

MS-



THE SUPERIOR COLLEGE, LAHORE
FINAL PROFESSIONAL MBBS
SUPPLEMENTARY EXAMINATION 2018

MEDICINE-I

(SEQ'S)

2628

Roll No. 1425

Time Allowed: 2 hours

Total Marks: 45

Instructions

- 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

515
Dawood
(74 nam) ✓

1. A 14 year boy presents with a complaint of joint pain with swelling in the left elbow and then right knee over a period of 14 days. He also complains of dyspnea while playing. His pulse is 110/min, BP 110/80 mmHg, T 102°F, RR 18/min, JVP not raised. Auscultation reveals a soft mid-diastolic murmur at apex. ✓

a) What is the possible diagnosis? **RF** (01 Mark)

b) What criteria is used for diagnosis mentioning major manifestations? (02 Marks)

c) Enlist at least 3 management steps. (02 Marks)

2. A 54 year bank manager develops severe retrosternal chest pain with profuse sweating in cold winter early morning. O/E pulse 110/min BP 150/96 mmHg and S4. other examination is unremarkable. (159)

a) What are three the most likely diagnoses? **MI, unstable angina, Aortic dissection** (01 Mark)

b) What 3 investigations should be done immediately? (02 Marks)

c) Give at least four most important management steps. (02 Marks)

(61 nam)

3. A 23 year sales man who travels a lot presented with fever for last 1 week. Fever developed slowly but has not touched baseline since onset. O/E Pulse 95/min, Temperature 102°C. He has no herpes labialis. His lab results show WBC count of 4000/mm³. rest of the counts are normal.

a) What is the most likely diagnosis? → **Typhoid fever** (01 Mark)

b) List 4 complications of this illness, if untreated. (02 Marks)

c) Which drugs you will use?. Name 2 drugs. - ✓ (32) (01 Mark)

d) How you will treat a carrier of this disease? (01 Mark)

50mg 12hr
Ciprofloxacin
Cephalexin

↓
Ciprofloxacin for 14 weeks + (711 nam)
Cholelithotomy

1153
(635 Inam)

CNS

4. A 65 years old know diabetic and hypertensive female presented to medical emergency. Her son gave history of fall from the chair while she was sitting about 02 hours ago. Since then she was unable to move her left side of the body. She was also unable to talk, she tried to do so but was unsuccessful. Her blood pressure was 190/110 mmHg, pulse rate 84/min regular. motor weakness with power of 1/5 on left and 5/5 on right side. Her planters are up-going on left and equivocal on right side.

- a) What is the most likely diagnosis? → Stroke (50%) (01 Mark)
- b) Briefly describe motor and sensory aphasia/dysphasia. → motoric (02 Marks)
- c) Name 04 most important general nursing care principles you will advise for her? (1159) (02 Marks)

Motor
Expressive (Broca's)

5. A 70 years old male presented to the medical out-patient's department with the complaints of slowness in movements, tremors of hand and head, stiffness of upper limb and difficulty in walking and tend to fall if walk rapidly. He is unable to sign his pension cheques and people say his speech is also disturbed. He is not diabetic or hypertensive, he was a smoker but quit some 20 years ago.

- a) What is the most likely diagnosis? → Parkinson's disease (623) (01 Mark)
- b) Name 05 important physical signs to look for during examination (2.5 Marks)
- c) Name 04 medicines which may be prescribed to him. (1.5 Marks)

Receptor
Sensory and motor aphasia
Parkinson's disease
(600 Inam)

6. A 40 years old male presented to you in medical out-patients department with multiple non-specific complaints for last few months. He got his check-ups from general practitioners and found as non-diabetic and non-hypertensive. His screening test for Hepatitis C virus is positive.

- a) Which important specific & non-specific investigations you will advise to him? (444) (2.5 Marks)
- b) Name all the available treatment options in Pakistan. (258 Inam) (2.5 Marks)

Liver

7. A 29 years old female presented to you with complaints of vomiting with fresh blood in it. This is for last two days and she had four episodes. Last episode about an hour ago was the most severe one with almost a glassful of fresh blood came through vomiting. She was fine before this episode.

- a) Name 04 most important causes of blood in vomiting. → P-178 (02 marks)
- b) Name investigations for this patient, both specific, and general (but relevant). (1.5 Marks)

G.I.T

- c) Name the treatment steps you will take till the diagnosis is confirmed. (1.5 Marks)

(387) (178 Inam)

TB, Chronic Bronchitis
Chronic Bronchial asthma
Broncogenic CA

8. A 20 years old female presented to you in OPD with 02 months history of cough, sometimes productive of whitish scanty sputum but mostly dry, anorexia, slight weight loss, generalized weakness, feverish feeling and occasional night sweats. She had similar complaints about 8-9 months earlier for which she was investigated and prescribed medicines but she stopped treatment and never followed up. There is no record available.

- WMS
7.6
(355 Inam)
- Name 03 important possible causes of cough of this duration. (1.5 Marks)
 - Name investigations you will advise in this patient? (1.5 Marks)
 - How will you select an anti tussive medicine in a patient of cough? (02 Marks)

WMS
A 25 years male who is a heavy smoker, presented to you in medical emergency with severe breathlessness for one day. The problem started with upper respiratory tract infection and gradually progressed to present state where he is having severe air hunger, and whistling sounds with each breath. He also had similar attacks in the past requiring hospitalization every time, but this attack is severest according to his mother. On examination his blood pressure is 125/85mmHg, heart rate 106 /min regular, respiratory rate 32 breaths per minute. He is afebrile and very apprehensive. On chest examination there are diffuse rhonchi all over the lung fields.

- (328 Inam)
- What is the most likely diagnosis? (01 Marks)
 - What quick management steps you will take, enumerate. (02 Marks)
 - Name one serious complication. → Respiratory Failure (02 Marks)

(250)

(226)

Asthma

~~COPD~~