficiency of accommodation which causes diminished near vision.

5. THEME: ORAL HEALTH [QUESTIONS 5 (i) TO 5 (vi)] (Total: 6 Marks)

From the options 'A to N' given below, choose the best answers for the questions 5(i) to 5(vi)

Options:

- | | |
|----------------------|---------------------|
| A. Malignant ulcer | H. Sodium valproate |
| B. Aphthous ulcer | I. < 6 hours |
| C. Herpetic ulcer | J. Smoking |
| D. Steroid lozenges | K. < 4 hours |
| E. Excision & biopsy | L. Chewing habits |
| F. Oral antibiotics | M. < 8 hours |
| G. Phenytoin | N. Alcohol drinking |

Questions:

30 year old Mr. Muthu was playing Khabadi game with his friends in the morning. During a hit, his tooth came out and the friends wanted to rush to the hospital, but Muthu told we can finish the game and go to the doctor in the evening.

- 5(i). What is the ideal time to replace the lost tooth?

25 year old Mrs. Sundari, known epileptic comes to you with the complaint of having problem in the gums. On examination you see hypertrophy of the gums and the teeth are normal.

5(ii). What could be the reason for her problem?

18 year old girl Ms. Dorothy comes to you with the complaint of painful ulcers on the inside of the cheeks and lips. She gets these ulcers recently for the past 3 months, comes and goes on and off. She is worried about her oral ulcers. On examination, you see the ulcer is white or yellow with the area around it bright red and margins are regular. No regional lymphadenopathy.

5(iii). What is your possible diagnosis?

5(iv). How will you manage her?

45 years old Mr. Balu comes to you with the cancer of the angle of the mouth.

5(v). What could be the most common cause for this?

50 years old Mrs. Ramani comes to you with the complaint of growth over the gingivobuccal sulcus and mandibular alveolus.

5(vi). What could be the most common cause for this?

6. THEME: GLAUCOMA [6 (i) – 6(vi)] **(Total: 6 Marks)**
From the options ‘A to N’ given below, choose the best answer for the questions 6 (i) – 6 (vi)

Options:

- | | |
|------------------------------------|---------------------------------|
| A. T. Acetazolamide 250mg | H. 50% glycerol |
| B. Phacolytic glaucoma | I. 25% glycerol |
| C. Sit erect for 30 minutes | J. Primary open angle glaucoma |
| D. Subacute angle closure glaucoma | K. T. Acetazolamide 500mg |
| E. 2% Pilocarpine and steroid | L. 5% Phenylephrine and steroid |
| F. Secondary glaucoma | M. Refer |
| G. Primary angle closure glaucoma | N. Supine for 1 hour |

Questions:

45 years old Mrs. Parvathi had come to you with the complaint of pain only on the right eye, associated with blurring of vision on the affected side and seeing coloured halos around the light during the episode. Her symptoms usually resolve spontaneously or after sleep.

- 6. (i)** What is your diagnosis?
- 6. (ii)** How will you manage her?

50 years old Mrs. Roshini had come to you with the complaint of having severe headache and red eye on the left side. On examination you found that her intra ocular pressure is quite high

more than 50 mmHg. You are sending her to an ophthalmic surgeon immediately. Before sending her, you felt it is important to give some tablets and eye drops.

6. (iii) What is the drug you will give orally?
6. (iv) What are the eye drops you will give?
6. (v) What is the advice you will give her?
6. (vi) If her intra ocular pressure has not come down after 1 hour, what other drug can be given to her?

7. THEME: DIAGNOSIS OF ORTHOPEDIC CONDITIONS [7 (i) – 7 (vi)]

(Total: 6 Marks)

From the options ‘A to L’ given below, choose the best answer for the questions 7(i) – 7(vi):

Options:

- | | |
|---|--------------------------------|
| A. Rotator cuff tear | G. Biceps tendonitis |
| B. Supraspinatus tendinitis | H. Rupture of biceps tendon |
| C. Supraspinatus tear | I. Subluxation of shoulder |
| D. Acute calcific rotator cuff tendinitis | J. Brachio radialis tendonitis |
| E. Sub-acute rotator cuff tendinitis | K. Dislocation of shoulder |
| F. Chronic rotator cuff tendinitis | L. Myasthenia gravis |

Questions: Choose the correct Diagnosis:

7 (i) 30 year old Mrs. Subbulakshmi has come with complaints of recurrent episodes of shoulder pain that comes after a bout of unaccustomed activities. If examination is carried on during these episodes, you can elicit a painful arc in the shoulder movement (60-120 degrees) on abducting the arm. Pain increases and reaches a peak and eventually, returns to normal.

7 (ii) 55 year old Mr. Rangaswamy has come with complaints of recurrent episodes of shoulder pain that starts after a bout of demanding activities. Pain is characteristically worse at night, and patient cannot lie on affected side. Pain and stiffness restrict daily activities.

7 (iii) 40 years old Mr. Lal has come with shoulder pain. Pain is felt along the anterior border of the acromion (that is the place he shows) especially when held in extension. There is also pain on active abduction between 60 and 120 degrees of motion.

7 (iv) 32 year old Mrs. Sudha has come with complaints of shoulder pain. Pain and tenderness are sharply localized to the bicipital groove.

7 (v) 55 year old Mr. Thilak has come with right upper arm pain. The pain started suddenly when he was trying to put a heavy box in the top shelf of the cupboard. He says that he heard something snapping in the arm. On examination, prominent swelling was noticed in the lower part of the arm. There is no evidence of bony injuries.

7 (vi) 34 year old Mr. Palani has come with complaints of inability to lift the right shoulder following an injury. On examination, there is difficulty in initiating abduction and the abducted arm suddenly drops to the side when it is lowered beyond 45 degree abduction.

8. THEME: MANAGEMENT OF ORTHOPEDIC CONDITIONS [QUESTIONS 8 (i) TO 8 (vi)] **(Total: 6 Marks)**

From the options ‘A to F’ given below, choose the best answers for the questions 8(i)–8 (vi)

Options:

- | | |
|----------------------|-----------|
| A. Traction | D. Cast |
| B. Internal fixation | E. Sling |
| C. External fixation | F. Splint |

Questions:

8 (i) Mr. Subhash has a contaminated grade 3 fracture of right humerus. The type of fracture management he needs is

8 (ii) 7 year old Giri has a simple fracture of right ulna. It happened yesterday and the right forearm is badly swollen. The type of fracture management that should not be done in the primary management of his condition is

8 (iii) 60 year old Mrs. Janet has a left acetabular fracture. The type of fracture management that can be done in the primary management for her condition is

8 (iv) Mr. Yuvaraj had a shoulder injury 2 weeks ago. But he has come only today because the shoulder pain is still persisting. His X-ray shows a mal-aligned fractured left clavicle. The type of definitive fracture management for Mr. Yuvaraj is

8 (v) 30 year old Mr. Kannan has had an internal fixation for his fracture humerus. The additional type of fracture management he needs is

8 (vi) Mr. Sudan has sustained fracture of right femur in a road traffic accident. The type of fracture management that should be done in the primary management of his condition during transfer is

9. THEME: LOSS OF VISION [QUESTIONS 9 (i) TO 9 (vi)] **(Total: 6 Marks)**

From the options ‘A to L’ given below, choose the best answers for questions 9(i) to 9(vi)

Options:

- | | |
|------------------------------------|------------------------------------|
| A. Central retinal vein thrombosis | G. Retinitis pigmentosa |
| B. Nuclear sclerosis of lens | H. Central retinal vein thrombosis |
| C. Retinal detachment | I. Posterior sub capsular cataract |
| D. Primary open angle glaucoma | J. Acute angle closure glaucoma |
| E. Macular degeneration | K. Maculopathy |
| F. Migraine | L. Non infective uveitis |

Questions: What is the possible diagnosis?

9. (i) Mr. Rajendran, a 40 year old teacher has come with complaints of sudden painless loss of vision in his right eye. Before loss of vision, he says that he had symptoms of flashes of light and dark patches before his eyes. When you ask about the thick glasses he is wearing, he tells you that he has been wearing glasses since he is ten years old.

9. (ii) Mrs. Louisa has been having complaints of gradual loss of vision. But the vision is little better in the night time.
9. (iii) Mr. Raju has come with sudden onset of severe pain left eye. There is also loss of vision in the left eye from the time of onset of pain.
9. (iv) Mrs. Nancy is 45 years old. She has been using reading glasses from the age of 40. Now, she finds that she is able to read without glasses.
9. (v) Mr. Thomas is 50 years old. He has frequent episodes of nonspecific headache and needs frequent change in his presbyopic glasses. Occasionally, he feels that he is not able to see a part of an object he is looking at.
9. (vi) Dr. Kesavan is a 32 year old doctor working in Orissa for the past 9 months. He is on weekly prophylaxis for malaria with chloroquine from the time he started working in Orissa. He finds that his acuity of vision has come down for the past 5-6 months.

10. THEME: SITES FOR ANAESTHESIA [QUESTIONS. 10(i) -10(vi)] (Total: 6 Marks)
From the options ‘A to N’ given below, choose the best answers for the questions 10(i) – 10(vi)

Options:

- A. 6’O clock and 12 ’O clock position
- B. 1’O clock and 11 ’O clock position
- C. Between the medial malleolus and the calcaneum just behind the posterior tibial artery
- D. Between the medial malleolus and calcaneum, 2 cm lateral to the posterior tibial artery
- E. Between the lateral malleolus and calcaneum, 2 cm medial to the posterior tibial artery
- F. Web space at the base of the finger, just distal to the MCP
- G. At the junction of proximal and middle phalanx, in the lateral aspect
- H. At the junction of proximal and middle phalanx, in the dorsal crease
- I. Lateral to the Palmaris tendon, in proximal wrist crease.
- J. Medial to the Palmaris tendon, in distal wrist crease.
- K. Medial to the Palmaris tendon, in proximal wrist crease.
- L. Intervertebral space between L 4- L 5
- M. Intervertebral space between L 2 – L3
- N. Intervertebral space between L1- L2

Questions – Pick the sites for anesthesia:

10. (i). Mr. Viswanathan has come with a paraphimosis and you need to reduce it. The sites for block are
10. (ii). You want to give a wrist block for a procedure. The site is
10. (iii). Mrs. Savithri needs amputation of right big toe and the second toe. The sites for block are
10. (iv). Mrs. Deepa has come with a felon in the right index finger. The site for block is
10. (v). The site for anaesthesia for Mrs. Devi who is posted for emergency LSCS
10. (vi). Mr. Wilson has come with a laceration in the proximal phalanx of the right second finger. You need to do suturing. The site for block is

SECOND YEAR THEORY EXAM– AUGUST 2017
PAPER II–SURGERY AND ALLIED SCIENCES

QP .CODE: 434012

Time: Three Hours

Maximum Marks: 100

INSTRUCTIONS

- The paper will be for a total of **100 Marks**.
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- The Paper has 2 parts – **Part A & Part B**.
- **Part A** will be **descriptive type questions** based on case scenarios. **(40 Marks)**
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 - ✓ Each question will carry 1 mark.
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Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazinedeconate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

- 3(i) What is the drug of choice for Acute Psychosis?
- 3(ii) What is the drug of choice for Bipolar illness?

❖ Match each question to a **single best option** and write it in your paper in the column provided like this:

❖ Each option may be used more than once. Some options may not be used at all.

3(i)	
3(ii)	
3(iii)	
3(iv)	
3(v)	
3(vi)	

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

1. Twenty year old Mr. Thilak has come to you with the complaint of redness of the right eye for the past 2 days. There is no history of trauma. There is irritation and watering of the eye. On examination, the whole of the right eye is red including the eyelids. There is no photophobia. **(Total: 20 Marks)**
 - A. What are the causes of red eye? Classify. **(4 Marks)**
 - B. In a patient with red eye, what are the red flags you will ask for in the history? **(3 Marks)**
 - C. What are the red flags you would look for in the examination of red eye? **(7 Marks)**
 - D. What is your diagnosis for Mr. Thilak? How will you manage him? **(4 Marks)**
 - E. What is the complication you will anticipate in him and how will you manage? **(2 Marks)**
2. Fifty year old Mr. Raman has been brought to you with a head injury, sustained about an hour and a half ago. He fell down from the stairs and rolled down 12 steps rapidly. **(Total: 20 Marks)**
 - A. What are the factors causing secondary injury to the brain that should be prevented by an attending doctor? **(4 Marks)**
 - B. How will you stabilize Mr. Raman? **(5 Marks)**
 - C. How will you examine him? **(6 Marks)**
 - D. When will you refer him?
 - i. Mention the factors influencing your decision to transfer the patient. **(2 Marks)**
 - ii. Red flags in head injury **(3 Marks)**

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

1. Theme: Common Orthopedic Problems [Questions 1(i) - 1(vi)] **(Total: 6 Marks)**
From the options ‘A to J’ given below, choose the best answers for the questions 1(i) to 1(vi)

Options:

- | | |
|------------------------------|------------------------------|
| A. Elbow dislocation | F. Bennett fracture |
| B. Frozen shoulder | G. Proximal humerus fracture |
| C. Scaphoid fracture | H. Gamekeepers thumb |
| D. Colles fracture | I. Supracondylar fracture |
| E. Shaft of humerus fracture | J. Boxers fracture |

Questions:

- 1(i). 61 year old Mrs. Kamalam comes with right shoulder pain for the past one year. She gives no history of trauma and she is not able to comb her hair. What is the likely diagnosis?

1(ii). Mr. Ramesh 25 year old is brought with right wrist drop. He says he fell from his 2nd floor terrace and landed on his outstretched hand. Where is his fracture likely to be?

1(iii). Mrs. Gomathy 45 year old lady fell with her hand and wrist outstretched and complains of pain over her anatomical snuff box. What fracture does she have?

1(iv). Mrs. Parvathy 65yrs old fell on her outstretched hand and came with dinner fork deformity. What fracture do you suspect?

1(v). Ruby 8 year old comes with S deformity of her elbow after falling on her outstretched hand. What condition does she have?

1(vi). Suresh comes with dropped knuckle deformity. What is the diagnosis?

2. Theme: Inguinoscrotal Swellings [Questions 2(i) - 2(vi)] (Total:6 Marks)

From the options 'A to J' given below, choose the best answers for the questions 2(i) to 2(vi)

Options:

- | | |
|---------------------------|---------------------------------|
| A. Femoral hernia | F. Carcinoma |
| B. Inguinal hernia | G. Testicular torsion |
| C. Hydrocele | H. TB epididymo orchitis |
| D. Sliding hernia | I. Gumma |
| E. Varicocele | J. Spigelian hernia |

Questions: What is your diagnosis?

2(i). 32 yrs. old Mr. Sudhir comes with a groin swelling on left side with positive cough impulse medial to the pubic tubercle.

2(ii). A young couple being evaluated for primary infertility comes to clinic. The male partner is 32 yrs old and says he has a left scrotal swelling. You examine him and the swelling feels like a bag of worms.

2(iii). Rakesh a 15 yr old boy comes with pain in the abdomen and scrotum. He has also been vomiting. You examine him and try to elevate the scrotum but his pain only worsens.

2(iv). 35 yr old Mr. Kasi comes with a painless scrotal swelling and you palpate a beaded vas deferens.

2(v). 60 yr old Kamala comes with right groin swelling for 2 years. She says it has become painful for the last week. On examination, the swelling originates lateral to the pubic tubercle and is non-reducible.

2(vi). 40 yrs old Mr. Vishwa presented with right testicular swelling without pain. Trans-illumination test was negative.

3. Theme: Treatment for Oral Health [Questions 3(i) to 3(vi)] (Total: 6 Marks)

From the options 'A to J' given below, choose the best answers for the questions 3(i) to 3(vi)

Options:

- | | |
|---|---|
| A. No intervention | C. Proper brushing and flossing only |
| B. Use straw to drink beverages. | D. Antibiotics with NSAIDs |

- E. Replace tooth
- F. Steroids
- G. Biopsy
- H. Root canal therapy
- I. Scaling
- J. Chew sugarless gum

Questions: What do you advise in the following situations?

- 3(i). 2 year old Premavathy is brought with yellow coloured teeth. Her mother had tried brushing with whitening toothpaste but there was no change. She says she had taken some medications while pregnant with this child but does not remember what they were.
- 3(ii). 16 year old Surya comes with the complaint of halitosis. She had hard deposits on the gum line.
- 3(iii). 40 year old Mr. Prakash comes with an ulcer on the inner aspect of his cheek for one month. You find his teeth are stained with nicotine and there are packets of pan in his shirt pocket.
- 3(iv). 25 year old Samuel had fallen while playing cricket with his friends and two of his front teeth had fallen out. His parents bring him to the clinic as soon as the incident happened.
- 3(v). 40 year old Mahesh comes with right sided facial swelling and toothache. On examination you find swollen gums and pain on tapping tooth with spatula.
- 3(vi). 50 year old Kavitha is brought by her son for having bad odour in the mouth. She has already tried good oral hygiene.

4. Theme: Diagnosis in Diminished Vision [Questions 4(i) to 4(vi)] (Total: 6 Marks)

From the options ‘A to L’ given below, choose the best answers for questions 4 (i) to 4 (vi)

Options:

- A. Refractive error
- B. Keratoconus
- C. Age related cataract
- D. Retinal detachment
- E. Diabetic retinopathy
- F. Acute angle closure glaucoma
- G. Vitamin A deficiency
- H. Amaurosisfugax
- I. Optic neuritis
- J. Keratitis
- K. Phacolytic glaucoma
- L. Primary open angle glaucoma

Questions: identify the diagnosis?

- 4(i). 12 year old Seema comes with difficulty in seeing the blackboard for the last 6 months associated with headache.
- 4(ii). 60 yr old Velu comes with progressive diminished vision and seeing halos. There is no associated headache.
- 4(iii). 60 year old Madan comes with right sided sudden loss of vision and seeing floaters.
- 4(iv). 40 years old Martin comes with the complaints of headache and changes his presbyopic glasses frequently.
- 4(v). 50 years old Susan comes with pain, redness, photophobia and suddenly diminishing vision in her right eye.
- 4(vi). 8 year old Kavi is brought with history of having difficulty in seeing in dimlight.

5. Theme: Diagnosis in Oral Health [Questions 5 (i) - 5 (vi)] **(Total: 6 Marks)**
From the options 'A to K' given below, choose the best answers for the questions 5(i) to 5(vi)

Options

- A. Dental caries
- B. Aphthous ulcer
- C. Herpetic ulcer
- D. Dental abscess
- E. Phenytoin
- F. Sodium valproate
- G. Gingivitis
- H. Smoking
- I. Malignant ulcer
- J. Chewing habits
- K. Alcohol consumption

Questions:

- 5(i).** 40 year old Mr. Narayan presented with complaints of severe continuous pain in the left lower premolar associated with yellowish brown coloured teeth and bad breath. On examination there is a gum bubble at the root and pain in the tooth on tapping with a metal spatula. What is the possible diagnosis?
- 5(ii).** 35 year old Mrs. Sarika, known epileptic comes to you with the complaint of having problem in the gums. On examination you see hypertrophy of the gums and the teeth are normal. What could be the reason for her problem?
- 5(iii).** 20 year old girl Ms. Sanya comes to you with the complaint of painful ulcers on the inside of the cheeks and lips. She started getting these ulcers recently since 3 months, which comes and goes intermittently. She is worried about her oral ulcers. On examination, you see the ulcer is white and yellow with the area around it bright red and margins are regular. No regional lymphadenopathy. What is your possible diagnosis?
- 5(iv).** 59 years old Mr Subhash presented with complaints of a painless ulcer in the mouth behind the last molar tooth since 5 months. He is a chronic smoker. He gives a history of injury while biting and chewing something hard. On examination there is an irregular margin and the ulcer bleeds on touch? Regional lymphadenopathy present. What is the possible diagnosis?
- 5(v).** 52 years old Mr. Muthusamy comes to you with the cancer of the angle of the mouth. What could be the most common cause for this?
- 5(vi).** 57 years old Mrs. Rupali comes to you with the complaint of growth over the gingivobuccal sulcus and mandibular alveolus. What could be the most common cause for this?

6. Theme: Treatment for Red Eye [6 (i) – 6(vi)] **(Total: 6 Marks)**
From the options 'A to I' given below, choose the best answer for the questions 6(i) – 6(vi)

Options:

- A. Excision
- B. Tape the lid to the skin of the cheek with adhesive plaster
- C. Ketorolac 0.5% drops
- D. Topical steroids
- E. Tarsal injection of gentamycin OD for a week

- F. Tab. Ciprofloxacin 500 mg OD for 6 weeks
- G. Tab. Doxycycline 100 mg OD for 6 weeks
- H. Ciprofloxacin ointment
- I. Taping the lateral canthal skin supero-temporally with adhesive plaster

Questions: What is the management?

- 6(i).** Mrs. Radha, a 65 year old retired clerk has entropion in both the eyes. She is not willing for surgery. The temporary method of treating her condition is?
- 6(ii).** 19 year old Mr. Tony has chronic internal hordeolum. What is the definite treatment for him?
- 6(iii).** 44 year old Mr. Salim has persistent posterior blepharitis. How would you treat him?
- 6(iv).** Mrs. Latha has ectropion in both eyes due to post burn facial scarring. She is not willing for surgery. The temporary relief method is?
- 6(v).** 10 year old Aisha has chronic dacryocystitis. The definitive treatment for her will be?
- 6(vi).** 11 year old Karan has simple allergic conjunctivitis of moderate severity. The treatment of choice for him will be?

7. Theme: Management of Diminished Vision [7 (i) – 7 (vi)] **(Total: 6 Marks)**
From options ‘A to L’ given below, choose the best answer for the questions 7(i) – 7(vi):

Options:

- | | |
|---|-------------------------------------|
| A. Trabeculectomy. | G. Oral 50% glycerol |
| B. Laser Iridotomy | H. Tab. Acetazolamide |
| C. Primary open angle glaucoma | I. 200,000 IU orally every 6 months |
| D. 5 years after the onset of diabetes | J. Subluxation of lens. |
| E. At the time of diagnosis | K. Primary angle closure glaucoma |
| F. 10 years after the onset of diabetes | L. 100,000 IU every 3-6 months |

Questions:

- 7(i).** Talitha, 51 years old lady is a newly diagnosed type 2 diabetic, coming to you. Her blood sugars are under control. When will you do first fundus examination for her?
- 7(ii).** Mrs. Jasmine brings her 7 month old baby to you for vaccination. What is the WHO recommended schedule for prophylaxis against Vitamin A deficiency?
- 7(iii).** 10 years old Sameera is diagnosed to have Type I DM. When is the recommended time of the first ophthalmic examination for her?

Mr. Bharat, aged 71 years is brought to you with sudden onset of severe right sided headache and painful decreased vision in right eye. On examination, you can see ciliary congestion & shallow anterior chamber.

- 7(iv).** What is your possible diagnosis?
- 7(v).** What immediate treatment will you give to Mr. Bharat?
- 7(vi).** What is the surgery of choice for him?

8. Theme: Anaesthesia in Family Medicine [Questions 8(i)- 8(vi)] (Total: 6 Marks)
From the options ‘A to P’ given below, choose the best answers for the questions 8 (i) – 8 (vi)

Options:

- | | |
|-------------------------------|------------------------|
| A. Atropine | I. 1% Lignocaine |
| B. Hypotension | J. Pentazocine |
| C. 20-30 minutes | K. 2 hours |
| D. 0.5% Lignocaine | L. 10-15 minutes |
| E. 5% Bupivacaine heavy | M. Nausea and vomiting |
| F. Promethazine | N. 1 hour |
| G. Diazepam | O. Midazolam |
| H. Lignocaine with adrenaline | P. Ephedrine |

Questions:

36 years old Mrs. Nalini delivered her 3rd child. She requested you for permanent sterilization. You are planning to do a postpartum tubectomy for her.

- 8(i). Which drug will you prefer to use for Mrs Nalini’s pain relief?
8(ii). What will be the most common side effect?
8(iii). To prevent that side effect which drug will you add?

Mr. Solomon comes to you with the complaint of paronychia in the left ring finger. You are planning to give him a digital block.

- 8(iv). Which drug will you give Mr. Solomon for digital block?
8(v). When will the drug begin to act?
8(vi). What is the duration of anaesthesia you expect from this agent?

9. Theme: Sites for Anesthesia [Questions 9(i) - 9 (vi)] (Total: 6 Marks)
From the options ‘A to N’ given below, choose the best answers for questions 9(i) to 9(vi)

Options:

- | |
|--|
| A. 6’O clock and 12 ’O clock position |
| B. 1’O clock and 11 ’O clock position |
| C. Between the medial malleolus and the calcaneum just behind the posterior tibial artery |
| D. Between the medial malleolus and calcaneum, 2 cm lateral to the posterior tibial artery |
| E. Between the lateral malleolus and calcaneum, 2 cm medial to the posterior tibial artery |
| F. Web space at the base of the finger, just distal to the MCP |
| G. At the junction of proximal and middle phalanx, in the lateral aspect |
| H. At the junction of proximal and middle phalanx, in the dorsal crease |
| I. Lateral to the Palmaris tendon, in proximal wrist crease. |
| J. Medial to the Palmaris tendon, in distal wrist crease. |
| K. Medial to the Palmaris tendon, in proximal wrist crease. |
| L. Intervertebral space between L 4- L 5 |
| M. Intervertebral space between L 2 – L3 |
| N. Intervertebral space between L1- L2 |

Questions: Pick the sites for anesthesia:

- 9(i).** Mr. Viswanathan has come with a paraphimosis and you need to reduce it. The sites for block are
- 9(ii).** You want to give a wrist block for a procedure. The site is
- 9(iii).** Mrs. Savithri needs an amputation of right big toe and the second toe. The sites for block are
- 9(iv).** Mrs. Deepa has come with a felon in the right index finger. The site for block is
- 9(v).** The site for anaesthesia for Mrs. Devi who is posted for emergency LSCS
- 9(vi).** Mr. Wilson has come with a laceration in the proximal phalanx of the right second finger. You need to do suturing.

10. Theme: Management of Orthopedic Conditions [Questions 10(i) - 10(vi)]

(Total: 6 Marks)

From the options 'A to F' given below, choose the best answers for the questions

10(i) – 10 (vi)

Options:

- | | |
|-----------------------------|------------------|
| A. Traction | D. Cast |
| B. Internal fixation | E. Sling |
| C. External fixation | F. Splint |

Questions:

10(i). Mr. Subhash has a contaminated grade 3 fracture of right humerus. The type of fracture management he needs is

10(ii). 7 year old Giri has a simple fracture of right ulna. It happened yesterday and the right forearm is badly swollen. The type of fracture management that should not be done in the primary management of his condition is

10(iii). 60 year old Mrs. Janet has a left acetabular fracture. The type of fracture management that can be done in the primary management for her condition is

10(iv). Mr. Yuvaraj had a shoulder injury 2 weeks ago. But he has come only today because the shoulder pain is still persisting. His X-ray shows a mal-aligned fractured left clavicle. The type of definitive fracture management for Mr. Yuvaraj is

10(v). 30 year old Mr. Kannan has had an internal fixation for his fracture humerus. The additional type of fracture management he needs is

10(vi). Mr. Sudan has sustained fracture of right femur in a road traffic accident. The type of fracture management that should be done in the primary management of his condition during transfer is

SECOND YEAR THEORY EXAM– FEBRUARY 2018
PAPER II - SURGERY AND ALLIED SCIENCES

QP .CODE: 434012

Time: Three Hours

Maximum Marks: 100

INSTRUCTIONS

- The paper will be for a total of **100 Marks**
- Answer **all** the Questions
- The Paper has 2 parts – **Part A & Part B**
- **Part A** will be **Descriptive Type Questions** based on case scenarios. **(40 Marks)**
- **Part B** will have Objective type EMQs **Extended Matching Questions.** **(60 Marks)**
 - ✓ This will have 10 sets of these questions
 - ✓ Each set will have 6 questions
 - ✓ Each question will carry 1 mark
 - ✓ Each set has a **theme** on the top
 - ✓ In each set there are **some options** given on the top followed by some **questions**
 - ✓ The options are lettered using the English Alphabets A, B, C, D and so on.

Example:

3. THEME –COMMON PSYCHIATRIC PROBLEMS [QUESTIONS. 3(i) – 3(vi)] (6marks)
From the options ‘A to H’ given below, choose the best answer for the questions 3(i) – 3(vi)

Options:

- A. Inj. Haloperidol
- B. Amitriptyline + counseling
- C. Tab. Chlorpromazine
- D. Tab. Trihexyphenidyl
- E. Tab. Diazepam
- F. Tab. Lithium
- G. Inj. Fluphenazine deconate
- H. Tab. Risperidone

Questions: What is your treatment option in the following cases?

- 3(i) What is the drug of choice for Acute Psychosis?
 3(ii) What is the drug of choice for Bipolar illness?

- ❖ Match each question to a **single best option** and write it in your paper in the column provided like this:

3(i)	
3(ii)	
3(iii)	
3(iv)	
3(v)	
3(vi)	

- ❖ Each option may be used more than once. Some options may not be used at all.

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

- 1. 34 year old Shantipriya presented with complaints of redness of the eyes since 3 days.** (Total: 20 Marks)
- A. What history would you like to elicit? (3 Marks)
B. What are the likely causes of red eye? Classify. (5 Marks)
C. How will you differentiate conjunctival congestion from ciliary congestion? (4 Marks)
D. What are the red flags you must note in history and on examination of the red eye? (6 Marks)
E. How will you examine the cornea? (2 Marks)
- 2. 35 year old Aishwarya presented with complaints of a swelling in the groin for the last two months.** (Total: 20 Marks)
- A. What are the differential diagnoses? (2 Marks)
B. What history will you elicit from her? What clues does this history give you? (2 Marks)
C. How will you differentiate each one of the differential diagnoses on physical examination? (6 Marks)
D. What are the signs of strangulation or obstruction? (2 Marks)
- One month later she brought her 20 year old cousin Mr. Ashish with complaints of scrotal swelling on the right side.**
- E. What questions would you ask in history taking and what clinical examination will help you to make a diagnosis? (8 Marks)

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

- 1. Theme: Oral Health [Questions 1(i) – 1(vi)]** (Total: 6 Marks)
- From the options ‘A to M’ given below, choose the best answer for questions 1(i) – 1(vi):**
- Options:**
- | | |
|-------------------------------|---------------------------------------|
| A. Brush twice a day. | H. Sodium valproate |
| B. Only reassurance | I. < 6 hours |
| C. Analgesics and Antibiotics | J. Refer to the dentist |
| D. Steroid lozenges | K. < 4 hours |
| E. Soak in saline or milk | L. < 8 hours |
| F. Oral antibiotics | M. Wrap in a clean cloth/tissue paper |
| G. Phenytoin | |

Questions:

18 year old Mr. Sachin was playing hockey with his friends in the morning. During a hit, his tooth came out and the friends wanted to rush him to the hospital, but Sachin told that they could finish the game and go to the doctor in the evening.

1(i). What is the ideal time to replace the lost tooth?

1(ii). What is the ideal way to protect the fallen tooth?

1(iii). 25 year old Miss. Manisha, known epileptic comes to you with the complaint of having problem in the gums. On examination you see hypertrophy of the gums and the teeth are normal. What could be the cause of her problem?

1(iv). 21 year old girl Ms. Sanya comes to you with the complaint of painful ulcers on the inside of her cheeks and lips. she has been getting these ulcers for the past 3 months which is on and off. She is worried about these oral ulcers. On examination, you see the ulcer is white or yellow with the area around it bright red and margins are regular. No regional lymphadenopathy. How will you manage her?

1(v). 14 year old Monica brought to the clinic with toothache and swelling of the right side of face. On examination there is pain on tapping on the 1st molar. As a family physician how will you manage her?

1(vi). 26 year old Jolly, a primi, comes to you with complaints of swollen gums and bad breath. On examination the gums are red, round, swollen and bleeds when pressed against them. What advice will you give her?

2. Theme: Common Orthopedic Problems [Questions 2(i) – 2(vi)] (Total: 6 Marks)

From options ‘A to L’ given below, choose the best answer for questions 2(i) – 2(vi):

Options:

- | | |
|------------------------------|------------------------------|
| A. Gamekeeper's thumb | G. Proximal humerus fracture |
| B. Supracondylar fracture | H. Frozen shoulder |
| C. Boxer's fracture | I. Scaphoid fracture |
| D. Shaft of humerus fracture | J. Colles fracture |
| E. Elbow dislocation | K. Rotator cuff tear |
| F. Bennett fracture | L. Compartment syndrome |

Questions:

2(i). 41 year old Mrs. Delana comes with pain left shoulder for one year. She gives no history of trauma and not able to comb the hair. What is her likely diagnosis?

2(ii). 37 year old Mrs. Shifa fell with her hand and wrist outstretched and complains of pain over her anatomical snuff box. What fracture does she have?

2(iii). 50 year old Mrs. Kauser Beebi fell on her outstretched hand and came with dinner fork deformity. What fracture do you suspect?

7 year old Sweety brought with S deformity of her elbow after falling on her outstretched hand.

2(iv). What condition does she have?

2(v). After 2 days, she is coming with pain in the forearm. On examination pain elicited on passive extension of the fingers, forearm is tense and tender. What is the complication you can expect in Sweety?

2(vi). 39 year old Mr. Salman comes with dropped knuckle deformity. What is his diagnosis?

3. Theme: Loss of Vision [Questions 3(i) – 3(vi)]

(Total: 6 Marks)

From options ‘A to J’ given below, choose the best answer for the questions 3(i) – 3(vi):

Options:

- A. Non infective uveitis
- B. Posterior subcapsular cataract
- C. Simple Migraine
- D. Primary open angle glaucoma
- E. Macular degeneration
- F. Retinal detachment
- G. Maculopathy
- H. Nuclear sclerosis of lens
- I. Acute angle closure glaucoma
- J. Central retinal vein thrombosis

Questions: What is the probable diagnosis?

3(i). 53 year Mr. Khan, an artist, has come with complaints of sudden painless loss of vision in his right eye. Before loss of vision, he says that he had symptoms of flashes of light and dark patches before his eyes. When you ask about the thick glasses he is wearing, he tells you that he has been wearing glasses since he is ten years old.

3(ii). 39 year old Mrs. Rita has been having complaints of gradual loss of vision. But the vision is little better in the night time.

3(iii). 41 year old Mrs. Sanya has come with sudden onset of severe pain in her left eye associated with headache. There is also loss of vision in the left eye from the time of onset of pain.

3(iv). 49 year old Mrs. Jayashree has been using reading glasses from the age of 40. Now she finds that she is able to read without glasses.

3(v). 58 year old Mr. Desai has frequent episodes of nonspecific headache and needs frequent change in his presbyopic glasses. Occasionally, he feels that he is not able to see a part of an object he is looking at.

3(vi). 37 year old Jignesh is a social worker in Jharkhand for the past 11 months. He is on weekly prophylaxis for malaria with chloroquine from the time he started working in Jharkhand. He finds that his acuity of vision has come down for the past 5-6 months.

4. Theme: Head Injury [Questions 4(i) – 4 (vi)]

(Total: 6 Marks)

From options ‘A to I’ given below, choose the best answer for the questions 4(i) – 4(vi):

Options:

- A. Inadequate cerebral perfusion
- B. Transtentorial herniation
- C. Horner’s syndrome
- D. Chronic subdural hematoma
- E. Pontine injury
- F. Chronic extradural hematoma
- G. Acute extradural hematoma
- H. Traumatic optic nerve injury
- I. Acute subdural hematoma

Questions: What is your clinical diagnosis?

4(i). 82 year old Mr. Joshua brought to your clinic with a history of fall in the bathroom and was unconscious for several minutes when his wife found him in the bathroom sitting dazed. She says that he was confused for about 10 minutes and then was his normal self again. However, after

about 4 hours, he began to feel drowsy and confused again and began to complain of headache. His GCS at present is 12.

4(ii). 18 year old college student Mr. Rohit brought to the hospital after a road traffic accident. While examining him, you found that one of his pupils does not constrict when light is directed at it but constricts when light is directed into the contralateral pupil.

4(iii). 37 year old Mr. Shashwat was riding his bike without a helmet. He was hit by a lorry and now he is in causality. Examination shows unilateral dilated pupil that does not respond to either direct or consensual stimulation.

4(iv). 52 year old Mr. Mohan was hit by a vehicle from the back when he was riding the bike without a helmet. While examining him, you found that his both pupils are small and constricted.

4(v). 64 year old Jaswanti comes to you with one week history of acute onset of headache, confusion and some gait disturbance. She is not a known diabetic or a hypertensive. On examination she has some weakness of the right lower limb. There is no history of head injury except the fact that 3 weeks ago she had bumped her head into a wall in the darkness during a power cut.

4(vi). 43 year old Mrs. Revathy sustained a head injury 7 hours back. On investigating her, CT scan shows a hypodense area which is convex toward the brain and restricted by suture lines.

5. Theme: Anaesthesia for a Family Physician [Questions 5 (i) – 5 (vi)] (Total: 6 Marks)
From options 'A to N' given below, choose the best answer for questions 5(i) – 5(vi):

Options:

- | | |
|-------------------------------|-------------------------|
| A. Atropine | H. 1% Lignocaine |
| B. Betahistidine | I. 2 hours |
| C. 1 Hour | J. 10-15 minutes |
| D. Pentazocine | K. 20-30 minutes |
| E. Promethazine | L. 5% Bupivacaine heavy |
| F. Diazepam | M. Midazolam |
| G. Lignocaine with adrenaline | N. 0.5% Lignocaine |

Questions:

32 year old Mrs. Janaki is admitted in the hospital. You are planning to do a postpartum tubectomy.

5(i). Which drug will you prefer to use for pain relief?

5(ii). To prevent side effects of nausea and vomiting which drug will you add?

27 year old Mrs. Zeba comes to you with the complaint of paronychia in the right index finger. You are planning to give digital block.

5(iii). Which drug will you give for digital block?

5(iv). When will the drug begin to act?

5(v). What is the duration of anaesthesia you expect from this agent?

5(vi). 4 year old Khadar is posted for elective circumcision. He is crying and shouting. Which drug would you use to sedate him?

6. Theme: Management of Orthopedic Conditions [Questions 6(i) – 6 (vi)] (Total: 6 Marks)
From options ‘A to F’ given below, choose the best answer for the questions 6(i) – 6(vi):

Options:

- | | |
|----------------------|----------------------|
| A. Sling | D. Splint |
| B. Cast | E. Traction |
| C. Internal Fixation | F. External Fixation |

Questions: How will you manage?

6(i). 30 year old Mr. Lokesh brought with history of fall from height. On examination he has a contaminated grade 3 fracture of right humerus. What type of fracture management does he need?

6(ii). 9 year old Sumesh sustained a simple fracture of right ulna after a fall at home yesterday. On examination the right forearm is badly swollen. What is the type of fracture management that should not be done in the primary management of his condition?

6(iii). 56 year old Mrs. Raginiis brought to your clinic with a left acetabular fracture after a fall on the road. What type of fracture management can be done in the primary care?

6(iv). 49 year old Mr. John sustained a shoulder injury 2 weeks ago when his car turn turtled. But he has come only today because the shoulder pain is still persisting. His X-ray shows a mal-aligned fractured left clavicle. What is the type of definitive fracture management for Mr. John?

6(v). 25 year old Mr. Yashwant has had an internal fixation for his fracture humerus. What is the additional type of fracture management that he needs?

6(vi). 33 year old Mrs. Malaika had sustained fracture of right femur in a road traffic accident. What type of primary fracture management should be done during transfer?

7. Theme: Groin Swellings [Questions 7 (i) –7 (vi)] (Total: 6 Marks)
From options ‘A to I’ given below, choose the best answer for questions 7(i) – 7(vi):

Options:

- | | |
|------------------------|-----------------------------|
| A. Testicular tumor | F. Acute epididymo orchitis |
| B. Cyst of epididymis | G. Tuberculous epididymis |
| C. Inguinal hernia | H. Infantile hydrocele |
| D. Hydrocele | I. Torsion of testis |
| E. Chronic Haematocele | |

Questions: What is the clinical diagnosis?

7(i). 39 year old Mr. Rahul has come with complaints of right inguinoscrotal swelling. On examination, the swelling is reducible, cough impulse is positive and transillumination is negative. The testis is palpable separately and it is not tender.

7(ii). 5 year old Harish is brought by his parents with complaints of inguino scrotal swelling noticed 3 months ago. On examination, the swelling is not reducible, cough impulse is negative and transillumination is positive. The testis is not palpable separately and it is not tender.

7(iii). 41 year old Mr. Surya has come with complaints of right scrotal swelling. On examination, the swelling is not reducible, cough impulse is negative and transillumination is positive. The swelling is not tender. Testis and epididymis are not definable.

7(iv). 33 year old Mr. Kiran, a sportsman has come with complaints of right scrotal swelling for the past 4 weeks. On examination, the swelling is not reducible, cough impulse is negative and transillumination is negative. The swelling is not tender. Testis and epididymis not definable.

7(v). 15 year old Satya has come with complaints of right scrotal swelling. On examination, the swelling is not reducible, cough impulse is negative and there is brilliant transillumination. The swelling is not tender. Testis and epididymis defined separately.

7(vi). 30 year old Bheem has come with complaints of scrotal pain and swelling. There is history of high risk behaviour. On examination, the swelling is not reducible, cough impulse is negative and there is no transillumination. The swelling is warm and tender. Testis and epididymis defined separately.

8. Theme: Anesthesia [Questions 8 (i) – 8 (vi)]

(Total: 6 Marks)

From the options ‘A to O’ given below, choose the best answer for questions 8(i) – 8(vi):

Options:

- A. Intervertebral space between L4 - L5
- B. Intervertebral space between L2 - L3
- C. Intervertebral space between L1- L2
- D. 11 o'clock and 3 o'clock position
- E. 6 o'clock and 12 o'clock position
- F. 1 o'clock and 11 o'clock position
- G. Lateral to Palmaris tendon, in proximal wrist crease
- H. Medial to Palmaris tendon, in proximal wrist crease
- I. Medial to Palmaris tendon, in distal wrist crease
- J. Web space at the base of the finger, just distal to the MCP

- K. At the junction of proximal and middle phalanx, in the dorsal crease
- L. At the junction of proximal and middle phalanx, in the lateral aspect
- M. Between medial malleolus and calcaneum, 2 cm lateral to posterior tibia tibial artery
- N. Between lateral malleolus and calcaneum, 2 cm medial to posterior tibial artery
- O. Between medial malleolus and calcaneum, just behind the posterior tibial artery

Questions: Pick the sites for anesthesia:

8(i). 13 year old Shiju has come with paraphimosis and you need to reduce it. The sites for block are -

8(ii). 47 year old Mr. Narasimha has come to you for debridement of wound in the palm of his right hand. You want to give a wrist block. The site for the block is -

8(iii). 59 year old Mrs. Nadia, a known diabetic, needs an amputation of right big toe and the second toe. The sites for block are -

8(iv). 28 year old Ms. Sakshi has come to you with a felon in the left index finger. The site for block is -

8(v). 25 year old Mrs. Sridevi is posted for emergency LSCS. The site for spinal anesthesia is

8(vi). Mr. Wilson has come with a laceration in the proximal phalanx of the right second finger. You need to do suturing. What is the site of block?

9. Theme: Head Injury [Questions 9 (i) – 9 (vi)]

(Total: 6 Marks)

From options ‘A to L’ given below, choose the best answer for the questions 9(i) – 9(vi):

Options:

- | | |
|-------------------------------|--|
| A. Mild head injury | H. Severe head injury |
| B. GCS 13 | I. Immediate referral |
| C. Treatment as an outpatient | J. GCS 11 |
| D. GCS 12 | K. CT scan and observation in a secondary level hospital |
| E. Send home | L. Admission and monitor |
| F. Moderate head injury | |
| G. GCS 9 | |

Questions:

20 year old Nazaruddin, a college student, is brought to you with a history of road traffic accident. He was riding a bike without a helmet and had fallen while avoiding a cyclist. On examination he seems to open his eyes, mutters inappropriate words, but there is no conversational exchange. His hand crosses over and localizes pain when you gently rub his sternum.

9(i). What is his GCS score?

9(ii). Classify his head injury

9(iii). How will you manage him?

9(iv). 56 years old Mr. Kapoor brought with history of head injury after a fall in the bathroom. His ABCs are fine, oriented, his pupils are normal. No history of unconsciousness or any amnesia. His GCS score is 14. How will you manage him?

9(v). 29 years old Rangasamy an autorickshaw driver is brought with head injury after a road traffic accident. He was unconscious for around 20 minutes. After he regained consciousness he vomited once, was opening his eyes on questioning him, responding to commands but still confused and localised the pain on supraorbital pressure. He did not have any seizures and no focal neurological deficits, no bleeding and no pupillary abnormalities. What is his GCS score?

9(vi). 38 year old Mr. Hashim is brought with head injury after a fall from a 1st floor of a building. He opens his eyes when talked to, moaning but not saying any words and flexes in response to pain. What is your next step?

10. Theme: Treatment for Eye Conditions [Questions 10 (i) – 10 (vi)] **(Total: 6 Marks)**

From options ‘A to I’ given below, choose the best answer for questions 10(i) – 10(vi):

Options:

- | | |
|--|---|
| A. Excision | F. Ketorolac 0.5% drops |
| B. Ciprofloxacin ointment bd for 6 weeks | G. Tab. Doxycycline 100 mg od for 6 weeks |
| C. Tape the lid to the skin of the cheek with adhesive plaster | H. Tarsal injection of gentamicin OD for a week |
| D. Topical steroids | I. Tab. Ciprofloxacin 500 mg OD for six weeks |
| E. Taping the lateral canthal skin supero-temporally with adhesive plaster | |

Questions:

10(i). 70 year old Mrs. Febina, a retired clerk, has entropion in both the eyes. She is not willing for surgery. What is the temporary method of treating her condition?

10(ii). 21 year old Mr. Abel has chronic internal hordeolum. What will be the definite treatment for his condition?

10(iii). 35 year old Mr. Roger has come to you with complaints of persistent posterior blepharitis. How will you manage?

10(iv). 29 year old Mrs. Ashisha has ectropion in both eyes due to post burn facial scarring. She is not willing for surgery. What will be the temporary method of treating her condition?

10(v). 9 year old Isabell has chronic dacryocystitis. What will be the definitive treatment of choice for her?

10(vi). 17 year old Pooja has simple allergic conjunctivitis of moderate severity. What will be the treatment of choice for her?

(LO 0219)

M.MED. FAMILY MEDICINE

(Sub Code: 4012)

**SECOND YEAR THEORY EXAM FEBRUARY 2019
PAPER II – SURGERY AND ALLIED SCIENCES**

QP .CODE: 434012

Time: Three Hours

Maximum Marks: 100

INSTRUCTIONS

- The paper is for a total of **100 Marks**.
- All questions are mandatory. **Answer ALL** the questions.
- The Paper has 2 parts – **Part A & Part B**.
- **Part A** has **Descriptive Type Questions (40 Marks)**.
 - There are **2** questions in this part.
- **Part B** has Objective type **Extended Matching Questions- EMQs (60 Marks)**.
 - There are **10** sets of these questions.
 - Each set has **6** questions.
 - Each question carries 1 mark.
 - The **theme** of each set is mentioned at the beginning.
 - In each set there are **options** followed by some **questions**.
 - The options are lettered using the English Alphabets A, B, C, D and so on.

Example:

3. THEME–COMMON PSYCHIATRIC PROBLEMS [Questions 3(i) – 3(vi)] (Total: 6 marks)

From options ‘A to I’ given below, choose the best answer for the questions 3(i) –3(vi):

Options:

- | | |
|-------------------------------|--------------------------------|
| A. Inj. Haloperidol | E. Tab. Diazepam |
| B. Amitriptyline + counseling | F. Tab. Lithium |
| C. Tab. Chlorpromazine | G. Inj. Fluphenazine deconoate |
| D. Tab. Trihexyphenidyl | |

Questions: What is your treatment option in the following scenarios?

3(i). Mr. P feels sad all the time and he has lost interest in meeting with friends...

3(ii). Mr. A has a fluctuating mood. Sometimes he is very enthusiastic and sometimes he is ...

- Match each question to a **single best option** and write it in your answer paper like this:
- Each option may be used more than once. Some options may not be used at all.

3(i)	B
3(ii)	C
3(iii)	B
3(iv)	D
3(v)	A
3(vi)	G

PART – A
DESCRIPTIVE QUESTIONS
(ANSWER ALL QUESTIONS)

- 1. 32-year-old Mr. Suresh has an inguinoscrotal swelling since one year. (Total:20 Marks)**
 - A. As a primary care physician, what are the differential diagnoses you will consider for a inguinoscrotal swelling? (4 Marks)**
 - B. What are the salient points you will ask in history for a patient with an inguinoscrotal swelling? (5 Marks)**
 - C. What are the inspection findings you would look for in a inguinoscrotal swelling? (5 Marks)**
 - D. What are the four important questions you will ask to arrive at the diagnosis of an inguino scrotal swelling? Draw an algorithm for diagnosis of inguinoscrotal swelling based on these questions. (6 Marks)**
- 2. You are a family physician with an office practice in a semi urban area. You had to perform minor surgical procedures in your practice time to time. (Total 20 Marks)**
 - A. What are the types of anesthesia? (5 Marks)**
 - B. What are the commonly used local anesthetic agents? Discuss briefly. (5 Marks)**
 - C. What are the common sedative agents we use in office practice for procedures? Discuss briefly. (5 Marks)**
 - D. Mrs. Tina as come with paronychia right index finger and need to rain it. How will you give digital anesthesia? (5 Marks)**

PART – B
EXTENDED MATCHING QUESTIONS
(ANSWER ALL QUESTIONS)

- 1. THEME: HEAD INJURY [Questions 1(i) – 1(vi)] (Total: 6 Marks)**
From the options ‘A to J’ given below, choose the best answer for questions 1(i) –1(vi):

Options:

- | | |
|---|--|
| A. Inadequate cerebral perfusion | F. Acute extradural hematoma |
| B. Pontine injury | G. Chronic subdural hematoma |
| C. Traumatic optic nerve injury | H. Chronic extra dural hematoma |
| D. Inadequate cerebral perfusion | I. Transtentorial herniation |
| E. Acute subdural hematoma | J. Horner's syndrome |

Questions: What is the clinical diagnosis?

- 1(i).** Mahesh is a 17-year-old college student who is brought to the hospital after an accident. While examining him, you find that one of his pupils does not constrict when light is directed at it but constricts when light is directed into the contralateral pupil.

1(ii). Mr. Mohan was riding his bike without a helmet. He was hit by a lorry and was resuscitated and intubated in the site because there was a hospital near the accident site. Now he is on a ventilator. Examination now shows bilateral dilated pupil that does not react to light.

1(iii). 68-year-old Mr. Sultan, who is on regular medications for his unstable angina had a fall in the bathroom. He was unconscious for several minutes and then when there was no sign of him, his wife pushed open the bathroom door and found him sitting dazed. The history is that he was confused for about 10 minutes and then was his normal self again. However, after about 4 hours, he began to feel drowsy and confused again. He is brought to you and you find his GCS is 12.

1(iv). Mr. Anand was hit by a vehicle from the back when he was riding a bike without a helmet. In the casualty, he was resuscitated and intubated because his GCS was 6/15. Now, after 2 hours, he is hyperpyrexic and pupils are pin point.

1(v). 70-year-old Mrs. Radha comes to you with a history of acute onset of headache, confusion and some gait disturbances for the last one week. She is not a known diabetic or a hypertensive. On examination, she is afebrile, power in the right lower limb is 3/5 and in the right upper limb is 4/5. In the left eye, there is papilledema and the pupil is unreactive and dilated.

1(vi). The CT scan of Mrs. Tina who sustained a head injury before 6 hours, shows a hypo dense area which is convex toward the brain.

2. THEME: SITES FOR ANAESTHESIA [Questions 2(i) – 2(vi)] **(Total: 6 Marks)**

From options 'A to M' given below, choose the best answer for questions 2(i) – 2(vi):

Options:

- A. Web space at the base of the finger, just distal to the MCP joint
- B. At the junction of proximal and middle phalanx, in the lateral aspect
- C. At the junction of proximal and middle phalanx, in the dorsal crease
- D. Lateral to the Palmaris tendon, in proximal wrist crease.
- E. 6'O clock and 12 'O clock position
- F. 1'O clock and 11 'O clock position
- G. Between the medial malleolus and the calcaneum just behind the posterior tibial artery
- H. Between the medial malleolus and the calcaneum, 2 cm lateral to the posterior tibial artery
- I. Between the lateral malleolus and the calcaneum, 2 cm medial to the posterior tibial artery
- J. Medial to the Palmaris tendon, in distal wrist crease.
- K. Medial to the Palmaris tendon, in proximal wrist crease.
- L. Intervertebral space between L 4- L 5
- M. Intervertebral space between L 2 – L3

Questions: What is the site of the anaesthesia?

2(i). Mr. Sam has come with a paraphimosis and you need to reduce it. The sites for penile block are-

2(ii). You want to give a wrist block for a procedure. The site is-

2(iii). Mrs. Kala, a diabetic for 10 years needs an amputation of right big toe and the second toe. The sites for block are-

2(iv). Mr. Dayalan has come with a felon in the right index finger. The site for block is-

2(v). The site for anaesthesia for Mrs. Geetha who is posted for emergency LSCS is-

2(vi). Mr. Kumar has come with an injury in the proximal phalanx of the right second finger. You need to do suturing.

3. THEME DIAGNOSIS OF RED EYE [Questions 3(i) – 3(vi)] (Total: 6 Marks)

From options ‘A to M’ given below, choose the best answer for the questions 3(i) –3(vi):

Options:

- | | |
|-----------------------------------|----------------------------|
| A. Endophthalmitis | H. Keratitis |
| B. Hordeolum externum | I. Episcleritis |
| C. Acute bacterial conjunctivitis | J. Pterygium |
| D. Uveitis | K. Vernal conjunctivitis |
| E. Seborrhoeic blepharitis | L. Seborrhoeic blepharitis |
| F. Viral conjunctivitis | M. Scleritis |
| G. Ulcerative blepharitis | |

Questions: What is the clinical diagnosis?

3(i). 27-year-old Mr. Samuel has come with painful eyes and photophobia for the past 2 weeks. On questioning further, you realize there is pain in the brow and continuous ocular pain which is worse on eye movements. There is no relief with analgesics. On examination there is a scleral nodule with bluish discolouration.

3(ii). 33-year-old Mrs. Lakshmi has a nodule in the right eye with sectoral congestion. The lesion is triangular, fleshy and asymptomatic.

3(iii). 10-year-old Meena has come with complaints of itchy eyes. On examination, there is bilateral redness of eye and watery discharge. There are no red flags. Preauricular lymph nodes are palpable bilaterally.

3(iv). 21-year-old Faizal has come with red eye. On examination, there is gelatinous thickened accumulation of tissue around limbus and presence of discrete whitish raised dots along the limbus.

3(v). 24-year-old Ms. Swati has come with complaints of itching of both eyes. On examination, both the eyes are red and there is crusting in the lid margin. On removing the crusts, there is bleeding.

3(vi). 50-year-old Mrs. Kanaka has come with sudden onset of severe photophobia, head ache, pain and diminished vision. There is ciliary congestion and pupil is constricted and irregular.

4. THEME: TREATMENT FOR RED EYE [Questions 4(i) – 4 (vi)] (Total: 6 Marks)

From options ‘A to I’ given below, choose the best answer for the questions 4(i) –4(vi):

Options:

- | | |
|---|---|
| A. Tab. Doxycycline 100 mg od for 6 weeks | E. Tab. Ciprofloxacin 500 mg OD for six weeks |
| B. Tarsal injection of gentamicin OD for a week | F. Ciprofloxacin ointment bd for 6 weeks |
| C. Ketorolac 0.5%, drops | |
| D. Excision | |

- G. Taping the lateral canthal skin supero-temporally with adhesive plaster
- H. Tape the lid to the skin of the cheek with adhesive plaster
- I. Topical steroids

Questions: What is the management in the following conditions?

- 4(i). 10-year-old Kavitha has simple allergic conjunctivitis of moderate severity.
- 4(ii). 34-year-old Mr. Ayush has persistent posterior blepharitis.
- 4(iii). Mrs. Doulath has ectropion in both eyes due to post burns facial scarring. She is not willing for surgery. This is the temporary method of treating her condition.
- 4(iv). 8-year-old Aby has chronic dacryocystitis. This is the definitive treatment for him.
- 4(v). Mrs. Gowri, a 70-year-old retired clerk has entropion in both the eyes. She is not willing for surgery. This is the temporary method of treating her condition.
- 4(vi). 26-year-old Mr. Bhasker has chronic internal hordeolum. This is the definitive treatment for him.

5. THEME: DIAGNOSIS OF ORTHOPAEDIC CONDITIONS [Questions 5(i)– 5(vi)]

(Total:6 Marks)

From options ‘A to J’ given below, choose the best answer for questions 5(i) –5(vi):

Options:

- | | |
|----------------------|---------------------------|
| A. Pulled elbow | F. Compartment syndrome |
| B. Colles’ fracture | G. Carpal tunnel syndrome |
| C. Rib fracture | H. Supracondylar fracture |
| D. Fracture clavicle | I. Scaphoid fracture |
| E. Fracture humerus | J. Lunate fracture |

Questions: What is the most probable diagnosis?

- 5(i). 34-year-old Mrs. Geeta has come with restriction of right thumb movement and pain over the area of anatomical snuffbox, after a fall.
- 5(ii). 5-year-old Felicita has come with severe pain in the left elbow after a fall. On examination, there is significant swelling around the elbow with a ‘S’ shaped deformity, with ecchymosis in the antecubital fossa. Radial pulse is absent.
- 5(iii). 62-year-old Mrs. Meena has come with pain in the left wrist following a fall. On examination, there is swelling of wrist and there is a dinner fork deformity.
- 5(iv). 4-year-old Vignesh is brought by his mother with a history of not being able to move the right arm. The child is holding the arm still at his side and refusing to bend the elbow. There is no history of fall, but the pain started when his father was trying to leave him in his LKG class despite of Vignesh’s refusal to go inside.
- 5(v). 45 years old Mr. Khanna has come with history of fall on outstretched hand. On examination, there is severe pain in the upper arm and there is wrist drop.
- 5(vi). 23-year-old Mr. Rao is brought with very severe pain, by his relatives, 6 hours after application of cast for right forearm fracture. On examination, right radial pulse is not palpable and there is paraesthesia of the right hand.

6. THEME: MANAGEMENT OF ORTHOPEDIC CONDITIONS [Questions 6(i) –6 (vi)] (Total: 6 Marks)

From options ‘A to F’ given below, choose the best answer for the questions 6(i) – 6(vi):

Options:

- | | |
|----------------------|-----------|
| A. Traction | D. Cast |
| B. Internal fixation | E. Sling |
| C. External fixation | F. Splint |

Questions:

6(i). 70-year-old Mr. Siva has a left acetabular fracture. The type of fracture management that can be done in the primary management of his condition is -

6(ii). 34-year-old Mr. David had injury of right shoulder 2 weeks ago. But he has come only today because the shoulder pain is still persisting. His X-ray shows a mal-aligned fracture right clavicle. The type of definitive fracture management for Mr. David is -

6(iii). 30-year-old Mrs. Kamala has had an internal fixation for her fracture humerus. The additional type of fracture management she needs is -

6(iv). 44-year-old Mr. John has sustained fracture of right femur in a road traffic accident. The type of fracture management that should be done in the primary management of his condition during transfer is -

6(v). Mr. Giri has a contaminated grade 3c fracture right humerus. The type of fracture management he needs is-

6(vi). 9-year-old Munna has a simple fracture of right ulna. It happened yesterday and the right forearm is badly swollen. The type of fracture management that should **not** be done in the primary management of his condition is –

7. THEME: DIAGNOSIS OF HERNIA [Questions 7 (i) –7 (vi)] (Total: 6 Marks)

From options ‘A to H’ given below, choose the best answer for questions 7(i) –7(vi):

Options:

- | | |
|------------------------|--------------------------|
| A. Strangulated hernia | E. Incarcerated hernia |
| B. Richter’s hernia | F. Diaphragmatic hernia |
| C. Epigastric hernia | G. Para umbilical Hernia |
| D. Spigelian hernia | H. Umbilical hernia |

Questions: What is the diagnosis?

7(i). 2-year-old Dinesh has features of hypothyroidism. This is the common hernia found in children with hypothyroidism.

7(ii). 41-year-old Mrs. Kavitha has come with abdominal pain suggestive of acid peptic disease. But on examination, you find a small button like swelling midway between the xiphisternum and the umbilicus.

7(iii). Mr. Gowtham presented with irreducible hernia. On surgery, only antimesentric border of the intestine was found to be strangulated through a small defect in the abdomen.

7(iv). Mrs. Devi has come with a swelling above the umbilicus with cough impulse positive.

7(v). 3 hours old Monika's baby has presented with complaints of difficulty in breathing and grunting. On examination, abdomen is scaphoid and bowel sounds are heard in the right hemithorax.

7(vi). 43-year-old Mr. John has come with vomiting and abdominal pain. On examination, he is febrile, toxic, his pulse rate is rapid, feeble, 128 / minute and his BP is 90/70 mm of Hg. On examination of abdomen, he has a tender, irreducible hernia; there is generalized distension and tenderness.

8. Theme: ORAL HEALTH [(Questions [8 (i) –8 (vi)] **(Total: 6 Marks)**

From the options 'A to I' given below, choose the best answer for questions 8 (i) – 8 (vi):

Options:

- | | |
|--------------------|---------------------------|
| A. Malignant ulcer | F. Dental abscess |
| B. Aphthous ulcer | G. Leukoplakia |
| C. Herpetic ulcer | H. Oral candidiasis |
| D. Gum hypertrophy | I. Oral hairy leukoplakia |
| E. Dental plaques | |

Question: Choose the right diagnosis for the patients described below:

8(i). 30-year-old Mr. Paul has come with repeated episodes of small, round painful ulcers inside the mouth. He is otherwise healthy. On examination the ulcers are round, yellowish, elevated spots surrounded by a red halo.

8(ii). Mr. Raghav has come with complaints of burning sensation of oral cavity. On examination, there are white patches on gums, tongue and inside the mouth that can be peeled off leaving a raw area.

8(iii). Mrs. Leela, an epileptic on phenytoin has come with these oral lesions.

8(iv). 45 year old Mr. Somnath has come with irregular non-painful white patches on the sides of the tongue, with corrugated appearance. He is HIV positive.

8(v). Mr. Raju, a smoker for 20 years, has come with a slightly elevated, grey coloured, single well-defined lesion inside the right cheek.

8(vi). Mrs. Kalpana has come with severe, continuous facial pain for the past 2 days. On examination, right side of her face is swollen and there is severe pain in the left second upper molar on tapping with a spatula.

9. THEME: HEAD INJURY [Questions [9 (i) –9(vi)] **(Total: 6 Marks)**

From options 'A to C' given below, choose the best answer for the questions 9(i) – 9(vi):

Options:

- | | |
|---------------------------------|----------------------------------|
| A. No need for CT scan | C. Needs CT scan and observation |
| B. Protect his airway, CT scan. | |

Questions: Does this patient need a CT scan?

9(i). 34-year-old Mr. Vasu had a motor bike accident on his way home from work. He was not wearing a helmet. After the accident he cannot remember leaving his office. His neurological examination is normal.

9(ii). 41-year-old Mr. Hari hit his head on a doorframe 20 minutes ago. He feels a bit dizzy. He is taking 'heart tablets', not sure what. On examination there is a big bruise on his forehead. His neurological examination is normal.

9(iii). 23-year-old Mr. Farhan is hit by a car. He has a fractured tibia. He is making moaning noises. When you press on the fingernail, he opens his eyes and pulls his hand away.

9(iv). 16-year-old Ratheesh fell backwards off a wall and hit his head. His friend said he was 'knocked out' for 2-3 seconds. He walked into the clinic and seems fine now after 2 hours.

9(v). 32-year-old Mr. John is involved in a RTA. When you talk to him, he opens his eyes, but he seems a bit confused when he talks. He does not lift his arms when you ask him. When you pinch his skin on his chest he moves his arms but does not grab your hand. If you press his fingernails he withdraws his arm.

9(vi). 7-year-old Harini fell off a tree and hit her head 3 hours ago. She has vomited 4 times, including just now in the clinic.

10. THEME: DIMINISHED VISION [Questions 10 (i) –10 (vi)] (Total: 6 Marks)

From options 'A to H' given below, choose the best answer for questions 10(i) –10(vi):

Options:

- | | |
|-----------------------------|-----------------------|
| A. Myopia | E. Presbyopia |
| B. Cataract | F. Retinal detachment |
| C. Giant cell arteritis | G. Multiple sclerosis |
| D. Cerebrovascular accident | H. Migraine |

Questions: What is the diagnosis?

10(i). 80-year-old Mrs. Meera presents with sudden loss of vision on left side. She has been troubled by unilateral left sided headache on and off for 1 week.

10(ii). 50-year-old Mr. Mani is not able to read the newspaper, but can see objects at a distance without difficulty.

10(iii). 68-year-old Mr. Rajesh presents with gradual progressive loss of vision. Now he is only able to count fingers in the left eye and tell light from dark in the right eye. Lenses seem cloudy.

10(iv). 8-year-old Chintu is not doing well at school and misbehaving in class. Snellen chart shows 6/18 in left and 6/12 in right eye. Pin hole improves to 6/9 and 6/12.

10(v). 29-year-old Mrs. Neela presents with blurred vision in left eye on and off for a few months.

10(vi). 47-year-old Mr. Manickam presents with sudden painless loss of vision in left eye. He had complaints of some flashes and floaters.
