Tanta University Medicine Time allowed three hours



Internal Medicine Exam. Faculty of **Diploma Exam .ophthalmology**August 2018

All questions must be answered (3 questions) (45 marks)/The exam. is in two pages.

- Q1: A) A 36-year-old woman presents with delirium and congestive heart failure. Her husband indicates that she has been losing weight and becoming more anxious and irritable over the past 3 months Over the past several weeks she has developed dyspnea and peripheral edema. On physical examination, she is awake, anxious, and confused. Her temperature is 38°C (100°F) and her heart rate is 142 and regular. She has jugular venous distension to 16 cm above the sternal angle as well as bibasilar rales. In addition, she has a diffuse goiter with a soft bruit over each lobe, as well as a stare expression and exophthalmos. Chest x-ray (CXR) shows pulmonary edema and cardiomegaly. What is the diagnosis and how to manage this patient? (5 marks)
- B) Describe the clinical presentation of visual field defects and the localization of lesion in each defect? (5 marks)
- C) Hyperkalemia, causes, clinical picture and treatment (5 marks)
- **Q 2:** A) A 62 year old male came to outpatient clinic, complaining of: headache for two weeks. Patient had no previous medical history. On examination, blood pressure 150/100 mmHg, BMI 30. Chest, heart and abdomen examination were unremarkable. Routine investigation were normal except: , RBS was 300 mg/dL. How to manage this patient? (5 marks)

B) Clinical picture , management of pulmonary TB patient ? (5 marks)

C) Classification and characteristics of small vessels vasculities? (5 marks)

Q3: A) A 22-year old woman is referred to the hospital complaining of easy bruising and menorrhagia. What investigations should be ordered and interpretation of results?

(5 marks)

B) You are asked to consult on a 40-year-old white female with pruritus for 4 months.. There is no history of prior alcohol use, blood transfusions or drug abuse. Her past medical and her family history is unremarkable. On examination she is mildly icteric. She has spider angiomata on her chest. You palpate liver edge 2 cm below the right costal margin. The remainder of the examination is unremarkable. A right upper quadrant ultrasound confirms your suspicion of cirrhosis, With normal gall bladder appearance

HCV antibodies, HBs Antigen were negative What is diagnosis , management of this case (5 marks)

C) discuss the approach to a case of hypercalcemia?

(5 marks)

ملحوظه:

الساعة الثامنة صباحا بقسم امراض الباطنة 2018-8-29سيتم عقد الامتحان الشفوي والاكلينيكي يوم الاربعاء Good luck