

Part 2 Fellowship Examination in Critical Care Medicine 2016 -PAPER 2 College of Critical Care Medicine

(under auspices of Critical Care Education Foundation)

Examination Endorsed by the International Board of Medicine & Surgery (IBMS), USA

	SECTION A (5 marks each)		
Q. 1.	A 68 yr lady presents with unconsciousness following a massive cerebral stroke. She is advised decompressive craniectomy.A. List the complications of decompressive craniectomy?B. Comment briefly on the outcome from decompressive craniectomy?		
Q. 2.	A young man with insulin dependent diabetes mellitus (IDDM) is admitted with hypotension (80/40 mmHg) and hypoglycemia (35 mg/dL). He is drowsy. His diabetes was well controlled until 2 weeks back when he was admitted for 3 days with diabetic ketoacidosis (DKA). List 4 likely causes of hypoglycemia in this patient?		
Q. 3.	A 68-year male is brought with altered sensorium and facial palsy. He was alright 2 hours back. CT scan shows right MCA infarct. BP is 200/120 mmHg. Discuss the management options (as per current guidelines) for first 24 hours if yours is a specialist neurology Centre.		
Q. 4.	List the major electrolyte (if relevant/ characteristic, then glucose and acid-base also) abnormalities that are usually associated with the following conditions: A. Adrenal insufficiency? B. Refeeding syndrome? C. Tumor lysis syndrome? D. Ethylene glycol toxicity?		
Q. 5.	A 58-year-old patient was admitted to the ICU following a difficult parathyroidectomy. No immediate airway problems were evident. About 24 hours later, the patient complained of difficulty in breathing with generalized aches and pains. ECG shows prolonged QTc interval.A. What is the likely explanation for the patient's symptoms?B. List your specific management for this problem?		

SECTION B (5 marks each)		
Q. 6.	List the possible complications of hypertonic saline administration in clinical practice?	
Q. 7.	Critically evaluate the role of Procalcitonin (PCT) as a biomarker in the diagnosis and management of sepsis?	
Q. 8.	 A 50-year lady is transferred to your hospital from nearby nursing home for resistant hypertension and chest pain. Upon arrival to Emergency dept., her BP drops to 60/30 mmHg needing CPR. By the time you assess the patient in ICU she is pale, diaphoretic, tremulous with a pulse of 130/min and a BP 300/120 mmHg. No medications have been administered to account for the hypertension. A similar episode had occurred the previous day in nursing home. A. What is the most likely diagnosis? B. List 5 treatment measures for management of the hemodynamic instability associated with this condition? 	



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Q. 9.	Outline the pathophysiology and management of Ovarian Hyperstimulation Syndrome (OHSS)?
Q.10.	 A 32-year female is admitted to the ICU post operatively with fecal peritonitis following multiple bowel perforations. Majority of her small bowel has been resected and she is advised total parenteral nutrition (TPN). A. List the available methods to estimate total energy expenditure. B. If her basal energy expenditure is 2000 kcal/day and she weighs 50 kg. Describe how you would prescribe her TPN in terms of Proteins, Carbohydrates and Lipids (using 20% amino acid, 20% Lipid and 50% Dextrose solution)?

SECTION C (10 marks each). ** <u>Answer any 4**</u>		
Q.11.	A. List the causes and features of rhabdomyolysis?	
	B. Outline the principles of management?	
Q.12.	Comment on the various possible uses of IV albumin in the management of the critically ill patient?	
Q.13.	A. Compare the clinical presentation of Guillain Barre Syndrome and Myasthenia Gravis?B. Outline in short the specific treatment strategies for patients with generalized Myasthenia Gravis?	
Q.14.	 A 58 year diabetic presents with 1 week of fever, headache, confusion, facial nerve palsy with pain and a black, purulent nasal discharge. He is referred to ICU for his deteriorating level of consciousness. A. Give the most likely diagnosis? B. List <u>4</u> predisposing factors. C. List the specific management of this condition 	
Q.15.	Briefly outline the problems specific to ICU management of an asthmatic patient who is pregnant?	

SECTION D (10 marks)		
Q.16.	In relation to therapeutic plasmapheresis:	
	A. Describe the principles involved?	
	B. What are the prerequisites for plasmapheresis to be effective?	
	C. Give six indications for its use.	
	D. List 3 types of potential complications associated with this therapy (giving 1 example of	
	each)?	

Recheck: (1) You must put your Roll number on each answer sheet. (2) Answer Numbers are correctly written in appropriate section.