

**PG Degree Regular/Supplementary Examinations in Emergency
Medicine (MD) June 2024**

**Paper II – Infectious Disease, HIV and AIDS, CVS, GIT, Critical Care, Paediatrics,
Environmental Emergencies and Toxicology**

Time: 3 hrs

Max marks:100

- *Answer all questions to the point neatly and legibly • Do not leave any blank pages between answers • Indicate the question number correctly for the answer in the margin space*
- *Answer all parts of a single question together • Leave sufficient space between answers*
- *Draw table/diagrams/flow charts wherever necessary*

Essay:**(20)**

1. A 60 years old patient has presented to you in ED with acute onset chest pain one hour back. You are in charge there.
 - a) How detail history taking will help you in arriving at probable diagnosis.
 - b) Describe in detail about the investigations you will send
 - c) How will you manage such cases, where your set up is not capable for primary angioplasty.
 - d) Write about indications and contraindications of thrombolytic therapy
 - e) Enumerate immediate and long term complications of acute myocardial infarction. (2+4+6+6+2)

Short essays:**(8x10=80)**

2. Enumerate risk factors precipitating frostbite. How do you manage victims of frostbite in ED.
3. Describe febrile seizure. Evaluate causes, investigation and treatment of 6 years old child with generalised tonic clonic seizure. What advice will you give to the care givers of this patient.
4. Describe snake bite case presentation, evaluation and management
5. Describe in detail about ocular decontamination, gastric decontamination, bowel irrigation in cases of suspected poisoning.
6. Enumerate complications of falciparum malaria. Describe about clinical features and management of a case of algid malaria.
7. Describe in detail about non-invasive hemodynamic monitoring in critically ill patients in ICU. Describe in detail about RUSH protocol.
8. Diagnosis and management of suspected fat embolism in a trauma victim.
9. Describe causes and how to manage a case of acute diarrhoea with hypotension in ED and describe in detail about haemolytic uremic syndrome.
