35 yr old male awakens short of breath and sats 92%

- a) 4 risk factors you would seek
- b) BTS guidelines, Three other ED investigations to investigate other causes

Ddimer 300 (n < 224)

Pt collapses hypotensive, GCS 12

- c) What single management would you consider
- 2. Young child with stiff neck, drowsy, no rash, na 124
  - 1) 2 neurological diagnosis
  - 2) Explain the low sodium
  - 3) 6 investigations for cause of low sodium
- 3. 35/40 pregnant lady BP 165, proteinuria +++++ Haematuria, plt 38, wcc14 bili 79 Hb 8
- 1) 2 features of FBC, and explain
- 2) what is the diagnosis (pre-eclampsia +- HELLP)
- 3) what is the management of the blood pressure (drug and route) what 3 other things to do in ED

4.

Picture of rash (poor)

Your SHO thinks this is scabies

- a) describe the rash (2points)
- b) Diagnosis + differential diagnosis
- c) Two treatment options
- d) Two pieces of advice for patient

5.

68 male, Overdose of digoxin, level 16ng/ml (n<2) bloods showed renal faliure, K+ 6

12 lead ECG (atrial flutter, variable block, reverse tick, ??prolonged QT)

- a) 4 points on the ECG
- b) 3 reasons for digibind
- c) 4 other immediate management points

6

60 male quiet withdrawn male

- a) 6 features you would seek suggesting risk of suicide
- b) 4 key features of MHA in your country of work
- c) 3 key features of assessment of competance

7

34 woman appearing in court today for fraud

## unrousable from sleep Pt drowsy. Pupils 4mm

## **ECG**

- 1) describe the ECG, what is the cardiac diagnosis
- 2) what is the underlying diagnosis
- 3) what drug would you give for the cardiac abnormality (route & dose), how does it work, how would you monitor it?
- 4) What 4 other management steps apart from O2
- 8. Man Assaulted. Facial XR, laceration under eye.
  - 1) 3 features on XR (blood in sinus, crescent sign, teardrop sign)
  - 2) 4 points on examination of orbit and its contents
  - 3) 3 points in management

- 9. Fundoscopy picture
- 1) what 6 points would you explore in history
- 2) describe the picture (2 points), what is the diagnosis
- 3) what 6 associations with this condition
- 10. young child with stridor, with recession
  - 1) 4 other diagnoses
  - 2) croup scoring: 4 out of 5 features to assess severity
  - 3) 3 drugs and routes
  - 4) 2 reasons to admit
- 11. Man arrives with 3/12 history of SOB, cough Male partner HIV +ve being treated for TB
- 1) describe XR (RUZ collapse)
- 2) 3 differentials from TB
- 3) 3 lung problems (?organisms) in HIV
- 4) 6 points for Ix in the ED
- 12. Man arrives in department saying exposed at railway, collapes Other people affected
- 1) apart from calling ED consultant what 4 steps would you take
- 2) what 4 features of muscarinic poisoning woould you expect
- 3) what three treatments would you give (apart from O2)
- 13. Chronic alcoholic ongoing seizure BM 2.2
- 1) define Status Epilepticus
- 2) what 3 treatment options would you give this patient
- 3) still fitting 10 mins later, two treatment options
- 4) 4 things predisposing this man to seizures
- 14.

Intermittent abdo pain in child after viral infection (with rash)

- a) what is the diagnosis
- b) what 3 predisposing factors
- c) what analgesia (dose and route)
  - d) what 2 options
- d) 3 points for your SHO to manage fluid requirments
- 15.

Head injury kite surfing. GCS 8 CT loss of grey/white differentiation Xray of C-spine + tomogram 2 litres fluid P65, bp 95/40

- 1)4 features of the xray and tomogram (c5 # ant vertebral, ?peg,?soft tissue,)
- 2)comment on cardiovascular status
- 3) given the cardiovascular status and xray what is the diagnosis
- 4) what 4 other features

16. XR of supracondylar #

- Describe the Xray
  two neurological complications, and how would test this
  another joint + injury leading to neurovascular compromise