Candidate name:	
PAH 2017.2 trial SAQ paper	
PART 3	
.,	
Questions 19 - 27	

1 hour

conce	rned about the possibilit	ty of Kawasaki disease.	
A phot	tograph of the rash is pro	ovided in the PROPS BOOKLET .	
 List 5 other clinical features (apart from rash) which would support a diagnosis of Kawasaki disease. (5 marks) 			
2.	List 5 differential diag	noses for this patient's rash. (5 marks)	
3.	List 4 complications of	f Kawasaki disease. (4 marks)	

A 3 year old boy has presented with a rash. The junior medical officer who has seen the patient is

Q19

Candidate initials: _____

Candidate initials:
20
54 year old man has presented to the ED with epigastric abdominal pain and fevers for the last 24 purs.
ome of his blood results are provided in the PROPS BOOKLET .
1. Provide an explanation for the following results:
ot 88, Alb 32, Glob 55 (1 mark)
li 88, Bili (conj) 62 (1 mark)
.P 540, GGT 503, ALT 190, AST 181 (1 mark)

		Candidate initials:
2.	What is the most likely diagnosis?	(2 marks)
You ha	,	ical investigation in to the cause of the abnormalities

3. List 2 pros and 2 cons for each of the investigations listed. (8 marks)

	Pros	Cons
CT scan	Pros	Cons
LISS seen		
USS scan		

Candidate initials:	

Q21

A 27 year old woman has presented with lower abdominal cramping pain. She is 29 weeks pregnant by dates.

1. List 4 aims of your assessment. For each aim, state one supportive historical or examination feature. (8 marks)

2. State 4 treatments you might use in this situation. Give the clinical indication for each treatment. (8 marks)

Treatment	Clinical indication

Candidate initials:

Q22

A 25 year old man has presented with severe central chest pain of 12 hours duration.

He has been unwell for one week with lethargy and malaise following an upper respiratory tract infection diagnosed by his GP.

He has no past medical history.

His ECG is provided in the **PROPS BOOKLET**.

1. Give 2 differential diagnoses. For each, list 2 supportive ECG findings and 1 supportive echocardiographic finding. (8 marks)

Differential diagnosis	Supportive ECG findings	Supportive echo finding
	1	
	2	
	1	
	2	

Candidate initials:	
Q23 A 42 year old man has presented to the ED after a large aspirin overdose.	
List 5 clinical features of salicylate toxicity. (5 marks)	

Candidate initials:	

2. Complete the following table regarding potential management steps for this patient. (5 marks)

Management	Indication	Dosing instructions	
Decontamination			
Urinary Alkalinisation			
,			
Haemodialysis			

fencing wire at	approximately 6	prought to the ED following a motorbike accident. He ro 60km/hr. He has sustained a closed injury to the anterior re are no other injuries on assessment.	
His vital signs a	are:		
GCS	15		
Pulse	100	/min	
ВР	120/75	mmHg	
1. List 4 f	eatures on exan	nination that would suggest a significant laryngeal inju	ry. (4 marks)
2. List 4 f	eatures on exan	nination that would suggest a significant vascular injur	y. (4 marks)

Q24 (12 min)

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	3.	List 2 investigations you could arrange to assess this injury. (2 marks)
Bas	sed (on your assessment, you have decided that the patient needs definitive airway management.
	4.	State 2 major concerns you would have in securing this patient's airway via a standard rapid sequence induction (RSI) with direct laryngoscopy in the ED. (2 marks)
1)_		
	5.	List 4 indications for immediate airway management in the ED. (4 marks)

The patient requires immediate airway management in the ED.			
6.	5. State 4 modifications to a standard RSI you would use in this patient.	(4 marks)	
4)			

Candidate initials:	

3. List 3 potential complications of this problem. For each, state 2 examination findings that would support its presence. (9 marks)

Complication	Supportive examination findings

1. State the as	sessment findings that would be consistent with this diagnosis.	(3 marks)
	Assessment finding	
History		
Examination		
Peritoneal fluid white blood cell count		

A 56 year old man has presented to the ED with abdominal pain for the last 24 hours.

Your junior medical officer is concerned that he might have peritoneal dialysis related peritonitis.

He has end-stage renal failure managed with peritoneal dialysis.

Q26

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2.	List 4 features of your history and/or examination that would suggest a surgical cause for this patient's abdominal pain. (4 marks)
1)	
2)	
3)	
4)	
The pa	tient has peritoneal dialysis related peritonitis.
His vita	al signs are normal.
3.	State 3 treatments you would use. (3 marks)
1)	
2)	
3)	

1. List 4 investigations you	u might perform. Include the justification for each. (4 mai	r ks)
Investigation	Justification	
	1	

A 16 year old female has presented to the ED with her boyfriend. She has complained of lower

Her past medical history includes intravenous amphetamine abuse.

Your assessment is consistent with pelvic inflammatory disease.

Q27

abdominal pain for several days.

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You have decid		ent requires admission for furth	er management of severe pelvic
Her vital signs	are:		
GCS	15		
Pulse	105	/min	
ВР	115/75	mmHg	
Temp	39	degrees	
2. List the	e components o	f your antibiotic regime.	(3 marks)
The patient has	s become agitate	ed after an argument with her m	nother who has recently arrived to the
ED. She demai	nds to leave with	n her boyfriend.	
		petence that you will need to a to leave. (3 marks)	ssess in order to determine if you
	on the patient	(o mano)	