1. A mother brings her 16 month old son who has not started walking yet. His weight is 9 kg and on examination he has wide wrist joints with open anterior fontanelle.

- What is the most likely diagnosis?
- What further points would you explore in the history?
- Briefly outline your management plan.

2. A 40 year old gentleman presented with a report showing Hepatitis B surface antigen positive done 15 days ago. He is otherwise asymptomatic.

- What are the risk factors that need to be assessed?
- What further investigations are required in this patient?
- How will you manage this patient if the ordered investigations come out to be normal?

3. A 55 year old diabetic lady presents with post menopausal bleeding for a month. She had menopause at the age of 50 years. She has 2 children. On examination she is a healthy looking obese lady. Her abdominal and pelvic examination is normal.

- What further in history needs to be elaborated?
- What are the most likely differentials?
- Outline the relevant investigations and management plan.
Q. 4 A 26 year old gentleman presents with fever, cough and breathlessness for 1 week. He has no known comorbid. On examination temperature is 39°C and respiratory rate is 23/min. Chest examination reveals crepitations in right mid zone.

a) What further points would you like to explore on history?
b) What investigations should be ordered in this patient?
c) Write 5 points in the management plan.

Q. 5 A 46 year old house wife, with known history of asthma attends with the complaint of gaining weight, puffiness of face and high blood pressure for last 2 months. Her asthma control is much better since the start of some hakim treatment for last 2 months. Her BP is 170/95 mm Hg, and her HR is 72/88 mm Hg, and her RR is 15/50 mm Hg. Her recent blood work showed Normal urine DR, CBC, urea, creatinine, fasting glucose is 130 mg/dl.

a) What is the most likely diagnosis?
b) What is the most likely cause for it?
c) List 6 relevant questions in the history which will further this diagnosis.
d) List 6 important features in examination that you must note in this case.
e) What would you do to investigate this patient?
Q.6 A 45 year old gentleman presents with a history of headache since 3 weeks. His past history reveals a migraine headache since 20 years and a fall 3 weeks ago.

a) What further questions will you explore in the history?
b) List 3 most likely differentials.
c) Outline your management plan.

Q.7 A 45 year old obese lady with no previous comorbid presents for review of reports. On examination her BMI was 28 with waist circumference of 95 cm and BP 150/90 mmHg. Systemic examination is unremarkable. Lab investigations showed LDL-160, HDL-38, Triglycerides-250, FBS-140.

a) What is the most probable diagnosis?
b) What are the abnormal parameters seen in this patient according to the ATP-3 and 4 guidelines?
c) List at least 5 points with regards to management of this patient.

Q.8 A 2 year old boy has been having bloody diarrhoea and fever since 2 days.

a) What questions will you ask from the mother?
b) List at least 4 points on examination.
c) Outline at least 4 points in management.
Q.9 A 25 year old gentleman presented with history of sneezing, rhinorrhea and frequent throat clearing on and off for past 3-4 months. He has exacerbation of these symptoms with seasonal variation.

a) What is the most probable diagnosis?
b) List 4 points on examination with likely findings pertinent to the diagnosis?
c) Outline your management plan in 5 points.

Q.10 A 54 year old airline pilot presents with the complaint of sudden loss of vision in the left eye. He describes it as a ‘curtain coming down’ in front of his eye. It lasted for approximately a minute or two.

a) What is your diagnosis?
b) What are the risk factors for this condition?
c) What investigations will you do in this patient?
d) Outline your management plan?
(subject: same)

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Q. 14 Your next patient is a 34 year old sewing machinist at a garment factory. She bursts into tears as soon as she sits down and says that she cannot cope with life any longer.

a) What further points would you like to explore in the history?

b) What will be your management plan at this stage?

Q. 15 A 70 year old lady presents with unilateral vesicular, painful rash on her chest.

a) What question will you ask in the history?

b) What is your diagnosis?

c) Outline your management plan.

d) Outline your management plan.

Q. 16 A 60 year old man presents with 2 weeks history of increased urinary stream.

a) What is the most likely diagnosis?

b) List 3 investigations.

c) List 5 steps of management.

Q. 17 A 25 year labourer presents with complaint of severe pain in the right iliac fossa since morning. There is associated nausea and vomiting.

a) What further questions will you ask in the history?

b) What are your 3 main differentials?

c) Outline your management plan.
Q.18 A female patient of yours with advanced osteoarthritis of both knees has been advised bilateral knee replacement. She has refused to have surgery. She is able to walk and do all her activities with a walking stick. Her daughter asks you to tell your patient to have the surgery as it is necessary to save her life.

a) What are the ethical issues here?
b) What will you tell your patient's daughter?

Q.19 A 6 year old child was brought by her mother with the complaint of bed wetting mostly at night.

a) What further points on history need to be explored?
b) What are the relevant investigations required in this child?
c) Outline the management options.

Q.20 A 24 year old office worker presents to your clinic with the complaints of fever, ranging from 38°C - 41°C since a week. He states that he shivers at the onset of fever which then comes down to normal with a great deal of sweating after every 2 days.

a) What is your provisional diagnosis?
b) List 3 investigations that you will request for the diagnosis of the above patient.
c) What specific pharmacological treatment will you offer him?
d) List the symptomatic treatment that you will offer him.

The End