#### D.M. – CRITICAL CARE MEDICINE

# Paper II – CORE CRITICAL CARE MEDICINE, TRAUMA, ORGANISATION

Q.P.Code: 161482

Time: Three Hours Maximum: 100 Marks

I. Elaborate on:  $(2 \times 15 = 30)$ 

1. A 35 years old woman was extricated from a closed room on fire. She has been brought to the emergency room with approximately 30% burns. As a physician in the emergency room, how would you go about managing this patient for the next 24 hours? What is the role of albumin in resuscitating a burns victim?

2. What are the emergencies related to tropics (focusing on the Indian subcontinent) admitted to your ICU? Discuss the salient points in managing them.

II. Write notes on:  $(10 \times 7 = 70)$ 

- 1. How would you go about a establishing a protocol for blood sugar control in your ICU?
- 2. What is permissive hypotension in trauma? Discuss the indications and contraindications for permissive hypotension.
- 3. Discuss briefly "Macrophage Activation" syndrome.
- 4. What is concealed haemorrhage in trauma? How would you manage a patient with pelvic fracture with hemodynamic instability?
- 5. How best would you establish antibiotic stewardship in your ICU?
- 6. Discuss briefly about management of diarrhea in a critically ill patient.
- 7. Discuss the use of medium chain and long chain triglycerides in total parenteral nutrition?
- 8. What are the common quality indicators in ICU? Describe in detail one of them.
- 9. What are the differential diagnoses for acute severe asthma? What are the options available for management of refractory asthma?
- 10. Discuss causes of rhabdomyolysis in a critically ill patient. Briefly discuss the treatment and current evidence for rhabdomyolysis.

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Q.P. Code: 161482

Time: Three Hours Maximum: 100 Marks

I. Elaborate on:  $(2 \times 15 = 30)$ 

1. A 35 year old has been brought with fever for one week, jaundice, decreased urine output and skin rashes. Describe the differential diagnosis, relevant clinical exams and lab tests which are needed and possible clinical course over the next 48 hours.

2. Describe the management of persistent diarrhea following prolonged ICU care.

II. Write notes on:  $(10 \times 7 = 70)$ 

- 1. Describe the fluid/intra-vascular volume status (non-invasive) assessment practices in your ICU.
- 2. Describe the difficult airway practices in your ICU.
- 3. Describe the steps which can be taken to reduce the incidence of ICU delirium?
- 4. Describe the relevant clinical examination in a patient who develops fever in the third week of ICU stay?
- 5. Describe the quality indicators in Indian ICU's which should be tracked as suggested by the ISCCM (Indian Society of Critical Care Medicine).
- 6. Describe your clinical examination in a patient with poly trauma who is hypotensive.
- 7. Discuss the utility of an extended evaluation and assessment for extubation in routine ICU patients.
- 8. Discuss causes of poor hand-hygiene compliance in Indian ICU's.
- 9. Compare and contrast continuous and intermittent gastric feeding in ICU.
- 10. Describe the principles of appropriate medical management of head injury in the ICU.

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### (LQ 482)

### **D.M. – CRITICAL CARE MEDICINE** Paper II - CORE CRITICAL CARE MEDICINE, TRAUMA, **ORGANISATION**

**Sub. Code: 1482** 

Q.P. Code: 161482

**Time: Three Hours** Maximum: 100 Marks

I. Elaborate on:  $(2 \times 15 = 30)$ 

1. Neuroprotective strategies in the setting of brain injury.

2. List the different strategies that can be used for lung recruitment. Describe the merits and problems associated with proning for severe ARDS and evidence for its use.

II. Write notes on:  $(10 \times 7 = 70)$ 

- 1. qSOFA.
- 2. Stress related mucosal disease.
- 3. Prevention of contrast induced nephropathy.
- 4. Nutritional support in patients with acute pancreatitis.
- 5. Methemoglobinemia.
- 6. Management of severe H1N1 infection in the intensive care.
- 7. Briefly describe primary survey for trauma.
- 8. Coagulopathy following trauma.
- 9. How would you design and plan a new intensive care unit in India?
- 10. Hi-flow oxygen therapy in respiratory failure.

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