

THE SUPERIOR UNIVERSITY

5TH PROFESSIONAL MBBS ANNUAL EXAMINATION 2022 MEDICINE-II (SEO's)

> Roll No. _____ Total Marks: 45

Time Allowed: 2HOURS

Instructions

- 1. Attempt all questions.
- 2. All question carry equal marks.
- 3. The SEQ's part is to be submitted within 2 hours, Extra time will not be given.
- Neat Handwriting use of margin and marker for headlines will increase the presentation of your paper.
- 5. Do not write your name or disclose your identity in anyway.

Q.1 A 35-year-old female was hospitalized following delivery in a village by dai, who used some instruments during the delivery process. The patient was confused had 2 episodes of bleeding from gum. On examination, she had temperature 101 F and multiple bruising on legs and trunk.

 Hb
 6.7g/dl

 WBC
 19300/mm3

 PLT
 25000/mm3

 ESR
 80mm/hr

 Blood film
 polychromasia +++

 PT
 21 sec (control 13)

 APTT
 87sec (control 35)

- a) What is likely hematological diagnosis.
- b) Mention 3 investigations which would be diagnostically useful.
- c) Enumerate steps of treatment.

Q.2 A 50-year-old male presents with history of skin rash on dorsum of hands and back of chest. He has also noted difficulty in initiating the swallowing and rising from chair. There is no history of pain in knee joints. On examination, there is symmetrical proximal muscle weakness in limbs. His uric acid levels are normal.

- a) What is your diagnosis.
- b) Enlist four investigations in this patient.
- c) Give two potential complications of this disease.

3

2

2

Q3 young n	ale who but					
altered state	of consul-	ute diarrhoes for	3 days passing	8-10 stook/day	t proceed to	
pericardial r	ub was much	ate diarrhoes for s. BP on admission on auscultation	on was 70/50 m	mHg. Low volu	me thready o	remergency in
creatinine 4.8	mg/dl, urea 17	on auscultation on fing/dl, LFT, s ar	Investigations	showed Hb, I	3g/dl, WBC	s 12000/cmm,
a) What is the		ingui, LFI, s ar	e normal.			

the most likely diagnosis?

b) What other investigations will you order to confirm your diagnosis?

c) How will you manage this patient?

Q.4 A 45-year-old man is seen in emergency with leg swelling, pallor and lethargy. He has no past medical history to note. ECG shows tall, tented T waves. His laboratory results show

	raves. This laboratory results sl	Total Control of the
Na* K*	140 mmol /J	IOW .
Urea	6.7 mmol /I	
Creatinine	220 mol /1	
a) What is the diagno	4.3mmol/1	
b) How will you mana	i	
c) What are the compl	2	
Q.5A 65-year-old school	teacher presents	2

ol teacher presents with pain in lower back and nonspecific body aches. He has history of occasional urinary retention. No history of haematuria and pyuria. On examination he is emaciated, Pale looking, has marked bony tenderness, and Pedal edema Creatinine is 3.3 mg/dl. ESR 110

a) List diagnostically important investigations in this patient? b) Give four differential diagnoses?

Write down three steps of management.

Q.6 A 26-year-old lady is brought to the hospital by her husband because she has been smashing things at home and he thinks that she has "gone crazy". On interviewing the lady says that the husband has poisoned her and he is "the worst man ever". On examination you see numerous shallow cuts on the palmar surface of her wrists. Her husband complains that she always had abrupt mood swings

a) What is the most likely diagnosis? b) Discuss the differential diagnosis? How will you manage?

Q.7 A 40-year-old man presents to you with well-defined erythematous papules and plaques on extensor surfaces of his limbs & scalp for last 6 months. Fingernails reveal pitting &onycholysis. He complains of

pain & swelling in his knee joints. a) What is most likely diagnosis? b) Which sign will you elicit in this patient to confirm your diagnosis?

c) What are treatment options?

Q.8 A 60-year-old female presents with history of increasing lethargy, weakness, and forgetfulness for past 6 months, she thinks winters are extremely cold for past 2 years. She is constipated most of the times. On examination she has house voice, her skin is dry and rough, pulse 52 beats per minute, BP 160/90 mm Hg,

tendon reflexes show a delayed relaxation. a) What is the most likely diagnosis? b) How will you investigate this lady?

Q.9 A 58-year-old male who is known diabetic is brought in ER with altered state of consciousness for past e) How will you marage her? 3 hours. On examination his GCS is 9/15, pulse 110/bpm, BP 110/70 mm Haeberle. He appears dehydrated: his blood sugar was 550 mg/di. Urea 120 mg/di, Serum creatinine 1.8 mg/di Urinary Ketones was negative.

a) What is the diagnosis? b) How will you manage him? c) What complications can occur?