

THE SUPERIOR COLLEGE, LAHORE

Final PROFESSIONAL MBBS SEND UP EXAMINATION 2020 MEDICINE II

(SEQ's)

22/10/20

Roll No. F15 -054

Time Allowed: 2HOURS

Attempt all questions. Instructions

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 your paper. Do not write your name or disclose your identity in anyway.

A 40 years old male patient presented with large flaccid blisters and painful erosions on 1. his back, chest and scalp. The blisters developed on normal skin and ruptured easily. The examination of oral cavity revealed erosions and ulcers Pemphigous Vulgaris

a) What is the likely diagnosis? (01 Mark)

b) What is its pathogenesis? (01 Mark)

(Stioles) c) How will you investigate the patient? (1.5 Marks)

d) What is the treatment of this disease? (1.5 Marks)

2. Question

a) How is alcohol dependence diagnosed? Describe the essential features of the

How would you manage a patient that is dependent on alcohol? Describe the investigations and treatment ontions available? (2.5 Marks)

A 38 years old man presents in OPD because of having low back pain for last few weeks. ·Blood 3. There are no other specific symptoms. He has been taking enalapril and thiazide diuretic alcohol conc. for his hypertension for the last 5 years. His father and younger sister also have hypertension. On examination, his BP is 140/90 mmHg. There is palpable mass with mild · LFT tenderness in left flank and mid systolic click on cardiac examination. Urine dipstick Polycystic Kidney disease hient? (02 Marks) (405 Dawidson

shows microscopic hematuria. · ABG a) What is most likely diagnosis? (01 Mark)

b) How would you further investigate this patient? (02 Marks)

c) What is the pattern of inheritance of this disease? (02 Marks)

497 Inam) (496[nam)

Question: (hypoglycens a) Write down indications and complications of dialysis. (2.5 Marks)

b) Enlist the Differences between hemodialysis & peritoneal dialysis. (2.5 Marks) 493

A 65 years old female with long standing diabetes mellitus and hypertension presented with three months history of numbness and loss of sensations of hands and feet. She often sleep with her shoes on and many times had trauma to feet without her notice and people pointed out that she is bleeding from her foot. She also complains of having diarrhea

Diabetic neuropathy (sometru)

Diabetic neuropathy Grastanic Paresis (Autonomic alternating with constipation and dizziness when attain erect posture after sitting for an hour or more. She is taking oral medications for her diabetes mellitus and hypertension and has variable control of both. a) What is the cause of her symptoms? Please elaborate concisely. (02 Marks) b) What treatment options she has? Discuss in detail. (03 Marks) A 45 years old female presented to you in OPD with 06 months history of excessive 6. 45014 weight gain, over sleepiness all the time despite 08-10 hours long night sleep and coarsening of skin and change in voice texture. a) What is the most likely diagnosis? (01 Mark) b) What investigations (with expected findings) would you advice? (1.5 Marks) c) What is the management of this patient? (1.5 Marks) (646Daniellor d) What instructions regarding follow up you will give? (01 Mark) Differentiate between rheumatoid arthritis and osteoarthritis in a tabulated form 7. especially in regards with the pathogenesis, clinical presentations, risk factors, treatment and complications. (05 Marks. 01 mark each for each section) A young female presented to you with anemia of few weeks duration. There is no history 8. of fever available. She took some Hakeem's medications for infertility. On her complete blood counts, her hemoglobin is 8.0 gm/dl, Total leucocyte count 2900/mm3 and platelet a) What is the most likely diagnosis? (01 Mark) count as 78000/mm3. b) How will you investigate this patient? (02 marks) 1968 Davidson Discuss the treatment options briefly. (02 Marks) A 70 years old female presented to the OPD with painful knee joints. Left knee is 9. affected slightly more than right. She is unable to walk for more than 10 meters without pain and support. First few steps after a period of rest are the most terrible, then gradually get slightly better. She is unable to climb stairs and sit on the ground. a) What is the likely diagnosis? (01 Mark) Ostcoarthritis (1007 Davidson b) Name four most important risk factors. (01 Marks)

c) What investigations you would advise? (01 Mark)

d) Briefly discuss the treatment options. (02 Marks)

obesity, menopause, trauma

523 (nam)