

National Board of Examinations

Question Paper Name :	Diploma Family Medicine Paper1
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Diploma Family Medicine Paper1

Group Number :	1
Group Id :	3271872646
Group Maximum Duration :	0
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Show Attended Group? :	No
Edit Attended Group? :	No
Group Marks :	100
Is this Group for Examiner? :	No
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Diploma Family Medicine Paper1

Section Id :	3271872649
Section Number :	1
Section type :	Offline

Mandatory or Optional :	Mandatory
Number of Questions to be attempted :	10
Section Marks :	100
Enable Mark as Answered Mark for Review and Clear Response :	Yes
Maximum Instruction Time :	0
Sub-Section Number :	1
Sub-Section Id :	3271872653
Question Shuffling Allowed :	No
Is Section Default? :	null

Question Number : 1 Question Id : 32718727164 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mrs. V, 75-year-old, presents with history of fall at home, twice in the past 2 weeks. She is on treatment for diabetes and hypertension since 20 years. She is also on treatment for her knee pain and insomnia.

a) Enumerate the common physiologic and iatrogenic causes that increases the risk of falls in elderly. [3]

b) Describe the focused clinical examination and specific clinical assessment tests for patients presenting with falls. [4]

c) What are the non-therapeutic and therapeutic interventions to prevent falls in elderly? [3]

Question Number : 2 Question Id : 32718727165 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mr. M, 30-year-old, presents with evening headaches and work stress since 3 months. His blood pressure last week was 160/94 mmHg. Your clinic recording is also the same repeated twice at an interval of 15 minutes.

a) Justify the investigations you will order in this patient. [4]

- b) Elaborate on nonpharmacological interventions for essential hypertension. [3]
- c) Pharmacological management of essential hypertension as per latest JNC guidelines. [3]

Question Number : 3 Question Id : 32718727166 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mr. F, 50-year-old, had a fall from his bike and knee pain and you prescribe him a pain killer. He returns the next day after consuming the pain killer with itching and swelling of his face and eye lids. On examination, he appears diaphoretic, his pulse rate 110/min and blood pressure 92/50 mmHg with generalized wheals, lip swelling, and bilateral wheeze on auscultation of lungs.

- a) What is the diagnosis? [2]
- b) What are the pathophysiologic changes that cause this sudden compromise in this diagnosis? [4]
- c) What is the life saving treatment you will administer immediately? [2]
- d) How would you prevent a future episode? [2]

Question Number : 4 Question Id : 32718727167 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Miss S, 19-year-old college student, presents with weight loss of 6 kg over the past 6 months with lethargy. She currently weighs 48 kg and her height is 168 centimetres.

- a) What are the red flags for weight loss in history and examination? [3]
- b) Enumerate the common causes of weight loss. [4]
- c) Justify the first line investigations to be ordered in a patient with significant weight loss. [3]

Question Number : 5 Question Id : 32718727168 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mr. A, 70-year-old presents with inability to move his right upper and lower limb since 5 days with

speech disturbance.

- a) What is the most likely diagnosis and differential diagnoses? [2]
- b) What are the risk factors for cerebrovascular event? [2]
- c) What are the immediate and late complications of cerebrovascular event and their management? [6]

Question Number : 6 Question Id : 32718727169 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mrs. K, 38-year-old school teacher, presents with wheeze, not settling with her usual blue (salbutamol) inhaler that she has been using the last 5 years.

- a) What are the key points in history and examination for assessing control in asthma? [3]
- b) Explain stepwise management of asthma. [4]
- c) What are the clinical features of acute severe asthma and life-threatening asthma? [3]

Question Number : 7 Question Id : 32718727170 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mr. J, 45-year-old, presents with history of decreased urination over past 3 days following an episode of vomiting and diarrhoea. His blood investigations reports serum creatinine as 2.01 mg/dl. He is on treatment for diabetes and hypertension and knee pain.

- a) Enumerate the causes of acute renal failure. [4]
- b) What are the complications of acute renal failure? [2]
- c) What other investigations are needed to manage this patient? [2]
- d) What are the drugs to be withheld and used with caution in a case of pre-renal failure? [2]

Question Number : 8 Question Id : 32718727171 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mrs. C, 35 year-old house wife, presents with inability to socialize since the last 3 months. She senses her chest is pounding and feels breathless on entering a marriage hall and feels nauseated. She also complains of not able relax at night and says she is always worried about her young children who are otherwise healthy.

- a) What are the differential diagnoses in this person? [3]
- b) What clinical examination and investigation will you order in this patient? [3]
- c) What are the non therapeutic and therapeutic options in her management? [4]

Question Number : 9 Question Id : 32718727172 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mr. N, 79-year-old retired bank officer, presents with progressive dyspnea over the past 1 year. Currently, he is able to climb one flight of stairs and has no symptoms at rest and on lying down. He had smoked cigarettes since 30 years and has stopped recently. He is on Tablet Atenolol 50 mg once daily for the past 25 years.

- a) Write the stages of heart failure based on limitation of physical activity. [2]
- b) How would you manage a patient with heart failure? [5]
- c) Explain in brief about cardiac rehabilitation in a patient with heart failure. [3]

Question Number : 10 Question Id : 32718727173 Question Type : SUBJECTIVE Consider As Subjective : Yes Calculator : None Response Time : N.A Think Time : N.A Minimum Instruction Time : 0

Correct Marks : 10

Mr. E, 44-year-old, presents with pink, dry, scaly lesions over the extensor aspect of his forearms and anterior aspect of his legs since 7 years. He also complains of intermittent scaling from his scalp.

- a) What is the most probable diagnosis and common differentials? [2]
- b) How would you manage a patient with psoriasis? [5]
- c) How would you help him manage the psychosocial issues associated with such obvious skin lesions? [3]