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University Hospital, Geelong
Emergency Medicine
Trial Fellowship Exam
Short Answer Questions (SAQ)
Week 25

DIRECTIONS TO CANDIDATE

1. Answer each question in the space provided in this question paper.
2. Do not write your name on this question paper.
3. Enter your examination number in the space below.
4. Cross out any errors completely.
5. Do not begin the exam until instructed to do so.
6. Do not take examination paper or materials from this room.
7. The booklet binder may be removed during the exam.

QUESTION & ANSWER
BOOKLET

Question 1 (18 marks)

- a. Define psychosis. (1 mark)

- b. List the five (5) DSM IV criteria for the diagnosis of Schizophrenia. (5 marks)

1.

2.

3.

4.

5.

Question 1 (continued)

You are providing medical assistance at triage on a busy Sunday night. A 34 year old man presents to triage. He appears intoxicated, agitated and has pressure of speech. He requests excision of a lesion on his forehead that has been present for over 20 yrs. During the discussion, he suddenly pulls out a knife and declares that if we don't cut out this thing, he'll do it himself. The triage nurse has requested he hand over the knife and he states "You will have to fight me for it".

- c. Define this situation. (1 mark)

- d. List five (5) features of his presentation that raise concerns about immediate violence. (5 marks)

1.

2.

3.

4.

5.

Question 1 (continued)

The patient is disarmed and requires physical and chemical restraint to allow assessment.
No drug/medication history is available.

e. List your preferred initial pharmacological treatment with dose range and route of administration in the case of:

i. Patient being compliant with medication administration: (3 marks)

Drug/s (1 mark)	Route (1 mark)	Initial dose (1 mark)

ii. Patient being non-compliant with medication administration: (3 marks)

Drug/s (1 mark)	Route (1 mark)	Initial dose (1 mark)

Question 2 (12 marks)

With respect to head injury in the Adult trauma patient:

- a. List four (4) risk factors that would lead you to obtain an urgent CT brain (ie within the first 1 hour). (4 marks)

1. _____

2. _____

3. _____

4. _____

- b. List four (4) risk factors that would lead you to obtain a semi-urgent CT Brain (ie within the first 8 hours). (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 2 (continued)

With respect to head injury in the Paediatric trauma patient:

- c. List four (4) variations when compared to Adult guidelines, in terms of risk factors for which CT Brain is recommended for the Paediatric patient within the first 1 hour. (4 marks)

1. _____
2. _____
3. _____
4. _____

Question 3 (12 marks)

a. What is Perichondritis of the ear? (1 mark)

b. List three (3) causes of perichondritis of the ear. (3 marks)

1.

2.

3.

c. Other than analgesia, list three (3) key components to the management of perichondritis of the ear. (3 marks)

1.

2.

3.

Question 3 (continued)

d. What is Chondritis of the ear? (1 mark)

e. What clinical feature differentiates perichondritis of the ear from chondritis of the ear? (1 mark)

f. State three (3) differences in the management of Chondritis of the ear, as compared to Perichondritis of the ear. (3 marks)

1.

2.

3.

Question 4 (12 marks)

A 46 year old woman presents with chest pain.

Her vital signs are:

BP	130/60	mmHg
RR	22	/min
Temperature	36.5	°C
GCS	15	

An ECG is taken- refer to the prop booklet page 2.

- a. What is a unifying diagnosis for this patient, based on this ECG? (1 mark)

- b. List three (3) abnormalities shown in this ECG that support this diagnosis. (3 marks)

1.

2.

3.

Question 4 (continued)

- c. List four (4) key investigations that you would perform. State one (1) justification for each choice. (8 marks)

	Investigation (4 marks)	Justification (4 marks)
1.		
2.		
3.		
4.		

Question 5 (12 marks)

A 25 year old woman presents following a sting from an unknown animal whilst camping.

- a. List three (3) clinically relevant differences between wasp stings and bee stings.
(6 marks)

	Feature of sting (3 marks)	Wasp (1.5 marks)	Bee (1.5 marks)
1.			
2.			
3.			

Question 5 (continued)

b. List three (3) clinical features of a bull ant bite. (3 marks)

1. _____

2. _____

3. _____

c. List three (3) clinical features of an Australian scorpion sting. (3 marks)

1. _____

2. _____

3. _____

Question 6 (12 marks) (same patient as question 5)

- a. What is the clinical definition of anaphylaxis? (1 mark)

- b. In general, list two (2) indications for a patient to use their own EpiPen. (2 marks)

1.

2.

- c. Other than the indications for use, list four (4) instructions that you would give a patient with respect to the technique of EpiPen use. (4 marks)

1.

2.

3.

4.

Question 6 (continued)

The patient experiences anaphylaxis. She has IV access. Adrenaline is given in appropriate doses. She fails to respond to maximum adrenaline therapy.

d. List five (5) additional medications that you could initiate in this situation. (5 marks)

1. _____
2. _____
3. _____
4. _____
5. _____

Question 7 (12 marks)

During your routine pathology result checking you notice a MSU result of a patient seen by another doctor in your emergency department two days ago.

MSU result - refer to the prop booklet page 3.

The patient records show:

35 year old woman, 15 weeks pregnant with left flank pain and dysuria.

No allergies.

Rx trimethoprim. F/U prn.

- a. Other than a confirmed UTI, state four (4) clinical problems with this patient. (4 marks)

1. _____
2. _____
3. _____
4. _____

Question 7 (continued)

- b. List 4 (4) key steps that you would undertake in this case. State one (1) justification for each step. (8 marks)

	Step (4 marks)	Justification (4 marks)
1.		
2.		
3.		
4.		

Question 8 (14 marks)

A 34 year old man presents left ankle pain following a fall at a BBQ.

Three Xrays are taken- refer to the prop booklet page 4 and 5.

a. State four (4) abnormal findings in these xray. (4 marks)

1. _____
2. _____
3. _____
4. _____

He had been drinking beer for several hours prior. He has a Past History of chronic lower back pain. He takes buprenorphine patches for chronic pain. He takes no other regular medications. You have IV access. He has an isolated ankle injury. His PBT is 0.25.

b. State four (4) issues in your approach to his analgesic regime for the first 1 hour. (4 marks)

1. _____
2. _____
3. _____
4. _____

Question 8 (Continued)

It becomes apparent that the patient is a famous footballer.

- c. State four (4) techniques that you could employ to maintain the patients' privacy. (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 9 (18 marks)

A 3 year-old boy is brought to your department by his mother with abdominal pain and vomiting. The mother is concerned that the child may have ingested some of her Iron (*Ferrogradumet*) tablets. She is sure that there are more than 10 tablets missing from the bottle. Each *Ferrogradumet* tablet contains 105mg of elemental Iron.

- a. List three (3) historical or examination features that you would seek to assess the risk of toxicity. (3 marks)

1. _____

2. _____

3. _____

Question 9 (continued)

b. What is the role of Serum Iron levels in the treatment of this patient? State (3 points in your answer. (3 marks)

1. _____
2. _____
3. _____

c. List four (4) key investigations for this child that will assist with an estimation of severity of toxicity. (4 marks)

1. _____
2. _____
3. _____
4. _____

Question 9 (continued)

d. What decontamination may be of benefit in this ingestion? (1 mark)

e. List three (3) indication/s for this decontamination. (3 marks)

1.

2.

3.

f. What specific antidote that may be of benefit in this ingestion? (1 mark)

g. List three (3) indications for the use of antidote in this patient. (3 marks)

1.

2.

3.

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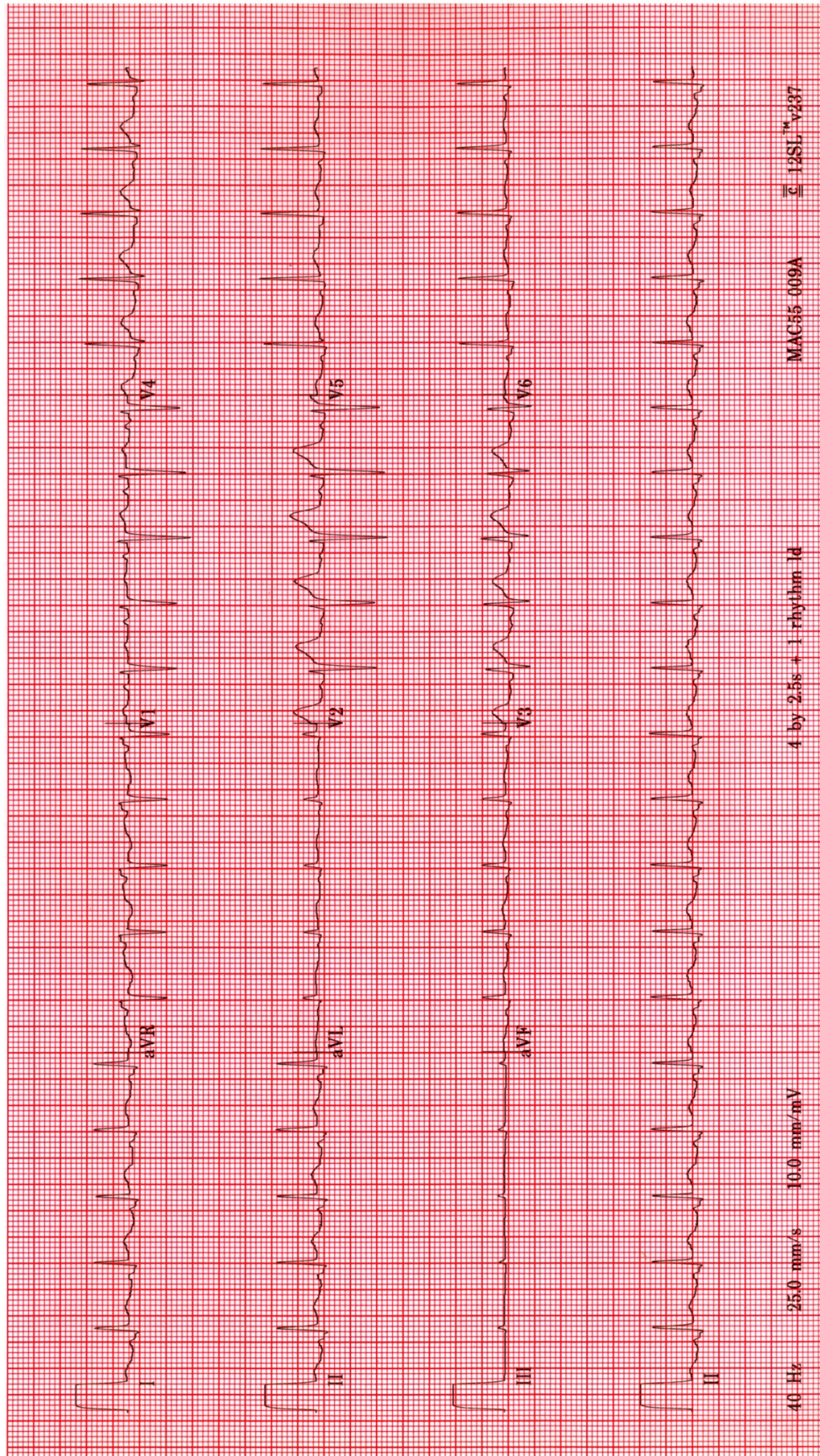
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PROP BOOKLET

Question 4



Question 7

MICROSCOPY

Leucocytes	> 1000	$\times 10^6/L$	($<2 \times 10^6/L$)
Red Blood Cells	220	$\times 10^6/L$	($<13 \times 10^6/L$)
Squamous Epithelial Cells	+		

STANDARD BACTERIAL CULTURE

1. Escherichia coli $>10^9$ cfu/L

SENSITIVITIES: 1

Ampicillin	S
Augmentin	S
Cefotaxime	S
Cephalothin	S
Cotrimoxazole	S
Gentamicin	S
Nitrofurantoin	S
Trimethoprim	R

Question 8

Xray 1



Xray 2



Question 8 continued

Xray 3

