

**SRI DEVARAJ URS ACADEMY OF HIGHER EDUCATION & RESEARCH**

**(A DEEMED TO BE UNIVERSITY)**

**Post Graduate Degree Examination – April / May - 2015**

**Time : 3 Hrs.**

**[Max. Marks : 100]**

**M.D GENERAL MEDICINE**

**PAPER - I**

**Q.P Code : RS3101**

*Your answers should be specific to the questions asked.  
Draw neat labelled diagrams wherever necessary.*

**LONG ESSAY**

**10 X 10 = 100 Marks**

1. Auto regulation of cerebral blood flow.
2. Pathophysiology of septic shock.
3. Renal involvement in systemic lupus erythematosus.
4. Laboratory diagnosis of HIV infection.
5. Aetiology, clinical features and treatment of thiamine deficiency.
6. Trace elements- physiological role.
7. Hepatotoxic drugs.
8. Turner's syndrome.
9. Mechanisms of drug resistance.
10. Compare and contrast, the various inotropes used in ICU setting.

\* \* \*

**SRI DEVARAJ URS ACADEMY OF HIGHER EDUCATION & RESEARCH**

**(A DEEMED TO BE UNIVERSITY)**

**Post Graduate Degree Examination – April / May - 2015**

**Time : 3 Hrs.**

**[Max. Marks : 100]**

**M.D GENERAL MEDICINE**

**PAPER - II**

**Q.P Code : RS-3102**

*Your answers should be specific to the questions asked.  
Draw neat labelled diagrams wherever necessary.*

**LONG ESSAY**

**10 X 10 = 100 Marks**

1. Mechanism of arrhythmia. Write a note on sick sinus syndrome.
2. Classify gastritis and name the histopathological differences and management of each.
3. Nuclear cardiology – principles, clinical application and advantages / disadvantages.
4. Falciparum malaria- pathogenesis, clinical features and management of drug resistant falciparum malaria.
5. Aortic dissection.
6. Malabsorption syndrome.
7. Scrub typhus infection.
8. Mechanisms of drug induced liver injury.
9. Botulism.
10. Constrictive pericarditis.

**\* \* \***

**SRI DEVARAJ URS ACADEMY OF HIGHER EDUCATION & RESEARCH**

**(A DEEMED TO BE UNIVERSITY)**

**Post Graduate Degree Examination – April / May - 2015**

**Time : 3 Hrs.**

**[Max. Marks : 100]**

**M.D GENERAL MEDICINE**

**PAPER - III**

**Q.P Code : RS-3103**

*Your answers should be specific to the questions asked.  
Draw neat labelled diagrams wherever necessary.*

**LONG ESSAY**

**10 X 10 = 100 Marks**

1. Inchemic stroke- etiology, pathophysiology, clinical features and management.
2. Systemic lupus erythomatosus – etiology, pathogenesis, diagnosis, clinical feature and management of lupus nephritis.
3. ARDS- causes and management.
4. Chronic inflammatory demyelinating polyneuropathy (CIDP)
5. Behcet's syndrome.
6. Pulmonary thromboembolism- clinical, radiological features and management.
7. Approach to a patient with demertia.
8. Crystal asthropathy.
9. Necrotizing pulmonary infections- diagnosis and management.
10. Differentiate between polymyositis and dermatomyositis. Write a note on management.

**\* \* \***

**SRI DEVARAJ URS ACADEMY OF HIGHER EDUCATION & RESEARCH**

**(A DEEMED TO BE UNIVERSITY)**

**Post Graduate Degree Examination – April / May - 2015**

**Time : 3 Hrs.**

**[Max. Marks : 100]**

**M.D GENERAL MEDICINE**

**PAPER - IV**

**Q.P Code : RS-3104**

*Your answers should be specific to the questions asked.  
Draw neat labelled diagrams wherever necessary.*

**LONG ESSAY**

**10 X 10 = 100 Marks**

1. Explain the causes, diagnostic evaluation and management of rapidly progressive glomerulonephritis (RPGN).
2. Explain the evaluation and management of complicated pyelonephritis.
3. Explain the management of urticaria, angioedema and anaphylaxis.
4. Explain the classification, clinical features, diagnostic approach and management of systemic amyloidoses.
5. Explain the approach to clinical and diagnostic evaluation of haemolytic anemia in the adult.
6. Discuss in detail about metabolic syndrome and clinical management.
7. Explain the approach to alcoholic detoxification and deaddiction therapy.
8. What are the clinical features, diagnostic evaluation and management of acute paracetamol overdose?
9. Enumerate clinical hypoglycemia, mechanism of counter-regulation and managing all acute hypoglycemia in all elderly diabetic on OHA.
10. How will you manage a patient who comes one hour after a snake bite with ptosis, ophthalmoplegia and bleeding from the wound and red urine?

**\* \* \***