

CHRISTIAN SERVICE UNIVERSITY COLLEGE

KUMASI – GHANA

FACULTY OF HEALTH AND APPLIED SCIENCES DEPARTMENT OF PHYSICIAN ASSISTANTSHIP STUDIES END OF SECOND SEMESTER EXAMINATIONS, 2020/2021 ACADEMIC YEAR BSc PHYSICIAN ASSISTANTSHIP STUDIES (MEDICAL)

Level 400

PACS 402: INTERNAL MEDICINE III-

May, 2021

[60marks]

Time Allowed: 2 hrs.

GENERAL INSTRUCTIONS:

This paper consist of two sections A & B. Answer both sections, A on your question paper and B in the answer booklet provided.

Write your index number, programme option and signature clearly at the top of every page of the question paper and answer booklet used.

Section: A

- This section consist of 10 multiple questions. Answer All Questions
- Choose the most appropriate answer by encircling you're of the options provided against each question.

ex numberProgramme Option	
hree days after admission the mouth was noted to be deviate weakness of the right side of the face. Even hought he could n	ed to the left and there was not close the right eye, he was
able to wrinkle both sides of the forehead. He was able to motherizontally but was not able to lift it above the bed.	ve the right lower himb
vii. What is your diagnosis now?	
viii. Why is he able to wrinkle both sides of the forehead even thright eye?	ough he could not close the
ix. What grade of power has he got in right lower limb?	
x. How would you manage him now?	
xi. Name 4 areas of the body which will be prone to developmen would you prevent him from getting pressure sores	nt of pressure sores and how
xii. What single investigation will you do to enable you make a c	definite diagnosis?
2. (10 MARKS)	
A 29 year old mechanic presents with a sudden onset of sevents to the back with associated nausea and vomiting	re abdominal pain radiating
i. Name 2 possible causes of this presentation.	
On examination he is found to have BP 100/60, PR 120, and abdomen.	board- like rigidity of the
ii. What management should you undertake?	/ %
iii. Name 2 laboratory findings that will confirm your diagnosis	

3. (20 MARKS)

A 33 year old woman was admitted in an unconscious state to Komfo Anokye Teaching Hospital. According to the husband, she had been unwell for the past 3 weeks. A day before her admission she had become increasingly confused and drowsy. She was not taking any diuretics but was passing urine and drinking water frequently.

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List 3 diseases which present with Polyuria.

ii. What laboratory tests would you do to confirm the above diagnosis and what results would you expect?

On examination the patient was unconscious, dehydrated, wasted and had a temperature of 38.5C. Pulse was 100bpm. BP = 100/70mmHg. Her breathing was rapid and rather deep. Her breath had a peculiar smell. There was no neck rigidity, no pallor and no lateralizing signs neurologically.

iii. What is the most like diagnosis?

iv. If facilities were available at KATH what 4 important blood tests would you do at this stage?

- v. What is the cause and mechanism which explains her breathing?
- vi. Describe how you would treat this unconscious patient.

A year later the patient was referred by her General Practitioner to see the physician specialist at KATH. She complained of severe dizziness whenever she got out of bed in the morning as well as a tingling sensation in the feet and hands. What worried her most was the weakness in the legs and difficulty in walking. The clinical examination showed that her general condition was good. No pallor, the chest was clear, the BP on standing was 90/70mmHg, but on lying was 130/80mmHg. The heart is not enlarged. No murmurs were heard.

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vii. What has this patient developed?

viii. What neurological signs would you expect on the legs?

ix. How would you now treat this patient?