

THE TAMIL NADU DR.M.G.R. MEDICAL UNIVERSITY

[MD 1224]

**DECEMBER 2024
(OCTOBER 2024 EXAM SESSION)**

Sub. Code: 4074

M.D. DEGREE EXAMINATION

FAMILY MEDICINE

PAPER II – GENERAL MEDICINE INCLUDING NUTRITION, INFECTIOUS DISEASES, LIFESTYLE DISEASES, NON – COMMUNICABLE DISEASES AND ALLIED SCIENCES INCLUDING PSYCHIATRY, GERIATRICS, DERMATOLOGY, PULMONOLOGY (AS APPLIED TO FAMILY MEDICINE)

Q.P. Code: 204074

Time : Three Hours

Maximum : 100 Marks

I. Elaborate on:

(2 x 15 = 30)

(5+7+3)

1. A 24-year-old male is hospitalized for seventh day of the fever without any focus of infection. He has been treated in local clinics with oral medications and injectables. On presentation, his temperature is 103-degree F. The blood pressure is 90/60mm Hg and P-120/min with no changes in the systemic findings.
 - a) What are the types of fever you know of and list the possible etiology of the Fever in South India based on the types of fever.
 - b) Draw an algorithm for the investigation and management of acute febrile illness in the first week.
 - c) What are the red flags for referral to a specialist care?
2. A 14-year-old female presents to the community health center for pain and swelling of multiple large joints for the past one month. The pain started in on joint and relieved with intake of pain killers from the pharmacy. A few days later, she developed swelling and pain in another large joint. There is no involvement of small joints. Clinical examination is significant for swollen tender joints of left wrist, right knee and ankle. His pulse is 110/min and he has a systolic murmur in mitral area.
 - a) Describe the differentials of acute and chronic poly arthritis.
 - b) Describe the major, minor and essential diagnostic criteria for the diagnosis of rheumatic fever.
 - c) What is the immediate treatment you suggest for this patient? How will you provide secondary prophylaxis of rheumatic fever in this patient?

(5+5+5)

II. Write notes on:

(10 x 7 = 70)

1. Diagnostic approach to a 65-year-old female who is living alone with decreased appetite, loss of weight and poor self-care over six months.
2. Classification and management of Alcohol Withdrawal syndrome according to Clinical Institute Withdrawal Assessment of Alcohol Scale (CIWA-A).

3. Describe the management of exertional chest pain for 20 days duration in a 48-year-old male with diabetes, hypertension and tobacco use.
4. Describe the continuity of care plan for a 75-year-old woman with recent Colles's fracture after a minor trauma.
5. 35-year-old male, known asthmatic on regular use of steroid Inhaler has come to your practice with worsening of wheeze and breathing difficulty since early morning. His respiratory rate is 40/min, using accessory muscles of respiration and not able to complete sentences. His O₂ saturation is 85% in room air and has diffuse bilateral wheeze.
6. Prevention and treatment of a 50-year-old male with type 2 diabetes presenting with foot ulcer in the dorsum and plantar aspect of the right foot.
7. Definition and management of delirium in elderly.
8. Diagnostic criteria, management and referral indications for atopic dermatitis in an adult.
9. Describe the management of a 50-year-old lady, known diabetes is presenting with fever and left loin pain for past two days. She is vomiting and not tolerating even fluids. How will you manage her in the Community Health Centre and what are the indications for referral to the higher center?
10. Describe the management of sputum positive Pulmonary Tuberculosis in an adult with X-pert TB PCT test showing resistance of Rifampicin.

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Q.P. Code: 204074

Time : Three Hours

Maximum : 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. A 50-year-old female is hospitalized for cough, fever, decreased appetite and significant weight loss for past two weeks. Clinical examination shows fever, tachypnoea, reduced movements and fine crackles in the left intrascapular region. Her O₂ saturation is 92% in room air. Her GRBS- 330mg. (5+5+5)
 - a) What are the differential diagnoses and appropriate investigations recommended for this patient?
 - b) What Immediate management would you provide in family practice?
 - c) Briefly describe the long-term management of this patient if diagnosed to have pulmonary tuberculosis.
2. A 23-year-old male with history of rheumatic valvular disease with mitral stenosis and atrial fibrillation presents for routine prophylaxis. His INR is found to be > 10 with no symptoms of bleeding. (6+6+3)
 - a) Describe the diagnostic criteria and the management of acute rheumatic fever.
 - b) How will you manage this patient with supra-therapeutic INR in this patient? How will you manage atrial fibrillation in this patient?
 - c) What is the recommended rheumatic fever prophylaxis for this patient?

II. Write notes on:

(10 x 7 = 70)

1. Differential diagnoses and management of acute onset of cough, breathlessness and whitish scanty sputum production in a 50-year-old male with tobacco smoking for 20 years duration.
2. Approach to a 25-year-old female with recurrent symptoms of insomnia, palpitations, sweating, chest pain, headache and sense of impending doom of death.
3. Etiology and treatment of papulo-nodular lesions over the face and back of a 17-year-old boy.

4. Assessment and management of new onset disorientation and irrelevant talk in a 75-year-old male following hip replacement surgery.
5. 35-year-old businessman presents with frequent large volume watery loose stools 4 to 5 times a day for the past 1 month, not responding to the treatment taken in the local hospital. Discuss the differential diagnosis and management.
6. Etiology and management of urinary incontinence in elderly.
7. 19-year-old boy, a college student with no comorbidity, presents with swelling of the face and legs for the past 1 week associated with reduced urine output. The swelling is more when he gets up in the morning and located more around the eye lids and face. His JVP is elevated, and blood pressure is 220 / 120 mm Hg. Auscultation of the chest reveals normal heart sounds and bilateral fine basal crackles. His urine microscopy shows albumin 2+ and RBC casts present in the urine. Describe the probable diagnosis and management.
8. Assessment and treatment of acute febrile illness of one week duration with no localizing signs in an adult.
9. Management of new onset psychosis in a 30-year-old male.
10. Risk factors and management of obesity as a family physician.

[MD 0525]

THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

[MD 1025]

OCTOBER 2025

Sub. Code: 4074

M.D. DEGREE EXAMINATION

FAMILY MEDICINE

**PAPER II – GENERAL MEDICINE INCLUDING NUTRITION,
INFECTIOUS DISEASES, LIFESTYLE DISEASES,
NON – COMMUNICABLE DISEASES AND ALLIED SCIENCES INCLUDING
PSYCHIATRY, GERIATRICS, DERMATOLOGY, PULMONOLOGY
(AS APPLIED TO FAMILY MEDICINE)**

Q.P. Code: 204074

Time : Three Hours

Maximum : 100 Marks

I. Elaborate on:

(2 x 15 = 30)

1. A 40-year-old gentleman is brought to the casualty with his first episode of generalized tonic-clonic seizures for the past 15 minutes. (5+10)
 - a) What are the possible differential diagnoses for this clinical scenario?
 - b) How will you manage this patient?
2. A 35-year-old lady presents with complaints of cough for more than 2 weeks. She delivered recently and is breast feeding a 2-month-old baby. Her husband is diagnosed with sputum-positive pulmonary tuberculosis and is on treatment. (5+7+3)
 - a) What are the salient clinical features of tuberculosis?
 - b) How will you manage a patient with suspected tuberculosis?
 - c) What advice will you give to this lady with a breastfeeding infant?

II. Write notes on:

(10 x 7 = 70)

1. Obesity – Classification, aetiology and complications.
2. Infections in an immune compromised person.
3. Prevention and treatment of stroke.
4. Dementia.
5. Elderly care and disability management.
6. Common fungal skin infections seen in a general practice.
7. COPD diagnosis and management.
8. Brady arrhythmias.
9. UTI in an adult.
10. Acute diarrhoea.
