ROYAL CIVIL SERVICE COMMISSION

CIVIL SERVICE COMMON EXAMINATION (CSCE) 2009

EXAMINATION CATEGORY: TECHNICAL

PAPER III: SUBJECT SPECIALIZATION PAPER FOR MEDICINE

Date

.: 08th November 2009

Total marks

: 100

Examination Time

: 2.5hours

Reading Time

: 15 Minutes

This question paper consists of 10 (Ten) pages and two sections. Section A and B. Section A consists of 30 multiple choice questions carrying 1(one) mark each and 4(four) short questions each carrying 5(five) marks. Candidates are required to answer all the MCQs as well as all the four short questions. Section B consists of two case studies each carrying 50 Marks and candidates are to attempt any one of the two. All the answers should be written on the answer sheet provided.

Section A: Multiple Choice Questions

Choose the most correct / appropriate answer and write against the question number (Example; Q1-a, Q2-d)

- 1) The most common organism causing croup in children is:
 - a) Influenza virus
 - b) Parainfluenza virus
 - c) Respiratory syncytial virus
 - d) Rota virus
- 2) Digoxin is used in treatment of:
 - a) Cardiac tamponade
 - b) Heart block
 - c) Constrictive pericarditis
 - d) Atrial fibrillation

d)	None of the above			
4) Pro	minent "a" wave in JVP is seen in:			
a)	Tricuspid stenosis			
b)	Trauma to heart			
c)	Ventricular septal defect			
d)	Angina pectoris			
5) Sud	Iden excruciating headache is seen in:			
a)	Epilepsy			
b)				
12	Intracerebral hemorrhage			
c)	Hysteria			
d)	Subarachnoid hemorrhage			
6) Cor	genital Pyloric stenosis causes:	74		
a)	Billious vomiting			
b)	Non bilious vomiting			
c)	Diarrhea			
d)	Encephalopathy			
7) Sur	gical lobes of liver are divided into follo	wing segments:		
a)	4 segments			
b)	5 segments			
	6 segments	68		
d)	8 segments			
α)	o segments			
)		200	
-			- J	
			₩.	2 Page
4				
	10			

3) True about Rheumatic heart disease and Rheumatic fever is:

a) Caused by group "A" streptococci

b) Caused by group "B " streptococci

c) Caused by Mycobacterium

H				
	8) All	are premalignant except:		
	a)	Adenomatous polyps		
	b)	Juvenile polyps	The state of the s	
	c)	Familial polyposis coli		
	d)	Lynch syndrome	- in the property of wager	
	9) Arto	ery to bleed in duodenal ulcer hemorrhage		
	a)	Spleenic artery		
	b)	Left gastric artery		
	c)	Superior mesenteric artery		
	11 199	Gastroduodenal artery		
		inless lower GI bleed is seen in child with		
		Meckels diverticulum	Sombleman in a soften find fact	
		Anal fissure		
	c)	Dysentery		
	d)	Fistula in Ano		
			referred to the same	
7.		mmonest cause of infertility is		
	a)			
		Vaginal candidiasis		
	1002	Trichomonas		
	Signature of the second	Pneumococcus		
	12) Co	mmonest cause of maternal mortality in E	Bhutan is	
	a)	Antepartum hemorrhage		
	b)	Post partum hemorrhage		JUNEAU AND

c) Maternal sepsis

d) Maternal tetanus

		4 Page
d)	7- 12- 18 weeks	
c)	At birth	
	4- 8- 12 weeks	- A 19084 11
		in expension and all
	the National immunization schedule (DPT Hepatitis B) vaccine i	s given at:
d)	Neonatal jaundice	The second of the
c)	Birth asphyxia	
b)	Neonatal sepsis	
a)	Congenital anomalies	
	ommonest cause of Neonatal mortality is	
d)	Continue pregnancy with medical treatment	
c)	Surgery after delivery	
b)	Abortion with appendectomy	
a)	Surgery at the earliest	
	treatment of choice in a pregnant lady with appendicitis is	
53	None of the above	and the second section
	Mother on domperidone	
b)	Breast engorgement	
a)	Mother is sputum negative Tuberculosis	
14) Co	ontraindication to breast milk feeding:	
d)	Ebstein barr virus	
c)	Human papilloma virus	and the second
b)	Candida albicans	
a)	Cytomegalo virus	

13) Predisposing factor for carcinoma cervix is:

(a)	Memoranous nephritis		
19) M	ost common cause of bone malignancy:		
a)	Osteosarcoma		
b)	Osteosarcoma		
c)	Ewings sarcoma		
d)	Secondaries		
20) M	easles and Rubella vaccine (MR) is given as;		
a)			
b)	Intradermal		
c)	Intramuscular	¥7	
d)			
21) A	xillary nerve supplies		
a)	Deltoid + Teres major		- rodigion
b)	Deltoid + Teres Minor		
c)	Teres major + Teres minor		
d)			
	xth (6) cranial nerve supplies:		
a)	Superior oblique		- 120
b)	Inferior oblique		
c)	Medial rectus		
d)	Lateral rectus		
u)	Lateral rectus		n for a
25			
			5 Page
81 74			
	.90		

18) Commonest pathological finding in child with Nephrotic syndrome is;

a) Focal segmental glomerulonephritis

c) Minimal change disease

b) Rapidly progressive glomerulonephritis

23)Creatinine is formed from a) Arginine b) Lysinc c) Leucine d) Histamine 24) Type II hypersensitivity is seen with: a) Blood transfusion

- b) Arthus reaction
- c) Hay fever
- d) Glomerulonephritis
- 25) Caseous necrosis in granuloma is found in
 - a) Leprosy
 - b) Histoplasmosis
 - c) Tuberculosis
 - d) None of the above
- 26) Pulsus paradoxus is seen in:
 - a) Cardiac tamponade
 - b) Congestive cardiac failure
 - c) Pneumonia
 - d) Ventricular septal defect
- 27) Drug contraindicated in G6PD deficiency is
 - a) Losartan
 - b) Amoxycillin
 - c) Hydralazine
 - d) Primaquine

28) Soft exudates in Retina are found in:

- a) Cataract
- b) Conjuntivitis
- c) Vitamin A deficiency
- d) Diabetes Mellitus

29) Drug used in genaralised anxiety disorder

- a) Sodium Valproate
- b) Paroxetine
- c) Alprazolam
- d) Sodium Dilantin

30) Operation for undescended testis is done for:

- a) Cosmetic reason
- b) Impotence
- c) Risk of Malignancy
- d) Inguinal hernia

Section A: Short Answer questions

Answer all the questions.

(5 marks each)

- Discuss the etiopathogenesis and management Dengue fever and Dengue hemorrhagic fever?
- 2) Discuss the management of upper gastrointestinal bleeding?
- 3) Discuss the management of Congestive cardiac failure?
- 4) Write short note on acute mountain sickness and its management?

Section B; Case studies

Given below are two case studies. Read the cases carefully and answer the questions given after each case. You are to attempt only one case study.

Case 1

In the aftermath of recent earth quake at Mongar. You have been chosen as the Doctor to manage the health problems accordingly. You are provided with all the necessary medicines including oxygen and IV fluids. You have set the medical unit in one of the house and these are what you find in the village.

- A) In one house you find a 3 years old boy who weighs 12kg. The boy had fever for last 3 days associated with vomiting and persistent watery stools. The boy is lethargic, his pulse is rapid and feeble, has sunken eyes and his skin pinch goes slowly. The mother says he has not passed urine for last 10 hours.
 - Discuss the causes of acute gastroenteritis and write the clinical classification of dehydration. How will you manage this boy? (10 Marks)
- B) In one house there is a 42years old man with past history of seizure disorder. For the last seven days he did not take his anti epileptic medicine (sodium valproate). When you arrived in his house you find that he is in status eplepticus.
 What is status eplepticus, write its causes and how will you manage this man? (10 Marks)
- C) In another house a women has just delivered a baby girl. The baby girl is normal and healthy. But the mother is bleeding excessively and going into shock. What is the clinical condition known as? Discuss the overall management of the mother? (10 Marks)
- D) In next house you find that a 72 years old man with fever for last 5 days. The fever is associated with productive cough. On examination you find that he has tachyapnoe, with flaring of nasi, chest retractions and has cyanosis. The chest has bilateral coarse crackles. Discuss the overall management of the man? (10 Marks)
- E) Mr. Pemba the Gup of the village has told you that many children are suffering from diarrhea with blood in stool. What preventive measures will you take in the community and what advises will you give? (10 Marks)

Case 2

You have been appointed as the in charge of the Casualty of JDWNRH and during your shift you come across the following cases.

- A) 10 years old girl weighing 30 kg has been brought with history of persistent vomiting, diarrhea and fever for last 3 days. On examination you find that she is in severe dehydration.
 - Discuss the common causes of acute gastroenteritis; write the clinical classification of dehydration? How will you mange this girl? (10 Marks)
- B) 25years old man has come with acute pain in umbilical region which has shifted to Right iliac fossa. He gives history of fever with vomiting. He has not passed stool. On examination he is in pain and has tenderness in Right iliac fossa. Discuss the differential diagnosis of this condition and how will you manage this case? (10 Marks)
- C) A 43 years male has been referred from Gelephu. He has been in coma for last 3 days. Prior to that he had fever with chills and rigors for a week and was noticed pass dark colored urine. On examination there is mild icterus, mild pallor, the GCS is 8/15 with hepatosplenomegaly.
 What are your differential diagnoses and how will you manage this case? (10 Marks)
- D) You have decided to give Penicillin to a patient in casualty. The nurse was giving the test dose of penicillin and suddenly the patient has developed breathlessness, tingling sensation of limbs, giddiness and inability to speak. The patient has developed anaphylactic shock. Classify the types of hypersensitivity reactions with examples. How will you manage this patient? (10 Marks)
- E) 25 years old girl at 35 weeks of pregnancy was brought to casualty. She complains of severe headache with blurring of vision. Her BP is 190/110 mm Hg and she has bilateral pitting oedema. Urine examination shows albuminura of (++).
 What is the clinical condition? How will you manage this patient? (10 Marks)