

NSW Fellowship Course TRIAL FELLOWSHIP EXAMINATION

St George Hospital 2015.2

WRITTEN EXAMINATION Short Answer Questions

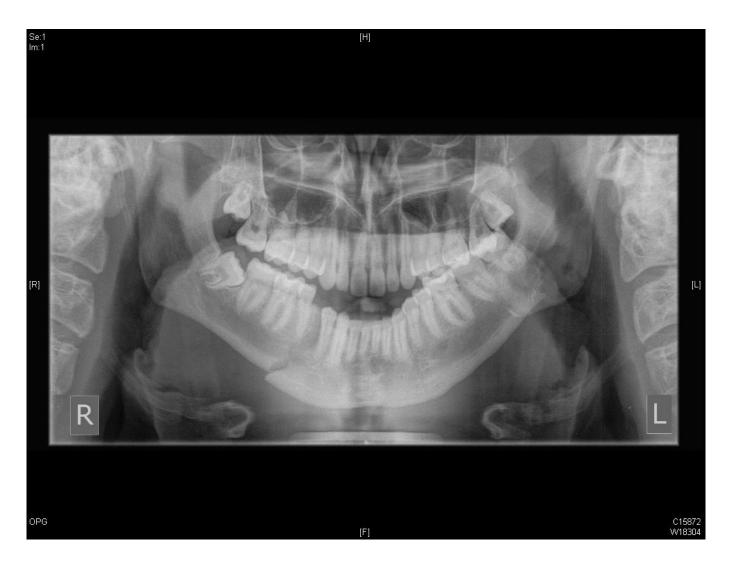
Instructions:

- 30 Questions.
- All Questions are worth 10 marks each.
- Time Allowed: 3 hours.
- No reading time.
- Write your name on each page in the space provided.

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QUESTION 1

A 17 year old man presents after an assault. He has jaw pain.



1. List **3** abnormalities seen on the OPG (3 marks).

:				
• •	 	 	 	

iii. _____

ii. _____

4 aspects of your inital ED management [with specifics] (4 marks).	• impoi	rtant physical find	aings that you	snould docu	ıment (3 marks).
4 aspects of your inital ED management [with specifics] (4 marks).						
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QUESTION 2

٧.

A 57 year old male is referred in by his GP with a hot, tender, painful left knee.

Pulse 96 BP 120/70

BP 120/70 Temp 37.6

His vitals are as follows:

1.	List 5 diagnostic categories and one example of each as a cause for this hot red knee (5 marks)
i.	Category:
	Example:
ii.	
11.	Category:
	Example:
iii.	Category:
	Example:
iv.	Category:
	Example:

Category:

Example:_____

2. List **5** investigations you might perform and **1** pro and con for each (5 marks).

i.	Investigation:
	Pro:
	Con:
ii.	Investigation:
	Pro:
	Con:
iii.	Investigation:
	Pro:
	Con:
iv.	Investigation:
	Pro:
	Con:
٧.	Investigation:
	Pro:
	Con:

QUESTION 3



1.	List	2 features of the X-Ray (2 marks).
	i.	
i	i.	
2.	Des	cribe 4 ways you would deal with his analgesic requirements. Give specifics (4 marks).
	i.	
i	i.	
ii	i.	
i۱	′ .	
3.		cribe in stepwise fashion the details of performing a femoral nerve block. Include doses.
	i.	
i	l.	
ii	i.	
i۱	/ .	
١	<i>'</i> .	

QUESTION 4

A 45 year old male is hit in the eye with a tennis ball while having a friendly match with his neighbour.



1. Describe the abnormalities in the photo (1 mark).

2. List **3** things that should be examined or assessed (3 marks).

i. _____

ii. _____

iii.

iv. _____

3. What grade is this hyphema? (1 mark).

4.	List 4 complications of this condition (4 marks).
i	·
ii	
iii	
iv	
10	•
	ays after being discharged home with outpatient ophthalmology review, he re-presents with ng eye pain, tearing and photophobia.
5.	What is the most likely diagnosis? (1 mark).

QUESTION 5

An elderly female presents to the ED after being found on the floor of her bathroom. Her family found her lying on her left side.

On arrival to ED:

GCS 10

HR 85

BP 140/90

Brain CT, axial images





2. List 3 clinical signs that would be expected based on the CT brain findings (3 marks). i	1.	Describe the brain CT findings (1 mark).				
i. ii. 3. What would be your management priorities? (4 marks) 4. List 2 features on CT brain that are associated with a poor outcome from thrombolytic therapy (2 marks). i.						
ii. 3. What would be your management priorities? (4 marks) 4. List 2 features on CT brain that are associated with a poor outcome from thrombolytic therapy (2 marks). i.						
 ii. 3. What would be your management priorities? (4 marks) 4. List 2 features on CT brain that are associated with a poor outcome from thrombolytic therapy (2 marks). i. 	2.	List 3 clinical signs that would be expected based on the CT brain findings (3 marks).				
 What would be your management priorities? (4 marks) 4. List 2 features on CT brain that are associated with a poor outcome from thrombolytic therapy (2 marks). i	i.					
4. List 2 features on CT brain that are associated with a poor outcome from thrombolytic therapy (2 marks). i	ii.					
4. List 2 features on CT brain that are associated with a poor outcome from thrombolytic therapy (2 marks). i	iii.					
therapy (2 marks). i	3.	What would be your management priorities? (4 marks)				
therapy (2 marks). i						
therapy (2 marks). i.						
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therapy (2 marks). i.						
therapy (2 marks). i.						
therapy (2 marks). i.						
therapy (2 marks). i.						
therapy (2 marks). i.						
therapy (2 marks). i						
	4.					
		i				

QUESTION 6

A 40yo female presents complaining of a one week history of malaise, myalgia, arthralgia and a non-productive cough.

Over the last 4 days she has developed a rash initially commencing on her face and upper body.





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1.	List 4	important features of the rash that you need to assess for (2 marks).
i	i.	
	_	
ii	i	
iii	i	
įν	′	
2.	Give marl	a differential diagnosis listing your most likely differential diagnosis first (3 ks).
3.		5 important potential complications that need to be identified and managed. arks)
	i.	
	ii.	
	iii.	
	iv.	
	٧.	
	٧.	

QUESTION 7

A 55-year old man presents to the ED with sudden onset of severe chest and interscapular back pain with diaphoresis.

Vital signs are as follows:

HR 105 bpm BP 190/95mmHg SaO2 95% room air

A CTPA is performed:



1.	What is the diagnosis? (0.5 mark).
Dia	gnosis:
2.	List 4 signs that you might expect to see on physical examination (4 marks).
i	•
ii	·
iii	·
iv	

3. List and justify **3** investigations for this patient (1.5 marks).

	Investigation	Justification
1.		
2.		
3.		

4.	4. What is the definitive treatment for this condition? (1 mark)		

5. List **3** drugs you would administer in ED, along with a therapeutic indication for each. (3 marks)

	Drug	Indication
1.		
2.		
3.		

QUESTION 8

A 68-year old female presents to the ED following a brief syncopal event at church. She is now asymptomatic.

1. List **5** features on history that would suggest a specific cause of syncope (5 marks).

	Historical Feature	Possible Diagnosis
1.		
2.		
3.		
4.		
5.		

List 5	physical signs that you would	examine for (2.5 marks)	
i.			
ii.			
iii.			
iv.			
V.			
List a	nd justify 5 investigations for t	his patient (2.5 marks)	
	Investigation	Justification	
1.			
2.			
3.			
4.			
5.			

QUESTION 9

A 7yr girl presents following a fall onto her outstretched hand and is reluctant to bend her elbow due to pain.

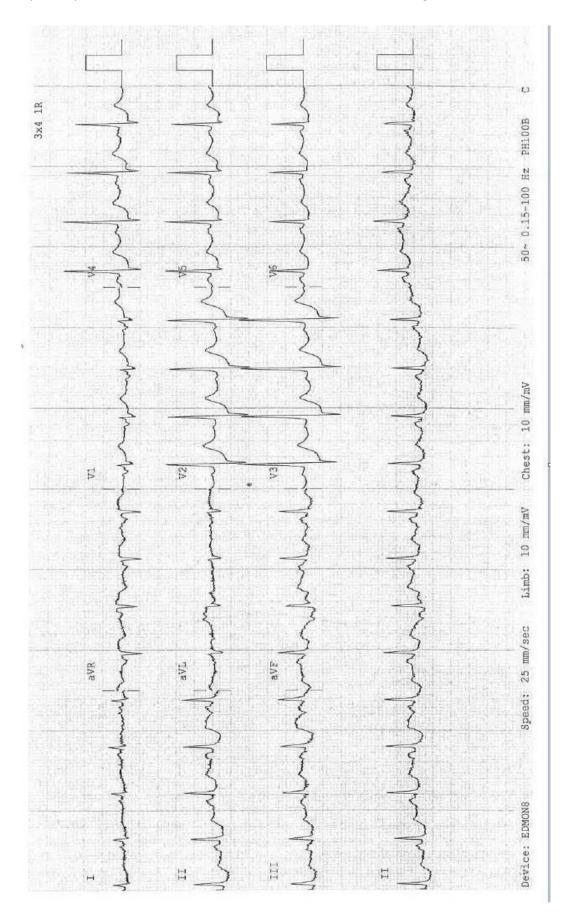




what are 6 potential complications of this injury? (3 marks).	
nosis:	
nosis:	
Nosis:	
Nhat are 6 potential complications of this injury? (3 marks).	
What are 6 potential complications of this injury? (3 marks).	
What are 6 potential complications of this injury? (3 marks).	
Albert and Gindinations for an arranting made ation of this top of injury 2	/2
What are 6 indications for operative reduction of this type of injury?	(3 IIIa

QUESTION 10

A 62 year old male presents to your small rural Emergency Department with 30 minutes of central heavy chest pain with some radiation into the throat and some belching.



1.	Identify the abnormalities on the ECG (4 marks).
2.	Where are the most likely areas of concern in the coronary arteries? (2 marks).
3.	What are the 4 priorities in managing this case? (4 marks).
	i
	ii
	iii
	iv

QUESTION 11

A 32yo female is brought into ED by her husband in the third stage of labour. Her husband advises you that she is 40 weeks pregnant and that this is her third pregnancy.

Whilst in the ED she delivers a baby boy.

Your colleague is assessing the mother.

1.	Briefly describe your initial management and assessment of the baby boy (2 marks).
Γhe ba oreath	by has not yet established adequate respiratory efforts and you commence face mask rescu-
2.	What initial rate of face-mask ventilations should you be administering (1 mark).
3.	What are the two most important indications for commencing chest compressions in a newborn child? (2 marks).
	i
i	ii.
4.	List two methods for determining the heart rate of newborns (2 marks).
	i

Despite your initial management and face mask ventilations you need to commence cardiac compressions.

	5.	What is the ratio of and frequency of chest compressions to ventilations in the newborn? (1 mark).
Yo	u ne	eed to get vascular access and you decide to cannulate the umbilical vein.
	6.	Describe how you determine which vessel is the umbilical vein (2 marks).

QUESTION 12
A 32 year old female presents 6 hours after ingesting 20 x 240mg SR verapamil tablets.
She is vomiting and listless.
GCS 14 HR 40 BP 75/40
1. What is your risk assessment of this patient? (1 mark).
2. What are the pathotoxicological mechanisms of this agent? (2 marks).

3. Her BSL is 12, what is the significance of this? (1 mark) $\,$

[question continues on the following page]

As you assess her, she deteriorates further, has a poorly palpable pulse. GCS drops to 9/15.

Repeat ECG shows a junctional rhythm at 30 bmp.

4. Outline your management steps. Give doses of any medications used. (6 marks).

Name:

Page | **27**

QUESTION 13

A 45-year old African man presents to a rural ED with priapism of 2 hours duration. He is extremely distressed with severe penile pain.

4 possible causes of priapism in this patient (2 marks).
line 5 key management steps for this patient (5 marks).
at is the most significant complication of priapism? (0.5 mark).
at are 2 important factors in determining prognosis? (1 mark).

[question continues on the following page]

5. List and justify **3** investigations for this patient (1.5 marks).

	Investigation	Justification
1.		
2.		
3.		

QUESTION 14

A 2 month old boy is brought in by his parents from the GP with increased Work of breathing. You are concerned he has bronchiolitis.

actor	s which would categorises him as having moderate proficilontis (3 marks)
otan	tial factors which would increase his risk of apnoeas (4 marks).
d just	tify 2 investigations you could undertake (2 marks).
	(0) 1: 10: (4 1)
ause	s of Bronchiolitis (1 mark).

QUESTION 15

A 60 year female presents to your ED with a clinical history and examination suggesting acute pancreatitis.

1) List 6 potential aetiologies of this condition (3 marks).

ı					_
ii					_
iii					_
iv.					
					_
٠					_
vi					_
2) List 1 bi	ochemical severity scoring systems	used to	predict this con	dition with 4 criteria (4 marl	ks).
Scoring Sy	stem:				
Criteria:					
i.					
ii.					_
					_
					_
iv					_
s) List 3 <i>lo</i>	cal and 3 systemic complications of	this cor	ndition (3 marks)	ı.	
	LOCAL			SYSTEMIC	

QUESTION 16

A 48 year old woman with a history of thyrotoxicosis presents with fever and confusion.

You are concerned she may have thyroid storm.

i.	
ii.	
ii.	
Wh	at factors may have precipitated this episode? Give 6 examples (3 marks).
i.	
ii.	
ii.	
٧.	
.,	
v.	
v. ^v i.	
vi. Des	cribe 4 specific treatments for thyroid storm and their mechanism of action (4 mar
vi. Des	
vi. Des i.	cribe 4 specific treatments for thyroid storm and their mechanism of action (4 mar
oi. Des	cribe 4 specific treatments for thyroid storm and their mechanism of action (4 mar
vi. Des	scribe 4 specific treatments for thyroid storm and their mechanism of action (4 mar
vi. Des i.	scribe 4 specific treatments for thyroid storm and their mechanism of action (4 mark
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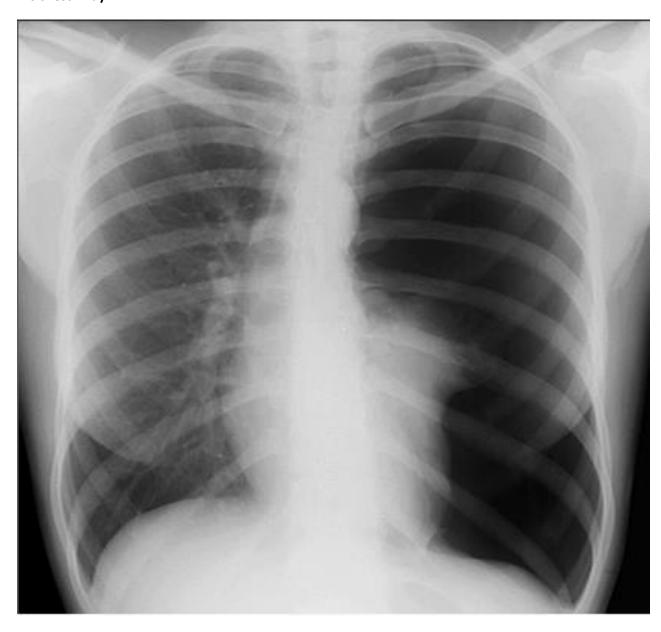
QUESTION 17

A 30-year old recreational diver is brought by ambulance to a small coastal ED. He collapsed shortly after emerging from the water and suffered a generalised seizure lasting 2-3 minutes. On examination, he is drowsy with a right-sided hemiparesis. The nearest tertiary hospital is 300km away by road.

Vital signs are as follows:

HR 110min
BP 90/50mmHg
GCS 11
E4, V2, M5 (not moving right arm)
SaO2 89% room air

His chest x-ray:



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Diagnosis 1:					
Diagnosis 2:					
Unifying aetiology:					
2. Outline your management of this patient (5 marks).					

1. List **2** diagnoses for this patient and a unifying aetiology (2 marks).

3. Complete the table below, listing **3** possible methods of retrieval for this patient. Give **1** advantage and **1** disadvantage of each method (3 marks).

Mode of transport	Advantage	Disadvantage
1.		
2.		
3.		

QUESTION 18

You are the duty consultant in charge of an urban ED. A 55 year old gentleman is brought to your resuscitation bay after being rescued after the gas from a barbeque exploded in his face. His estimated weight is 80 kg.



	5 clinical signs and symptoms would you actively look for in this patient (2.5 mark
i.	
ii.	
11.	
iii.	
iv.	
٧.	
List	5 investigations you would perform in this patient (2.5 marks).
List	5 investigations you would perform in this patient (2.5 marks).
i. ii.	
i.	

On exposure of the patient you estimate he has sustained 10% deep dermal burns.

3.	Calc	culate this patient's fluid requirements in the first 8 hours. Show working. (1 mark)
4.	List	8 criteria requiring transfer to a specialised burns unit (4 marks).
	i.	
i	i.	
ii	i.	
i۱	/ .	
١	/ .	
٧	i.	
vi	i.	
vii	i.	

QUESTION 19

A 30 year old man presents to the emergency department with fever of 38.5 and chest pain and SOB. He reports that he is an IVDU. On examination, he has bibasal crepitations and a murmur which was not present on previous presentations.

	What is the most likely diagnosis? (1 mark).
2.	List 4 components of Dukes Criteria (4 marks).
	i
i	ii
i	
	v
3.	
	Name 2 of the most common organisms which cause this pathology in the IVDU population (2 marks). i
	population (2 marks). i.
	population (2 marks).

QUESTION 20

A 17 year old girl is brought to the Emergency Department by her parents as they are concerned she isn't eating enough. On examination she is extremely pale and thin. Her weight is 42 kg and her height is 173 cm.

<u></u>						
Give 4 medic	al indications	s for admission	on of patier	its with sev	ere eating	disorders (4
		s for admission	·			

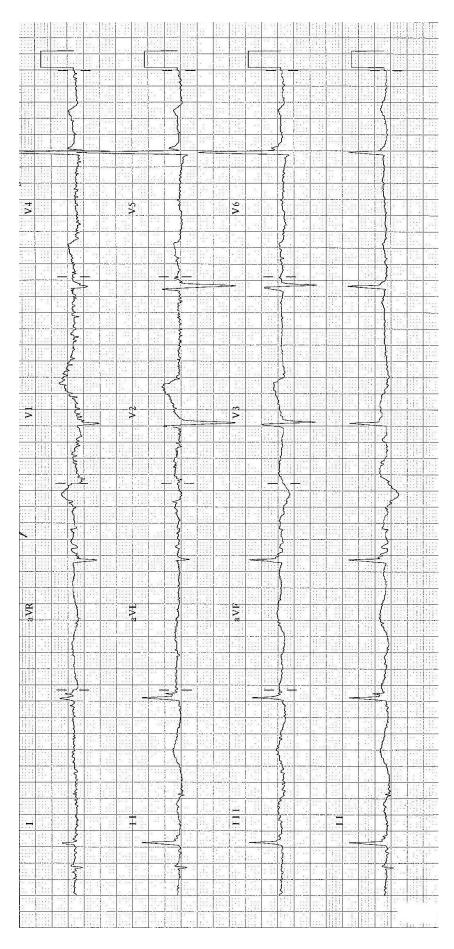
QUESTION 21

A 31-year old male with a history of alcoholism and IVDU is found collapsed on the street during winter. He is brought to ED by ambulance.

His vital signs are:

GCS 7 E2, V1, M4 BP 90/50mmHg Temperature 29°C

His ECG is on the following page.



t 4 abr						
t 4 me	thods of rev	warming th	nis patient	(2 marks)		
				(2 11101113).		
		_	-			
 t 3 elei	ments of su	pportive c	are for this	patient (3 i	marks).	
 t 3 elei	ments of su	pportive c	are for this	patient (3 i		
t 3 elei	ments of su	pportive c	are for this	patient (3 i	marks).	

[question continues on the following page]

The patient suffers a sudden VF arrest.

4. List **3** modifications to the standard *advanced* life support algorithm, with rationale for each modification (3 marks).

	Modification to ALS protocol	Rationale
1.		
2.		
3.		

QUESTION 22

Your registrar brings you the ECG of a 46 year old man who has presented with palpitations. He is in a Resus bay, being monitored. His condition is stable with BP 120/80, Sats 99% RA, RR18, and GCS 15.

	hat are 4 ECG features of VT that you look for in making a diagnosis? (2 marks).
i.	
ii.	
iii.	
iv.	
ECG sh	nows a wide complex tachyarrhythmia.
2. WI	hat else could this be (apart from VT)? (2 marks).
3. WI	hat are 3 treatment options for this man with pros and cons of each? (6 marks).
i.	
ii.	
ii.	
ii.	
ii.	
ii. iii.	

QUESTION 23

A 16 year old male presents after falling from his push-bike. He has a sore shoulder but no other injuries.



Ι.	Describe the injury seen in the x-kay (1 mark).

2. List **4** complications for each of the types of clavicular injury in the table (4 marks).

Posterior sterno-clavicular dislocation	Mid-shaft clavicle fracture
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3. List **3** <u>absolute</u> & **3** <u>relative</u> indications for operative fixation of mid-shaft clavicle fractures. (3 marks)

Absolute	Relative

4.	List 4 complications o	f ORIF for	a displaced	mid-shaft	clavicle	fracture ((2 marks).
----	------------------------	------------	-------------	-----------	----------	------------	------------

•		
1.		

11		
11.		

QUESTION 24

A 4 year old girl presents with her parents with a limp and not wanting to run as usual over the last 2 days. Her initial observations are:

Temp 38.0°C HR 105bpm SaO2 99%RA

On examination, she has pain on internal rotation and abduction, and has a noticeable limp on walking.

ii.	
iii.	
iv.	
2. Justi	ify 3 potential investigations which would aid your diagnosis (3 marks).
i.	
ii.	
•	
iii.	
are cond	cerned that she may have partially treated septic arthritis as her parents state that s
	cerned that she may have partially treated septic arthritis as her parents state that s g a course of Amoxicillin for a febrile illness prescribed by the GP.
finishing	
finishing	g a course of Amoxicillin for a febrile illness prescribed by the GP.
finishing 3. List i	g a course of Amoxicillin for a febrile illness prescribed by the GP. 3 causative organisms for Septic Arthritis (3 marks).
finishing 3. List: i	g a course of Amoxicillin for a febrile illness prescribed by the GP. 3 causative organisms for Septic Arthritis (3 marks).
finishing 3. List i	g a course of Amoxicillin for a febrile illness prescribed by the GP. 3 causative organisms for Septic Arthritis (3 marks).

QUESTION 25

A 48 year old female presents with GCS 15 complaining of rapid onset pain, initially in the back of the neck then escalating in intensity over 15 minutes and becoming bilateral and frontal. She is otherwise well.

	ond a careful and thorough history and physical examination, list the 3 most efficient estigations indicated in this case (1.5 marks).
i.	
ii.	
iii.	
	ussing lumbar puncture with the patient.
2. Wha	at 4 risks must be highlighted in the consent process? (4 marks).
i.	
ii.	
iii.	
iv.	
3. List	3 evidence based strategies to minimise post LP headache (1.5 marks).
i.	
ii.	
iii.	

4. Complete the table below with **3** options of different classes for analgesia in this case and include a pro and a con for each (3 marks).

Medication	Pros	Cons	

QUESTION 26

A 26 year old male presents after a domestic dispute with this injury. He is confused and agitated. Vital signs are:

BP 85/-40

PR 130

Sats 94% on RA

GCS 13

RR 28.

He looks grey and sweaty.



1	Lict 2	noccible	lifa th	restening	iniurias	(2 marks).
Ι.	11/1.3	DOSSIDIE	me m	rearenning	' 1111111111111111111111111111111111111	CZ IIIALKSI.

i.	 _
::	
11.	 _
iii.	

After the placement of 2 x16G IVC and 500ml of IV crystalloid he becomes progressively more hypotensive and has a PEA arrest.

2. List	2 indications of emergency thoracotomy (1 mark).
i.	
ii.	
3. List	4 contraindications to performing an emergency thoracotomy (4 marks).
i.	
ii.	
iii.	
iv.	
4. List	3 procedures that can be performed once the chest is opened (3 marks).
i.	
ii.	
iii.	

QUESTION 27

An 89 year old lady presents with generalised weakness, nausea and diarrhoea. She had a fall 3 days earlier and had broken her humerus. She was discharged for orthopaedic follow up as an outpatient. She appears dehydrated, BP 140/80, pulse 80 regular, and is afebrile.

Her venous blood gas is below:

Venous Blood pH POCT	7.073
Venous Blood pO2 POCT	23.8 mmHg
Venous Blood pCO2 POCT	48.2 mmHg
Venous Blood O2 Saturation POCT	33.2 %
Venous Blood HCO3 POCT	13.4 mmol/L
Venous Blood Base Excess POCT	-14.8 mmol/L
Venous Blood Oxyhaemoglobin POCT	32.8 %
Venous Blood Inspired Oxygen POCT	21 %
Venous Blood Haemoglobin POCT	97 g/L
Venous Blood Reduced Haemoglobin POCT	66.0 %
Venous Blood Methaemoglobin POCT	0.4 %
Venous Blood Carboxyhaemoglobin POCT	0.8 %
Venous Blood Creatinine POCT	179 umol/L
Venous Blood Sodium POCT	126 mmol/L
Venous Blood Potassium POCT	3.2 mmol/L
Venous Blood Chloride POCT	100 mmol/L
Venous Blood Calcium Ionised POCT	1.25 mmol/L
Venous Blood Glucose POCT	5.6 mmol/L
Venous Blood Lactate POCT	1.1 mmol/L

1. Inte	erpret the blood gas results - what are the likely causes of her acidosis? (5 marks).
2. List	t 5 further investigations you feel are indicated. Justify your responses (5 marks).
i.	
ii.	
iii.	
iv.	
IV.	
٧.	

QUESTION 28

ii.

iii.

A 23 year old woman presents having fallen 5m off a balcony. She has landed on her feet and is complaining of ankle pain.

1.	What are the 3 indications for an <u>ankle X-Ray</u> as described by the Ottawa ankle rules? (2 marks)
i	•
ii	•
2.	What are the 3 indications for a <u>foot</u> X-Ray as described by the Ottawa foot rules? (2 marks)
	·





s. Des	cribe 2 abnormancies in the x-Rays above (2 marks).
i.	
ii.	
4. List	4 other injuries associated with falls from a height if landing on the feet (4 marks).
i.	
ii.	
iii.	

iv.

QUESTION 29

A 30 year old female who is 30 weeks pregnant, presents to the ED with PV bleeding for the previous 6 hours. It is her second pregnancy. Her observations are pulse 110 bpm, BP 100/50mmHg, and RR 24.

1.	What are the 2 common causes of vaginal bleeding in later pregnancy? (1 mark).
i.	
ii.	
2.	Give 4 clinical features which would help distinguish between the two causes you gave
	above (4 marks).
i.	
ii.	
iii.	
iv.	
. • •	
3.	What examination must be avoided and why? (1 mark).
4	Circ A important and a sub-unanced state in the ED (A seed a)
4.	Give 4 important early management steps in the ED (4 marks).
i.	
ii.	
iii.	
iv,	

QUESTION 30

A 55 year old man is brought to ED by ambulance after being found collapsed on a golf course. He received bystander CPR for 5-10 minutes at the scene. On arrival to ED, he is haemodynamically stable, spontaneously ventilating and alert but slightly confused.

Vital signs:

HR 120/min BP 190/100mmHg GCS 14 E4, V4, M6 RR 26/min



Figure 1: Image reproduced from Dunn's Emergency Medicine Manual (6th edition)

	What is the most likely diagnosis? List 2 fea diagnosis (2 marks).	tures <u>from the photograph</u> that support this
Diag	nosis:	
Clini	cal Features:	
	i	
	ii	
2.	List 4 immediate complications that you wo	uld assess for (4 marks).
i.		
ii.		
iii.		
iv.		
3.	List 1 important delayed complication requi	ring specialty follow-up (1 mark).
4.	List and justify 3 investigations for this pation	ent (3 marks).
	Investigation	Justification
1.		
2.		

3.

~END~