

D.M. – CRITICAL CARE MEDICINE

Paper III – SPECIALISED CRITICAL CARE MEDICINE

Q.P.Code: 161483

Time: Three Hours

Maximum: 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. Discuss various aetiologies of acute kidney injury in a patient with chronic liver disease. Discuss in detail the diagnosis and management of hepatorenal syndrome.
2. How would you establish brain stem death for organ donation? Discuss the management of an organ donor in the ICU who is scheduled to have harvest of kidneys, liver, lungs and the heart.

II. Write notes on:

(10 x 7 = 70)

1. Enumerate the differential diagnosis of flaccid paralysis in a critically ill patient.
2. What is thiopentone coma? Discuss the indications, institution and management of thiopentone coma.
3. Discuss treatment of drug resistant Malaria.
4. What are the current recommendations for nutrition and antibiotics in acute severe pancreatitis?
5. What do you mean by cerebral salt wasting syndrome? How would you differentiate cerebral salt wasting syndrome from Syndrome of Inappropriate Secretion of Antidiuretic Hormone?
6. How would you manage a patient admitted to your unit with a suspected anaphylactic shock?
7. Compare and contrast levosimendan and Dobutamine.
8. Write briefly on diagnosis and management of heparin induced thrombocytopenia.
9. Discuss the role of corticosteroids in Acute Respiratory Distress Syndrome.
10. Classify renal replacement therapy. What is the role of peritoneal dialysis in critically ill patients?

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1. Describe the principles, practices and evidence base of ICU care of a patient with super refractory status epilepticus.
2. Describe the differential diagnosis and management of a patient with a hemoglobin of 3 gram% and blood bank is unable to cross match compatible blood.

II. Write notes on:

(10 x 7 = 70)

1. Enumerate the causes of non-traumatic rhabdomyolysis needing ICU care.
2. Describe the underlying principles and techniques of respiratory failure management in patients with haematological malignancies.
3. Describe the management of a comatose patient with retroviral infection and CSF India ink preparation which is positive.
4. Describe the differential diagnosis of a patient with ECG changes of myocardial infarction, low platelets and altered sensorium in ICU.
5. Compare and contrast the traditional Vs Lund concept of raised ICP (intracranial pressure) management.
6. Describe the utility of plasma exchange in ICU.
7. Discuss utility of measuring driving pressure in the ICU.
8. Describe common toxidromes presenting in the ICU.
9. Describe the clinical features encountered in ICU patients in the latest Nipah virus outbreak.
10. Discuss the therapeutic regimen for a drug resistant TB patient who has developed hepatic and renal dysfunction.

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I. Elaborate on: **(2 x 15 = 30)**

1. Outline the methods available to estimate volume responsiveness in the critically ill patient and describe briefly their advantages and limitations.
2. What is relative adrenal insufficiency? What is the current evidence for the role of steroids in septic shock and ARDS?

II. Write notes on: **(10 x 7 = 70)**

1. Delayed organophosphate induced encephalopathy.
2. Management of scorpion bite.
3. Peri-partum cardiomyopathy.
4. Patient ventilator dys-synchrony.
5. Partial hanging.
6. Hypernatremia.
7. Role of CVVHD in clinical practice.
8. Approach to tropical infections in the intensive care.
9. Hypoactive delirium.
10. Pharmacological and endoscopic management in acute variceal bleed.
