



Part 2 Fellowship Examination in Critical Care Medicine 2014 -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 you 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.	Outline the medical management of 'type B' Aortic Dissection?
Q. 2.	List the indications for surgical therapy in patients with proved Bacterial Endocarditis?
Q. 3.	a) List common precipitants for acute decompensation in patients with chronic liver disease b) Outline the management of encephalopathy in such patients.
Q. 4.	Write a short note on Colonic Pseudo-obstruction (Ogilvie's syndrome) in an ICU patients.
Q. 5.	Classify Anaemia based on MCV value. <u>Give examples of each.</u>

SECTION B (5 marks each)	
Q. 6.	List the Criteria for the Clinical Clearance of Cervical spine in a conscious patient involved in a vehicular accident?
Q. 7.	List the causes and outline your management of a patient with severe rhabdomyolysis.
Q. 8.	List the findings on a plain Chest Xray that is highly suggestive of pulmonary embolism?
Q. 9.	List the Indications and contra-indications of non-invasive ventilation in the ICU patient.
Q.10.	Write a short note on "Sedation Scoring System" in Intensive Care Unit.

SECTION C (10 marks each. Answer any 4)	
Q.11.	a) What is 'Hepatorenal Syndrome'? b) List causes, mechanism, diagnosis and treatment of Hepatorenal Syndrome
Q.12.	Outline your approach to the management of rapid atrial fibrillation in the ICU patient.
Q.13.	a) List the causes, clinical presentation and 'specific Investigations' for <u>lower</u> GI bleed. b) Outline the management of <u>lower</u> GI bleed after initial stabilization of patient.
Q.14.	Outline the BRUGADA's criteria (Algorithm) for differentiating Ventricular Tachycardia from an SVT on ECG?
Q.15.	Outline the principles of management of a patient with life threatening haemoptysis.

SECTION D (10 marks)	
Q.16.	Outline the approach to management of a patient admitted from home with BP 80/60 mmHg?

Recheck: (1) You have put your Roll number on each answer sheet.

(2) Answer Numbers are correctly written in appropriate section.