

Book 3

Candidate Name: _____

Question 19

You are the emergency consultant on shift at a rural hospital and a 35 year old woman in her fifth pregnancy presents in labour and when you enter the room to examine her she starts to deliver the baby. The head delivers easily but then with the next push the head partially retracts.

What is this condition called? (1 mark)

What is the underlying anatomical issue in this situation? (1 mark)

What is the most important complication of this condition and why does it occur? (2 marks)

Outline your stepwise management of this condition (6 marks)

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Question 20

A 23 year old woman self-presents to triage with her partner. She is drooling and unable to speak and seemingly in discomfort. Her partner tells you she has been well recently and her symptoms started after yawning. A clinical photograph is below.



What is the most likely diagnosis? (1 mark)

Name the anatomical structures involved and the direction of displacement (2 marks)

Outline your approach to imaging in this condition (2 marks)

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Describe two techniques for managing this condition (6 marks)

Outline your discharge instructions (not including return precautions) in this case (2 marks)

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Question 21 (13 marks)

You are the ED Consultant in a small rural department. The closest Cardiology or Surgical support is 100kms by road. A 72 year old woman has presented with increasing shortness of breath. She has no prior known cardiac or respiratory history.

Her vitals are as follows

- Temp 36.2
- HR 110 Regular
- BP 89 / 77
- RR 24
- Sats 95% room air

On examination she has a raised JVP and muffled heart sounds. No murmurs are heard. Her respiratory examination is unremarkable except for tachypnoea.

The following image is obtained on bedside echocardiography.



What is the name of this cardiac window/view? (1 mark)

List 3 echocardiographic findings suggestive of pericardial tamponade on bedside ultrasound (3 marks)

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List 5 causes of a Pericardial Effusion in this patient – candidates should list 5 causes from different categories of causes (5 marks)

You have decided to perform a therapeutic pericardiocentesis on this patient for cardiac tamponade. Complete the following table outlining your technique for this procedure (4 marks)

Positioning of the patient for procedure	
Gauge of needle used	
Insertion point of needle	
Direction of needle advancement	

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Question 22

A 58 year old man presents to your emergency department complaining of shortness of breath. As part of your examination you find the following



List two findings / signs in the above picture. (2 marks)

State the significance of these findings (1 mark)

List four (4) causes of this finding (4 marks)

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List the most important investigation that you would order to determine the underlying cause (1 mark)

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Question 23

A 65 year old man has presented with two weeks of intermittent fevers, and now abdominal pain and frank red PR bleeding. He has a history of mild mitral stenosis and chronic atrial fibrillation, for which he takes dabigatran, and an abdominal aortic aneurysm which has been repaired endovascularly one year ago.

List two likely diagnoses (2 marks)

List four investigations you would order, and for each, provide one rationale. (8 marks)

List one drug that may be used to reverse the effect of dabigatran. (1 mark)

List three organisms which may cause vascular prosthetic infection. (3 marks)

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Question 24

A 43 year old man with a history of chronic cough and wheeze has presented with respiratory distress and hemoptysis.

Other than pulmonary hemorrhage and renal failure, list two other manifestations of Wegener's granulomatosis (Granulomatosis with Polyangiitis - GPA) (2 marks)

Contrast the rationale for intubation and treatment of pulmonary hemorrhage in GPA and solitary lung tumour. (4 marks)

	GPA	Tumour
Rationale for intubation (1 mark each)		
Treatment of haemorrhage (1 mark each)		

List one blood test you may order to confirm a diagnosis of GPA. (1 mark)

List two infectious diseases which may cause hemoptysis and renal failure. (2 marks)

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List two other non-infective causes for a patient presenting with both hemoptysis and hematuria. (2 marks)

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Question 25

65 year old man presents to the Emergency Department with pain and redness in Left eye, which is progressively worsening in intensity, now describing a deep dull ache in the temporal area.



Describe the important findings in the above photograph (3 marks)

What is the most likely clinical diagnosis? (1 mark)

List 2 findings on clinical exam (not evident above) that would support the diagnosis (2 marks)

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List 4 causes of this condition (2 marks)

List the management priorities for this condition in the ED (3 marks)

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Question 26

A 45 year old woman with a history of schizophrenia and medication non-compliance is brought in by an ambulance after being found trying to run into oncoming traffic. She is acting erratically and states she is being experimented on by the Government. She is becoming increasingly agitated.

List 3 clinical features suggestive of an organic cause for her presentation (3 marks)

List 5 features suggestive of acute psychosis (5 marks)

Patient becoming increasingly agitated and attempting to leave the department. Verbal de-escalation fails and you decide to initiate chemical restraint.

List 2 options for parenteral administration (different classes) including dose / route / 1 side effect (4 marks)

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Question 27

A 63 year old man has presented to the emergency department with severe lower abdominal pain. He has been assessed by your intern and has some initial pain relief prescribed. His vital signs are as follows:

T 36.3

P118

BP 173/93

RR 22

SaO2 95% RA

A CT scan is performed and an image is available below



What is the diagnosis? (1 mark)

Name 4 causes of this condition, each from a different category (4 marks)

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In standard circumstances, how is this condition diagnosed? (2 marks)

You are unable to insert an indwelling catheter and decide to insert a suprapubic catheter. Outline the steps involved in performing the procedure (6 marks)

END OF BOOKLET

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