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POSTGRADUATE INSTITUTE OF MEDICINE
UNIVERSITY OF COLOMBO

MD (FAMILY MEDICINE) EXAMINATION – FEBRUARY 2024

Date: 14th February 2024

Time: 9.30 a.m. – 12.00 noon

STRUCTURED ESSAY PAPER

Answer **all five (05)** questions.

Answer each question in a separate book.

All questions carry equal marks.

1. Patient safety is a key concern of all of those working in healthcare. Describe the key elements of an effective safety monitoring process for clinical and non-clinical aspects of running a family medicine clinic and explain how these contribute to patient safety. (100%)

2.
 - 2.1. Managing uncertainty is an important skill that should be learned and practised by any family physician. Discuss how family physicians deal with uncertainty in day-to-day practice using examples. (50%)
 - 2.2. Discuss the use of family lifecycle in optimising care in family practice. Illustrate your answer with examples. (50%)

3. Mr Seneviratne is a 57-year-old manual labourer at a company. He lives with his wife and son's family. He is diagnosed to have hypertension and is on Losartan 50 mg twice a day. No other diagnosed diseases. He has been having a mild backache for several months, which improves with paracetamol. He came today with acute retention of urine. His blood pressure measured by the practice nurse is 170/95 mmHg.
 - 3.1. Outline how you would manage him today. (40%)

During the follow up care, he was found to have a carcinoma of the prostate with few metastatic lesions in the lumbar spine. You referred him to a genitourinary surgeon for further care. He had undergone TURP (trans urethral resection of prostate) and bilateral orchidectomy followed by zoledronic acid infusion and has been discharged from the hospital 2 weeks ago. His son requests a home visit to see Mr Seneviratne.
 - 3.2. Describe the assessment and care you would provide during the home visit. (60%)

Contd...../2-

4. Mrs Perera 73-years of age and her husband, Mr Perera came to your clinic for the first time. She is diagnosed with heart failure following a myocardial infraction 4 years ago. She also has diabetes, hypertension, hyperlipidaemia, osteoporosis and COPD.

She attends cardiology clinic in the hospital and visits an endocrinologist and a respiratory physician on and off. Her last follow-up visit had been 10 months back. However she continues the same medications.

She had checked fasting sugar and blood pressure at home. She has not done any other investigation for this entire duration. She has come to consult you, since her fasting blood sugar is 210 mg/dL.

She lives with her husband, who has osteoarthritis of both knee joints. He doesn't have any other comorbidities. Their income is from her husband's pension as a postmaster. They don't have any help at home and manage all the household work with difficulty. Both their daughters are living in Australia.

Blood pressure measured at the clinic is 160/95 mmHg.

She is on

Metformin	1000mg twice a day
Gliclazide	160mg twice a day
Losartan	50mg twice a day
Bisoprolol	2.5mg mane
ISMN	10mg mane
Atorvastatin	20mg nocte
Aspirin	75mg nocte
Clopidogrel	75mg nocte
Furosemide	40mg mane and 2 pm
Spironolactone	50mg mane
Beclomethasone MDI	400micrograms one puff bd.
Salbutamol MDI	100micrograms as required
Alendronate	70mg weekly

Describe your plan of management for Mrs Perera today and the long-term care for the family. (100%)

Contd...../3-

5. Mrs. Jayarathna a 37-year-old, comes to your practice to discuss the behavioural problems of her 7-year-old son Mithun, who is very inattentive and not obedient. His class teacher also has complained that he is not listening and obeying her commands, not completing homework or given tasks. He is unable to sit in the classroom and always stands or runs out. He is little aggressive and fights with children. His school performance also has been deteriorating. Mrs. Jayarathne says that Mithun always fights with his 5-year-old younger brother. Mithun had fractured his forearm after a fall from a tree, few months back. His behaviour has been the same at unfamiliar places as well. Mithun has been impulsive and inattentive from early childhood, but parents had assumed that his behaviour was normal as he is the first-born child. Mithun was born following an uneventful pregnancy at term and was breast fed for 6 months. His immunization is up to date. Mithun and his brother are studying in a leading boys' school where Mrs. Jayarathne works as an English teacher. She says that she is feeling very low when others discuss his behaviour. Her younger son's behaviour is normal. Her husband is an accountant of a private firm. They live in their own house. They have a car and a motorcycle at home. Mithun's paternal grandparents live with them. They also worry about Mithun's problematic behaviour as it worsens their high blood pressure. They are worried that one day he will be like their younger son – Mithun's uncle, who has not had proper education, and cannot hold a job. Mrs. Jayarathne is worried about Mithun's future and probable physical harm and social problems the family might face. She wants to know what is wrong with him, whether he is mentally subnormal and how they can help Mithun to live a normal life.

- 5.1. State the probable diagnosis giving reasons for your answer. (30%)
- 5.2. As the family physician, how would you confirm the diagnosis and manage this problem. (70%)