

Fellowship Practice Exam

June 2016 - Book 3

WRITTEN EXAMINATION SHORT ANSWER QUESTIONS

EXAMINATION TIME: 3 HOURS - 1 hour per booklet

Directions to Candidates

This booklet is one of three. It contains 9 questions. Allow 9 minutes for 3 page questions (20 and 27), and 6 minutes for 2 page questions (21 - 26). The entire booklet should take you 1 hour to complete.

- 1. Answer each question in the space provided in this question paper.
- 2. Do not write your name on this question paper.
- 3. Write your candidate number **on each page** in the space provided.
- 4. Cross out any errors completely.
- 5. Do not begin the exam until instructed to do so.
- 6. No examination papers or materials to leave the room.
- 7. Props are provided in a separate booklet.

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Candidate number	Candidate	number	
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Question 19 (19 marks) 9 minutes

A 71 year old man presents with a 2 hour history of severe chest pain radiating through to his back. He has a past history of hypertension.

His observations:

BP	200/100	mmHg
PR	85	/min
RR	16	/min
Temp	36.5	°C
GCS	15	

A CT Aorta is shown in the PROPS booklet; page 9.

	i)	List five (5) abnormal findings shown in this CT. (5 marks)
1		
1.		
2.		
3.		
4.		

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Question 19 (continued)

ii) List three (3) medications that you may use in the treatment of this condition. Provide one (1) justification for each choice. (6 marks)

	Medication (3 marks)	Justification (3 marks)
1.		
2.		
3.		

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Question 19 (continued)

	iii) State your choice of optimal definitive treatment for this patient. (1 mark)
	iv) List two (2) justifications for your choice of definitive treatment. (2 marks)
1.	
2.	
	v) List five (5) factors that may lead you to not choose this optimal definitive treatment. (5 marks)
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2.	
3.	
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Question 20 (15 marks) 6 minutes

Your Emergency department has recently performed poorly in a patient satisfaction survey.

1. Name the four	(4) steps in	the quality im	provement cycle	(4 marks)
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1.	

3.	_	
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2. Name three (3) quality standards and give one (1) example of how you would measure compliance of each. (6 marks)

	Quality standard	Compliance measurement method
1		
2		
3		
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Qı	uestion 20 (continued)
3.	List one (1) initiative that you could take to improve patient experience in your department.(1 mark)
4.	List your four (4) steps in the quality cycle for implementing the above initiative. (4 marks)
1	
2	
3	

4

Question 21 (15 marks) 6 minutes

A nasogastric tube is being placed in the Emergency department.

1. Complete the table below in regards to four (4) indications for placement of a nasogastric tube in the Emergency department . (8 marks)

	Indication	Purpose/aim of procedure
1		
2		
1.7		
4		

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Question 21 (continued)

	List three (3) methods that are used for confirming the correct position of the tube marks)
1.	
2.	
3.	
3. I	List four (4) complications of nasogastric tube placement (4 marks)
1.	
2.	
3.	
4.	

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Question 22 (16 marks) 6 minutes

A 2 yo boy presents after an acute choking episode. He had a brief episode of coughing and appeared blue at home. He now has an ongoing intermittent cough.

His observations are within normal limits and appears well.

His Chest X ray is showi	ı in	Props	booklet	;Page	10
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1. What is the diagnosis and which side is affected? (2 marks)	
2. List four (4) radiological findings that support your diagnosis (4 marks)	
1	
2	
3	
4	

Question 22 (continued)

The child becomes suddenly distressed and is markedly short of breath
3.List six (6) steps that you would take to reduce his distress whilst in the Emergency department. (6 marks)
l
2.
3.
l
5.
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4. List four (4) indications for urgent definitive treatment for this child. (4 marks)
l
2.
3.

Ques	stion 23 (10	6 marks)	6 m	ninutes							
A 41	year old wo	oman with	PM	IH: soc	ial smok	ing,p	reviou	s DV	T, rece	nt	
chole	cystectomy	(3 weeks	prio	or) ; pre	esents wi	ith 2	day his	story o	of pleu	ritic ch	est pain,
coug	h, and dysp	nea. Her v	ital	signs o	n arrival	l are:					
HR BP	90 115/75	bpm mmHg					RA /min	;	Тетр	37.6	°C
1. Yo	nistory and ou u decide sh aging? Stat	e needs a	defii	nitive i	maging 1	o rul	e out P	E. W		_	
assoc Her r HR BP	hile waiting tiated dizzir new Vitals a 130 80/60	ness. .re: bpm mmHg	· , , , ,	Sats RR	8	36% 35		RA /min	;	Тетр	B with
	List six (6					lenini	uve iii	aging	? (0 m	arks)	
2											
3											
4											
5											
6											

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Candidate number _ Question 23 (continued)	
b) If these criteria are not met, how will you definitively diagnose PE? (2	marks)
	_
	_
	_
	_
4. She is stabilised with the above management and imaging is gained which he diagnosis of pulmonary embolism. The ED Registrar assisting you asks whether the patient should be thromboly six (6) main factors that will influence this decision. (6 marks)	
•	
2	
3	

Question 24 (16 marks) 6 minutes

A 68 year old lady presents with 3 days of fever, cough and dyspnoea.

Her CXR is shown in PROPS booklet;Page 11

1) List	three (3) abnormal findings on her CXR (3 marks)
1	
2	
3	
	at is your diagnosis? (1 mark)
	six (6) positive criteria predicting the need to consider ICU referral (6 marks)
1	
2	
3	
4	
5	
6	

Question 24 (continued)

4) She requires ICU admission. state her antimicrobial treatment as per your local practice below, including organisms(s) treated. She has no allergies (6 marks)

	Medication	Dose,Route,frequency	Organism
1			
2			

Question 25 (18 marks) 6 minutes

A 75 year old man presents with abdominal pain for the preceding 48 hours. He has a history of NIDDM, and Congestive cardiac failure.

A Photo of his abdomen is shown in PROPS booklet ;page 12.

1. List two (2)) differential diagnosis for this patient.(2 marks)
1	
2. List three (3) features on history and three (3) features of examination that will patient's management (6 marks)
History	
1.	
2.	
3.	
Examination	· _
1.	
2.	
3.	

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Question 25 (continued)

3. List five (5) management priorities for this patient and provide one (1) detail for each. (10 marks)

	Management Priority	Detail
1		
2		
3		
4		
5		

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nfant in your resuscitation room after ble and is being managed by your
rt rate is 120 and BP 75/35. There is
evelopment of Post partum
ent steps to control the post partum

Question 26 (16 marks) 6 minutes

A 35-year-old woman has just delivered a term in presenting with imminent labour. The child is sta Paediatric registrar.

The mother is pale and semi-responsive. Her hear ongoing significant per vaginal bleeding.

	List in escalating order, five (5) management steps to control the post par
2.	
2.	List, in escalating order, five (5) management steps to control the post par
2.	List, in escalating order, five (5) management steps to control the post par haemorrhage. (5 marks)
2.	List, in escalating order, five (5) management steps to control the post par haemorrhage. (5 marks)
2.	List, in escalating order, five (5) management steps to control the post par haemorrhage. (5 marks)
2.	List, in escalating order, five (5) management steps to control the post par haemorrhage. (5 marks)

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Question 26 (continued)

As part of your management of the patient	, you activate the massiv	ve transfusion
protocol.		

3. List the key components of a Massive transfusion protocol , including appropriate ratios of blood products (6 marks)		

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Question 27 (21 marks) 9 minutes

A 48 year old man is brought to the Emergency Department with dyspnoea and a feeling of chest pressure. **His ECG is shown in PROPS booklet ;page 13.**

	1) What is the diagnosis? (1 mark)	
	2) Justify your diagnosis by listing 3 positive findings on the ECG. (3 r	marks)
1		
_		
2		
_		
3		

Question 27 (continued)

3) List two (2) differential diagnose and give one (1) justification why these are less likely than your provisional diagnosis. (4 marks)

Differential	Justification
	Differential

4) List five (5) points of history that you would seek to assist in the management of this patient (5 marks)

1. _____

2. _____

3. _____

4. _____

5. _____

Question 27 (continued)

5) List four (4) examination findings that are relevant to this presentation that would have a bearing on the patient's management (8 marks)

	Examination finding (4 marks)	Affect on management (4 marks)
1		
2		
3		
4		