



Part 1 Primary Examination in Critical Care Medicine 2016 -PAPER 1
College of Critical Care Medicine
(under auspices of Critical Care Education Foundation)
Examination Endorsed by the International Board of Medicine & Surgery (IBMS), USA

Instructions: Read the Instructions carefully

1. Read the questions carefully and thoroughly. Candidates are advised to include in their answer only information that is relevant to the question and to write legibly.
2. **Short Notes in Section A and B: Each question carries 5 marks only.**
 - a. You should not take more than 5 minutes per question in these sections.
 - b. Normally one side of a fool-scape paper provided is enough as long paragraphs are not expected.
3. **Questions in Section C and D: Each question carries 10 marks only.**
 - a. You should not take more than 10 minutes per question in these sections.
 - b. Normally 2 side of a fool-scape paper provided is enough as long paragraphs are not expected.
 - c. **Section C has extra question. Choose ANY 4 out of 5 Choices below.**
4. **Start all questions on a NEW Page**
5. It is not required to rewrite the question in your answer book. **CLEARLY write the ANSWER NUMBER** before your answer.
6. The questions in each section are worth equal marks.
7. Record your candidate ROLL number on top of each answer sheet paper (approx. 15 pages) in space provided.
8. Candidates fail or loose marks in a questions for one or more of the following reasons:
 - a. Insufficient knowledge of the topic in question.
 - b. Insufficient detail and/or depth of the answer.
 - c. Lack of specificity and precision in the answers
 - d. Poorly structured answer.
 - e. Failure to answer the question as asked.
 - f. Omission of all or part of the question.
9. The candidate has to demonstrate performance consistent with that of a competent senior registrar / junior consultant, i.e. demonstrate the ability for safe, effective, independent practice as an Intensivist.

GLOSSARY OF TERMS

- **Critically evaluate:** Evaluate the evidence available to support the hypothesis.
- **Outline:** Provide a summary of the important points.
- **List:** Provide a list.
- **Compare and contrast:** Provide a description of similarities and differences
(E.g. Table form).
- **Management:** Generic term that implies overall plan. Where appropriate, may include diagnosis as well as treatment.
- **Discuss:** Explain the underlying key principles. Where appropriate, this may include controversies and/or pros and cons



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SECTION A (5 marks each)	
Q. 1.	List complications of Acute Myocardial Infarction?
Q. 2.	A. What are ECG criteria for diagnosing multifocal atrial tachycardia (MAT)? B. List various antiarrhythmic drugs that can be used for treatment of MAT?
Q. 3.	A. Define “Abdominal Compartment Syndrome”? B. List various treatment options for this problem?
Q. 4.	List the indications for transfusing Fresh Frozen Plasma (FFP)?
Q. 5.	List complications of Parenteral Nutrition in critically ill patients.?

SECTION B (5 marks each)	
Q. 6.	List various factors which can cause secondary brain injury in a patient with traumatic brain injury?
Q. 7.	What are advantages and disadvantages of abdominal ultrasound in patients with severe multiple trauma?
Q. 8.	List the factors causing a Right shift of the ‘Oxygen dissociation Curve’ [factors increasing P50]?
Q. 9.	List possible echocardiographic findings in a patient with acute pulmonary embolism?
Q.10.	A. What is the treatment of choice for treatment of Pneumocystis carinii/ jiroveci (PCP) pneumonia ? B. What are the common side-effects with this treatment?

SECTION C: <u>ANSWER ANY 4 ONLY</u> (10 marks each).	
Q.11.	A. List the causes of Long QT syndrome? B. Outline the management of polymorphic VT in these patients?
Q.12.	A 65 yr known COPD patients comes with increased breathlessness. Comment on all possible reasons for his exacerbation?
Q.13.	Discuss the role of each of the following drugs (give example of each) in the treatment of acute coronary syndrome? [a] Antiplatelet agents, [b] Fibrinolytic agents and [c] Antithrombin agents
Q.14.	Comment on the role of following in management of patients with Acute Necrotizing Pancreatitis: [a] Prophylactic antibiotics, [b] Somatostatin/ Octreotide, and [c] Prophylactic antifungal therapy?
Q.15.	Enumerate various factors that can lead to weaning failure?

Please see backside for section D → → →



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SECTION D (10 marks)			
1	All the following cause prolongation of the activated Partial Thromboplastin Time (aPTT) that does not correct with a 1:1 mixture with pooled plasma EXCEPT? A. Lupus anticoagulant B. Factor viii inhibitor C. Heparin D. Factor VII inhibitor E. Factor IX inhibitor	6	An ECG shows a prolonged QT interval. Besides stopping the offending drug, the most appropriate management for this rhythm disturbance is IV administration of? A. Amiodarone B. Lidocaine C. Magnesium D. Metoprolol E. Potassium
2	Which of the following is not considered to be a secondary insult in brain injury patient? A. Hypoxia. B. Hypotension. C. Fever D. Hypothermia. E. Hyperglycemia.	7	All the following predict poor prognosis (1st 24 hrs) in acute pancreatitis EXCEPT A. Hematocrit > 44% B. Albumin <3.0 g/dl C. LDH >500 u/dl D. Lipase >600 u/l E. PO ₂ < 60 mmHg
3	What is the correct statement related to pressures in a normal adult heart? A. Left atrial pressure = 20 mmHg B. PA pressure = 45/30 mmHg C. LV pressure =120/80 mmHg D. RA pressure = 1-5 mmHg E. PCWP = 20 mmHg	8	Enzyme marker of malignant hyperthermia is? A. Serum CPK B. LDH C. SGOT D. SGPT E. Troponin-I
4	All of the following cause Hyperkalemia EXCEPT: A. Blood pH of 7.18 B. Incompatible blood transfusion C. Adrenal insufficiency D. Conn's syndrome (hyperaldosteronism) E. Faulty blood collection	9	Repolarization of the myocardial cells is determined mostly by which current? A. Outgoing sodium B. Ingoing calcium C. Outgoing potassium D. Ingoing chloride E. Ingoing sodium
5	Which of the following tests will be helpful in distinguishing a central neurological from a pulmonary cause of hypoventilation? A. Alveolar-arterial (A – a) oxygen gradient B. Diaphragmatic EMG C. Maximal expiratory pressure D. PaCO ₂ E. PaO ₂	10	Which one of the following indicates severe asthma? A. Pulsus paradoxus <20 mm Hg B. Pulsus paradoxus < 10 mm Hg C. Pulsus paradoxus > 20 mm Hg D. Pulsus paradoxus > 10 mm Hg E. Pulsus paradoxus < 30 mm Hg
<p>Recheck: (1) You have put your Roll number on each answer sheet. (2) Answer are Numbered correctly & written in appropriate section.</p>			



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SECTION D Answers:

MCQ 1	
MCQ 2	
MCQ 3	
MCQ 4	
MCQ 5	
MCQ 6	
MCQ 7	
MCQ 8	
MCQ 9	
MCQ 10	