

## THE SUPERIOR COLLEGE, LAHORE Final PROFESSIONAL MBBS ANNUAL EXAMINATION 2018

MEDICINE II (SEQ's)

Time Allowed: 2HOURS

Roll No. Total Marks: 45

## Instructions

- Attempt all questions.
- All question carry equal marks.
- The SEQ's part is to be submitted within 2 hours, Extra time will not be given.
- Neat Hand Writing use of margin and marker for headlines will increase the presentation of

According to ICD-10 criterion, what are the major (cardinal) and associated symptoms of (Suicles) depression? How would you diagnose mild, moderate and severe depressive disorder on the basis of these symptoms? Mychological , Sinbyrcal

A 25 years old female with bilateral symmetrical arthritis of small joints of hands presented to the Medical OPD with complaint of inability to move small joints of hands after prolonged rest especially on waking up and stays so for more than an hour? Her shoulder, elbow and wrist joints are also involved although with slightly less severity. (0.5 Mark)

a) What is the most likely dlagnosis? (?) Name all possible physical signs on examination of hands. I (OZ Marks)

C) Name findings on xrays of hands in advanced disease. → P \_ 516 (1.5 Marks)

-d) Name one most specific investigation? - ) Anti- Capa(01 Mark)

A 19 years old boy presented with fever along with pain and swelling of right knee Joints for almost a month. Fever is low grade intermittent and pain which was initially mild is now becoming severe in intensity and limiting the range of movements. On examination there is swelling and findings suggestive of knee effusion on right side. He had persistent cough and low grade fever about 06 months ago, which stayed for almost more than a month and after investigations was prescribed medicines which he stopped himself Sephiz. when started feeling better.

a) What is the most likely diagnosis? (01 Marks)

Name the investigations for him? And expected findings of each. (2.5 Marks) (1.5 Marks)

a Cruil (City) C) Write down the treatment steps of this patient.

a Capilis (Accipa 16 years old boy presented to you with superficial Fungal skin infections. These fungal infections are called with the name "Tinea" followed by the area involved.

Or (2017) (ACC)(A 16 years old boy presented to you think the area involved.

Infections are called with the name "Tinea" followed by the area involved.

(O2 Marks) (SU'CLES)

O CO (Part) (ACC)(A 16 Years old boy presented to you think the area involved.

(O2 Marks) (SU'CLES)

b) How will you investigate the skin fungal infections? (01 Mark)

c) What treatment options are available for superficial or deep skin fungal infections,
please comment on general principles of treatment also? (02 Marks) please comment on general principles of treatment also?

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Soil display 100-200mg/day)

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that ight against born RBCI Hemoly L. / Hemolytic disease of noch A patient with significant anemia presented to you in your Medical Out Patients department. He is symptomatic and highly educated. He want to know the details about his illness. 4. Th (22 mb', d) Name 02 most common causes of microcytic, macrocytic and normocytic (03 Marks) anemias each. e) What a positive Comb's test & increased reticulocyte count signify? (01 Mark) In a patient with mixed deficiency anemia which medicines may be given? 21 detecto (ūi iviaik) A 40 years old female who is a known patient of arthritis and skin allergies, presents to your clinic with 04 months history of excessive weight gain, appearance of coarse facial hair, her skin, has become thinner with purplish striae on abdomen, along with puffiness of face. She complaints of frequent urination throughout day and as well in night. In treatment history she accepts for taking some treatment form hakeems in form of OI RRU tablets, syrups and powders. There is also complaints of bone pains. Her blood pressure is 155/90 mmHg. (01 Mark) Write down complete diagnosis? (O2 Marks) b) What are the usual complications of this disease? / (02 Marks) c) How will you investigate this patient? Please be specific? An lady of 55 years with history of Type 2 diabetes mellitus for last 04 years and hypertension & hyperlipidemia for last 03 years. She has grossly uncontrolled diabetes while hypertension and hyperlipidemia have variable control as shown by the record. Now she has presented in emergency with blood sugar level of 550 mg /dl in semiconscious state with severe dehydration and fruity smell from her breath. A diagnosis of diabetic ketoacidosis is made after checking urine ketones which are (+++) prolonged be sition traured a) Name 02 conditions which may lead to DKA in type 2 diabetes meilitus.(01mark) work olde (02 Marks) ( b) Enlist the principals of treatment of DKA. \ in red some Name 04 complications of diabetic ketoacidosis other than electrolyte and acid base derangements. 1.5 Mypolennion DIC, ARDS (02 Marks) A 23 years old female is brought to OPD with two weeks history of periorbital and lower Edemp limb swelling. On examination, she has grade 3+ pitting edema of lower limbs. There are SEVELL also features suggestive of moderate ascites and mild right sided pleural effusion (confirmed both on ultrasound abdomen and chest) Nephrolize

(a) What is the provisional diagnosis? (1) (0) (01 Mark) 2 b) What preliminary investigations you will perform? (02 Marks) Write three therapeutic steps for the initial management/ (02 Marks) Dialysis is an Important treatment modality renal failure. Write down the O4 most Important indications of dialysis (02 Marks) b) Discuss briefly the types, benefits, complications, mechanisms and special issues regarding each type of dialysis. - nki their dialing