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UNIVERSITY OF LAHORE COLLEGE, LAHORE
FINAL PROFESSIONAL MBBS
SUPPLEMENTARY EXAMINATION 2019

MEDICINE-I

(SEQ'S)

Roll No. 14104

Time Allowed: 2 hours

Total Marks: 45/90

Instructions

1. The SEQ's part is to be submitted within 2 hours, Extra time will not be given.
2. Neat Hand Writing use of margin and marker for headlines will increase the presentation of your paper
3. Do not write your name or disclose your identity in anyway

90/100
25
15

CNS

13

CNS

CNS

CNS

1. A 50-year-old man is admitted via A & E with a history of a sudden onset of central chest pain of ripping character. On examination pulse is 110 bpm, blood pressure is 200/130 mmHg, heart sound are reported as normal. Oxygen saturations are 99% on room air. The ECG shows left ventricular hypertrophy. During the course of the clinical examination the patient reports increasingly severe pain, travelling through to back.

- a) Write 2 important differential diagnosis (1)
- b) How will you confirm your diagnosis? (1)
- c) Enlist management plan (1)

Aortic dissection, MI, Angina
(01 Mark)
(02 Marks)
(02 Marks) } 3

2. A 60 year old woman is admitted via ambulance to A & E. She is very dyspnoeic and unable to give a history. Medications found with her are as follows: furosemide 80 mg po od; bisoprolol 2.5 mg po od; warfarin; digoxin 0.125 mg po od. Her vitals are: temperature 98F°; pulse 130 bpm, irregularly irregular; blood pressure 160/100 mmHg; respiratory rate 40 breaths/min, O₂ saturations are 88% on 6 L/min O₂ through a rebreath mask. Examination reveals cool peripheries. Auscultation of the chest reveals widespread inspiratory crepitations; The following investigations are available: Arterial blood gases: pH 7.12; Po₂: 50mmHg (normal Po₂: >60); PCO₂: 35mmHg (normal 42 mmHg). Bicarbonate 16 meq/lit (Normal 24-28meq/l).

- a) Write down her complete diagnoses (1)
- b) Name 3 other important bedside investigations to confirm the diagnosis? (05)
- c) How you will manage her in ER? (1)

Cardiogenic pulmonary edema
(02 Marks)
(01 Mark)
(02 Marks) } 3

A 22 year old is brought in the medical emergency with severe persistent headache, projectile vomiting, high grade fever and pain in neck for last 02 days. Patient was fine before this 02 days illness. He has very low oral intake because of nausea and vomiting and takes oral sips of water only occasionally. On examination he is febrile with axillary temperature of 103 degree Fahrenheit, pulse 104/minute, BP-130/80mmHg. He is drowsy and communicates briefly. No papilledema or other cranial nerve deficits. There is pain on flexion of neck. His skin shows an erythematous maculopapular rash.

- a) What is your most likely diagnosis? (01 Mark)
- b) How will you investigate this patient? (02 Marks)
- c) Enlist the treatment steps for this patient. (02 Marks)

Meningitis
(01 Mark)
(02 Marks) } 3

P.T.C



IBD (UC, CD) IBS

(199 Inam)

A young male is suffering since last 2 months with complaint of bloody diarrhea accompanied by abdominal colic along with low grade fever. His clinical examination reveals clubbing, paler and deep tenderness over the left lower abdomen.

- a) Give three most likely possibilities of this clinical condition. (1.5 Marks)
- b) Enumerate four most important investigations for him. (02 Marks)
- c) Write down three most appropriate management options. (1.5 Marks)

A 27 year old is seen in asthma clinic, complaining of episodic shortness of breath, cough and wheeze.

- a) What further history will you take? (01 Marks)
- b) How will you investigate? (1.5 Marks)
- c) Describe the step-wise management of Asthma. (2.5 Marks)

A 45 years old male presented with acute confusional state for 8 hours. He is brought to the medical emergency by one of his sons. He is having pale complexion, distended abdomen with positive shifting dullness, leukonychia, clubbing, multiple spider angiomas and dupuytren's contractures bilaterally. His liver span is educed and flapping tremors are also present. The son gives history that patient is a regular alcohol consumer for last almost a decade.

- a) What is the most likely diagnosis? (01 Marks)
- b) Name specific clinical features to look for in such patients with similar etiology? (02 Marks)
- c) How will you treat this patient? (02 Marks)

A 72 year old presents with cough, sputum production and persistent shortness of breath. On examination, there is cyanosis, intercostals recessions and purse-lip breathing. Tracheal tug is present. Chest X-ray shows hyperinflated lung fields.

- a) What are the findings suggestive of COPD on Spirometry? (02 Marks)
- b) What are the differences between "Pink Puffer" and "Blue Bloater"? (02 Marks)
- c) Enumerate 4 complications of COPD. (01 Mark)

A 30 years old man presented to the medical emergency department with 02 days history of high grade fever. Fever is associated with severe headache, backache, pain in eye balls, nausea, vomiting, and extreme generalized weakness. He has a blood counts report showing hemoglobin 14.5 gm/dl, TLC 4000/mm³ and platelets 140,000/mm³.

- a) What is the most likely diagnosis? (01 Mark)
- b) Name 03 important differential diagnoses? (1.5 marks)
- c) Name 03 further investigations you will advise? (1.5 Marks)
- d) What 02 serious complications this patient may have? (01 Mark)

One 18 year old female is brought to the medical emergency department with acute generalized tonic-clonic fit. She is a known epileptic since childhood. She remained under treatment of many physicians but very poor in compliance for treatment.

- a) What immediate management steps you will take? Please enlist. (02 Marks)
- b) Enlist the management steps needed in this patient over next few weeks. (02 Marks)
- c) For how long you think this patient should take treatment without a break? (01 mark)

Handwritten notes on the left margin: (3), Lungs, 3.5, liver, 3.5, lungs, Rest, 2.5, Infection, 5, CNS, 2.5

Handwritten notes on the right margin: (328 Inam), (320 Inam), (727 Inam), (627 Inam), 0.5, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100