

**Time: Three Hours****Max. Marks: 100****INTERNAL MEDICINE – PAPER – I (RS-4)****QP CODE: 1037****(QP Contains Two Pages)**

Your answers should be specific to the questions asked  
Draw neat, labeled diagrams wherever necessary

**LONG ESSAYS****2 x 10 = 20 Marks**

1. A 56-year-old gentleman, known case of hypertension and diabetes presented with history of exertional breathlessness since 1 month. On examination, jugular venous pulse was raised, there was bilateral pitting pedal edema and tender hepatomegaly. No history of asthma and COPD
  - a. Discuss the probable diagnosis
  - b. Describe the clinical features and outline the main pillars of pharmacological therapy in these patients.
2. Define Cirrhosis of Liver. Discuss the etiology, clinical features and complications of Cirrhosis of Liver

**SHORT ESSAYS****8 x 5 = 40 Marks**

3. A 65-year-old gentleman, known diabetic on treatment came with history of burning sensation of both upper limb and lower limb with decreased light touch sensation and loss of ankle reflexes. On investigations his fasting blood sugars were 200mg/dl and HbA1c was 10. Mention the possible diagnosis.
  - Describe the acute and chronic complications of diabetes mellitus
4. Discuss the Extra articular manifestations of Rheumatoid Arthritis
5. Write a note on Clinical features and management of Hypothyroidism
6. Write a note on Clinical features and management of organophosphorous poisoning
7. Define Acute coronary syndrome. Mention the classification of Acute coronary syndrome
8. Describe the mechanism of action, types and adverse effects of drugs used in management of Dyslipidemia.
9. Define Obesity and mention the measures of obesity
10. Discuss medico-legal and ethical issues aspects of assisted dying

**SHORT ANSWERS****10 x 3 = 30 Marks**

11. Define hypertensive Emergency and Urgency
12. Enumerate causes of Chronic Diarrhea.
13. Enumerate the adverse effects of SGLT2 Inhibitors.
14. Describe clinical features of BERE BERE
15. Enumerate the treatment of hepatic encephalopathy.
16. Describe clinical features of envenoming by VIPERIDAE
17. Enumerate the complications of ST SEGMENT ELEVATION MYOCARDIAL INFARCTION
18. Enlist the etiologies of Atrial Fibrillation
19. Describe the physiological mechanisms which prevent gastro-esophageal reflux.
20. Enumerate the treatment of Irritable bowel syndrome.

**Multiple Choice Questions****10 x 1 = 10 Marks**

- 21 i) A 35-year-old man presented with palpitations and easy fatigability. After evaluation in the emergency ward, he was given injection Adenosine and he responded for **the same**. Of these, which arrhythmia is most likely the one for which he received the treatment
  - A. Ventricular tachycardia
  - B. A V blocks
  - C. Supra ventricular tachycardia
  - D. Ventricular Fibrillation

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- 21 ii) Which among the following is not a feature of Tetralogy of Fallot?
- Pulmonary Stenosis
  - Ventricular septal defect
  - Right Ventricular hypertrophy
  - Aortic Stenosis
- 21 iii) 35 year old lady presented to OPD with complaints of weight loss, diarrhea and dyspepsia. Blood investigations revealed iron deficiency anemia. Endoscopy done showed villous atrophy over duodenal and jejunal mucosa. What is the probable diagnosis?
- Coeliac disease
  - Duodenal ulcer
  - Gastric carcinoma
  - Protein losing enteropathy
- 21 iv) Name the antidote used in benzodiazepine poisoning
- Naloxone
  - Atropine
  - Sodium thiosulphate
  - Flumazenil
- 21 v) A known case of rheumatic heart disease complains of fever for 30 days. On examination, she had tachycardia pallor and grade 2 clubbing and had a pan-systolic murmur at the apex. What could be the likely diagnosis?
- Acute Myocardial infarction.
  - Infective endocarditis
  - Acute Pericarditis
  - Dissection of Aorta
- 22 i) 40 year old male came to medicine OPD for general health checkup and was found to be hypertensive. On further evaluation he was found to have B/L renal artery stenosis. Which antihypertensive should be avoided in above case?
- Nifedipine
  - Enalapril
  - Furosemide
  - Metoprolol
- 22 ii) A male patient with tall stature, lean habitus small testes, gynecomastia and azoospermia was being evaluated for a cardiovascular disease. With the above signs a karyotyping was also done what is the most likely karyotype in this patient.
- 45 X0
  - 47 XXY
  - 45 XXY
  - 47 X0
- 22 iii) A 36 year old male patient was being evaluated for weakness of limbs and was diagnosed to have Pure motor Neuropathy. Which among the following heavy metal poisoning can result in motor neuropathy
- Lead
  - Aluminum
  - Arsenic
  - Cadmium
- 22 iv) A 60-year-old female hypertensive was evaluated and found to have grade 1 hypertensive retinopathy changes. Which retinal change is suggestive of the above?
- Macular edema
  - Vitreohaemorrhages
  - Silver wiring
  - Cotton wool exudates
- 22 v) A 30 year old male with no prior comorbidities presented with complaints of recurrent headache, palpitations and sweating. On examination he was found to have high BP recordings. Further investigations revealed high urinary metanephrines. What is the likely diagnosis?
- Phaeochromocytoma
  - Congenital adrenal hyperplasia
  - Primary hyperaldosteronism
  - Cushing's Syndrome

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