

**FAMILY MEDICINE**

**PAPER – III**

FLM/D/17/08/III

Time: 3 hours

Max. Marks: 100

**Important instructions:**

- *Attempt all questions in order.*
- *Each question carries 10 marks.*
- *Read the question carefully and answer to the point neatly and legibly.*
- *Do not leave any blank pages between two answers.*
- *Indicate the question number correctly for the answer in the margin space*
- *Answer all the parts of a single question together.*
- *Start the question to a question on a fresh page or leave adequate space between two answers.*
- *Draw table/diagrams/flowcharts wherever appropriate*

Write short notes on:

1. A five-year old is brought to you by her grand parents with history of fever for one-day duration. 3+2+5
  - a) Mention the clinical symptoms and signs you will elicit on this child.
  - b) The child has no other features than fever. What investigation will you seek and why?
  - c) On the third day, the parents bring the child, with urine report of uncentrifuged urine sample with 70 WBC's. How will you manage the child?
  
2. A 25-year-old lady has presented to you with history of a mass in her vagina. 2+6+2
  - a) List the differential diagnosis with reasons.
  - b) What are the risk factors for uterine prolapse? How will you prevent them? What are the complications of uterine prolapse?
  - c) Mention briefly the steps of pelvic-floor exercises.
  
3. A 5-year-old girl is brought to you by her mother with history of itching in her vulva and vaginal discharge. 6+4
  - a) How will you manage her?
  - b) What preventive advice can you give this girl at her life-stage?
  
4. Mrs. Nalini a 23-year-old primigravida presented at 32 weeks of pregnancy with elevated blood pressure since two weeks, headache and epigastric pain. On examination, blood pressure is 180/110 mmHg, and urine protein is 4+. 2+3+3+2
  - a) Mention the diagnosis with reason.
  - b) How will you evaluate this patient?
  - c) What complication will you anticipate?
  - d) List the steps of managing her.

**P.T.O**

5. Mrs. Pooja, a 20 year old came to the OPD with intense pruritic vaginal discharge and dysuria. 4+3+3  
a) What details of history will you ask in your diagnostic work-up? Mention reasons for each.  
b) What investigation will you perform?  
c) How will you treat:  
i. Trichomonas vaginitis.  
ii. Candidal vaginitis
6. Mrs. Rani, a 31-year-old, gravida 4, Para 0, Abortion 3, Live 0, has come for evaluation. She has no reported medical problems and no surgeries. All her abortions were in the second trimester. 4+2+2+2  
a) What are the causes of second trimester abortion?  
b) If her abortions have been painless and with live foetus, what is the likely cause?  
c) How can we confirm the diagnosis?  
d) How can we treat this condition?
7. A 7-year-old is brought to you by his parents with history of loose stool for the past 3 weeks duration. 2+3+3+2  
a) What is the differential diagnosis?  
b) How will you clinically evaluate the child?  
c) How will you treat this child?  
d) What is the role of anti-microbials in this child?
8. A 3-day old child is brought to your OPD with history of seizures since last night. 4+3+3  
a) What are the etiological factors for seizures in this age group?  
b) How will you treat this child?  
c) The same child is brought to you at 8-month of age with fever and seizures. How will you manage this child now?
9. A 4-year-old girl is brought to your OPD by her mother as she noticed vaginal bleeding an hour ago. She was concerned if the child has a serious illness or cancer. 3+3+4  
a) How will you assess this child for sexual abuse?  
b) Enumerate the child protection services in our country.  
c) What other causes should you evaluate for and how will you do that?
10. An 18-year old boy is brought to you by his parents for a health check. He is about to go out of the country for studies. 2+3+2+3  
a) What clinical evaluation will you do and why?  
b) What investigation will you do and why?  
c) Immunization advice for him.  
d) What behavioral counseling will you do?

