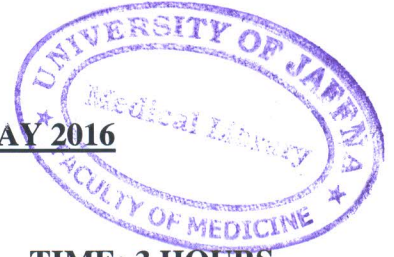


UNIVERSITY OF JAFFNA, SRI LANKA
FINAL EXAMINATION FOR MEDICAL DEGREES – MAY 2016
MEDICINE PAPER II



ANSWER ALL 10 QUESTIONS.
ANSWER EACH QUESTION IN A SEPARATE BOOK.

TIME: 3 HOURS

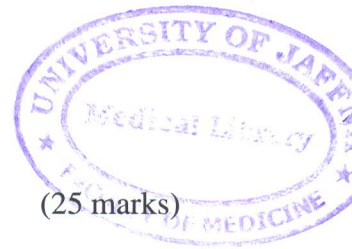
02.5.2016

1.30 pm – 4.30 pm

- 01 A 65 year old long standing diabetic patient presented to medical ward with exertional tiredness, palpitations and weight loss of 6kg over a month time. On questioning he admitted that he smokes 5-6 cigarettes day and he was on oral hypoglycaemic drugs and statin.
On examination his pulse rate was 108/minute irregular. BP was 110/80mm Hg.
- 1.1 What is the most probable rhythm disorder you would consider in this patient? (10 marks)
- 1.2 Name 2 other conditions that give rise to irregular pulse? (10 marks)
- 1.3 Name 2 possible causes that lead to the condition you mentioned in (1.1) in this patient? (10 marks)
- 1.4 How will you confirm your diagnosis that you mentioned in (1.1)? (10 marks)
- 1.5 How will you control his heart rate? (10 marks)
- 1.6 Name a complication you would expect due to condition you mentioned in (1.1) and how will you prevent it. (20 marks)
- 1.7 What is the value of 2D echo cardiogram on this patient? (30 marks)
- 02 A 60 year old man presented with upper back ache for 3 weeks and weakness of lower limbs for 2 days.
- 2.1 How will you evaluate him in the history? (25 marks)
- 2.2 What is the evaluation you need to do on your examination? (25 marks)
- 2.3 How will you investigate him? (25 marks)
- 2.4 How will you treat him? (25 marks)

- 03 A 50 year old female with long standing diabetes presented with 5 days history of dysuria, fever with chills and rigors, vomiting and right sided abdominal pain. On examination she was febrile and looking ill. Her pulse rate was 120/minute and BP was 85/40. Right flank tenderness noted on abdominal examination. The random blood glucose was 320mg/dl.
- 3.1 Name 2 possible causes for her low blood pressure? (10 marks)
- 3.2 What is the most probable clinical diagnosis for her febrile illness? (10 marks)
- 3.3 How will you confirm your clinical diagnosis? (20 marks)
- 3.4 How will you manage her hypotension? (20 marks)
- 3.5 Outline the management of her diabetes during the hospital stay? (20 marks)
- 3.6 How will you treat the condition you mentioned in (3.2)? (20 marks)
- 04 A 30 year old previously healthy female presented with a history of cough and fever of 5 days duration. On examination she was tachypnoeic. Respiration rate 30/min. Cyanosed, Blood pressure was 90/40 mm Hg. Lung examination revealed crepitations over left mid and lower zones.
- 4.1 If you are the intern medical officer how will you manage her in the first hour of admission? (20 marks)
- 4.2 List down the investigations you will arrange immediately. (20 marks)
- 4.3 How will you manage her further after the initial management? (40 marks)
- 4.4 After the initial improvement by 5th day her fever recurs again what are the possible causes you will look for? (20 marks)
- 05 A 75 year old male living alone presented with tiredness, malaise and exertional shortness of breath for 3 months duration. His FBC revealed Hb-4.8mg/dl, MCV- 106fl WBC-3200/mm³- N-45 L-45 E-10 Platelet - 120,000/mm³
- 5.1 What is the most probable hematological diagnosis for the above FBC report? (10 marks)
- 5.2 List 3 possible differential diagnoses for the above presentation. (30 marks)
- 5.3 List the salient points you would ask this patient to identify an aetiology? (20 marks)
- 5.4 What important physical signs you would look for on examination? (20 marks)
- 5.5 Outline the investigations you would perform to arrive at a diagnosis? (20 marks)

- 06 A 26 year old obese female referred to medical clinic for further evaluation of high blood pressure. Her BP reading on presentation is 180/105 mm Hg on both arms
- 6.1 Write 5 important information you will ask from this patient to find out the **cause of high Blood Pressure.** (25 marks)
- 6.2 List 5 clinical signs you would look for in this patient. (25 marks)
- 6.3 List down 5 investigations you will arrange for this patient during her initial visit. (25 marks)
- 6.4 Give 3 differential diagnoses you may consider in this patient if her HbA1C is 8.5. (15 marks)
- 6.5 What lifestyle changes you would advice her to control her high blood pressure? (10 marks)
- 07 A 65 year old ethanol abuser presented with 2 bouts of haematemesis to medical emergency unit. On examination he had ankle odema and mild icterus. His pulse rate was 110/minute and blood pressure was 90/60 mmHg.
- 7.1 Name 3 possible causes for his haematemesis? (15 marks)
- 7.2 What are the vital parameters that should be monitored in this patient? (15 marks)
- 7.3 What immediate blood investigations you would request? Give reasons. (15 marks)
- 7.4 An urgent ultra sound scan abdomen revealed a cirrhotic liver, moderate splenomegaly and free fluid. What is the most probable cause for his haematemesis you could infer from the scan findings? (10 marks)
- 7.5 How will you manage the condition you mentioned in (7.4)? (25 marks)
- 7.6 On what medications would you discharge the patient from the hospital? (20 marks)



08. A 28 year old young woman with long history of Schizophrenia was admitted to the medical ward after an accidental finding of high fasting blood glucose. She told that she was fairly stable with her current medication – Olanzapine 20 mg / day. During registration, the nursing officer calculated her BMI and it was found as 32 and her abdominal circumference was 33 inches.
- 8.1 What more information you will gather in the history? (20 marks)
- 8.2 What physical findings would you expect to have in this patient? (20 marks)
- 8.3 How would you investigate this patient? (20 marks)
- 8.4 What are the psychiatric medications which commonly cause this/these problem/s? (15 marks)
- 8.5 Write a sample referral letter to the treating psychiatry team. (25 marks)
09. A 25 year-old female presented to medical casualty ward with a history of bilateral leg swelling, facial puffiness and frothy urine of 2 weeks duration. She has no significant past medical history to note. On examination she had a BP of 100/80 mm Hg and her UFR showing albumin ++++ and occasional RBCs. Serum creatinine was 1.0 mg/dl
- 9.1 What is your working diagnosis? (10 marks)
- 9.2 List three investigations you will perform to confirm the above condition. (15 marks)
- 9.3 What parameters should be monitored in the ward? (15 marks)
- 9.4 List six blood investigations you will perform to identify the cause of above condition mentioned in 9.1, Give brief reasons. (30 marks)
- 9.5 She had a renal biopsy which showed normal histology under light microscope.
- 9.5.1 What is the diagnosis? (5 marks)
- 9.5.2 What drug you will initiate to treat this condition? (5 marks)
- 9.6 Few days after admission to hospital, she developed low grade fever which was associated with swollen and tender right leg.
- 9.6.1 Name two conditions that can give rise to this presentation. (10 marks)
- 9.6.2 List three tests you will request to arrive at a diagnosis mentioned 9.6.1 and give reasons. (10 marks)



10. A 30 year old male was referred to medical clinic by his general practitioner with a history of inflammatory back pain of one month duration. He also had inflammatory oligoarthritis mainly involving the large joints of lower limb. He experienced pain on his feet while walking in some occasions. Diagnosis of ankylosing spondilitis was made clinically.
- 10.1 Write three differential diagnoses? (15 marks)
- 10.2 Brief what further information you will gather in the history to differentiate above conditions? (30 marks)
- 10.3 What you would expect in the following investigations if he is having ankylosing spondilitis? (15 marks)
- a. Plain X' ray L/S spine
 - b. HLA B27
 - c. Rheumatoid factor
- 10.4 Write six physical signs you will look for clinically to support the above diagnosis. (15 marks)
- 10.5 Few years later he presents with progressive worsening of shortness of breath. What are the possible causes you will consider? (10 marks)
- 10.6 Name three different classes of drugs that are used to treat this condition. (15 marks)