PSYCHIATRY

DEPRESSION

* Enumerate the somatic symptoms/ melancholic features in depression
* 25 yr old female, 6 months h/o low mood, anhedonia, guilt feeling, reduced self confidence, insomnia, loss of appetite, weight loss, early morning worsening of mood and forgetfulness. Write complete ICD-10 diagnosis and the pychotropic you will prescribe
* What are c/f of depression and how will you manage it at primary care settings?
* What is fluoxetine? Indications and S/E and dose range and half life of it?

SCHIZOPHRENIA

* Enlist first rank symptoms
* S/E of clozapine
* What are the causes of catatonia? Enumerate the various catatonic signs
* 25 yr old male presented with 2 yr h/o decreased social interaction, suspiciousness, 3rd person auditory hallucination, poor self care along with episodes of unprovoked agitations
	+ Possible clinical diagnosis
	+ Treatment of schizophrenia
* Differentiate between typical and atypical antipsychotics
* Important therapeutic indications of clozapine. What are investigations required to detect impending S/E in a patient of clozapine
* Diagnosis of schizophrenia

OCD

* Adolescent female with 4 yr continuous illness of repeatedly washing her hands after eating, using lot of water for bathing. Her mother complains she usually spends 10 hrs a day in these activities
	+ Diagnosis
	+ Treatment
	+ What is the pharmacotherapy?
* What is OCD? Various types of compulsions
* Symptoms, psychological and pharmacological treatments of OCD
* Define OCD with examples of 2 different obsessions and compulsions
* OCD
* Define obsessions and compulsions

ADHD

* C/f of ADHD
* Treatment of ADHD

BIPOLAR DISORDER

* What is bipolar affective disorder? Write various pharmacological options in bipolar mania
* How to identify bipolar disorder? How to treat it?

PHOBIA

* Different types of phobia. Features of each of them and how to diagnose and treat them?
* 22 yr old student pursuing his graduation in humanities comes to the psychiatry OPD. He reports feeling difficulty in eating in parties, making presentation as a part f his assignment. He complains of dryness of throat, tremulousness, shaking of legs and stuttering while making a presentation. He is otherwise able to speak comfortably and fluently when in company of his friends. What is his diagnosis and what medications can be prescribed to help him? Non pharmacological therapy that’s beneficial?
* 28 yr complains of fear of being killed by his relatives and people in his work place for last 6 months. He is fully aware that there is no ground for such thought. But this fear doesn’t go away. Discuss the possible diagnosis and management

SUBSTANCE ABUSE DISORDER

* What are ICD 10 diagnostic criteria for substance dependence? What are medical complications associated with alcohol dependence?
* An adolescent student with h/o substance abuse presents with symptoms of severe anxiety, diaphoresis, running nose and eyes along with back pain, agitation and dilated pupil
	+ What could be the substance of abuse and antagonist used for its treatment?
* 32 yr old male with h/o substance abuse presented to casualty in a state of acute confusion with impaired orientation to time and place, restlessness, generalised tremulousness, along with account of frequently experiencing auditory and visual hallucinations
	+ Possible substance
	+ Name clinical condition
* Delirium tremens and management of patient with alcohol withdrawal delirium
* 24 yr old male came to deaddiction clinic with his cousin brother stating that he stopped taking a drug 3 days ago which he used to take regularly for last 2 yrs now is having severe body ache, feeling cold and unable to sleep, discharge from nose and loose motions. On enquiry he is regularly smoking cigarette, occasionally taking alcohol. No major illness or organic events in past
	+ Offending drugs
	+ Other withdrawal features
* Nicotine dependence
* 33 yr old male presents with 5 days of fever, rigor, sweats, malaise, shortness of breath, cough with sputum and chest pain. On examination he was febrile, tachycardia, hypotension. Chest examination revealed bronchial breath sounds, coarse crepitation. Chest X-ray revealed wide spread consolidations on B/L lower lobes. Last intake of alcohol was 2 months back but he had been a smoker for 12 years with h/o pneumonia previously. Investigations revealed electrolyte derangements and acidic pH. Since 1 day he has sudden onset of not recognising the family members, pulling away cannula, he thinks he is in jail and complains of seeing insects crawling over his body
	+ D/d
	+ Investigations
	+ Management
* Enumerate the various uncomplicated and complicated withdrawal symptoms of alcohol use disorders
* 40 yr old male gutka chewer for last 7 years after developing submucous fibrosis has decided to quit tobacco chewing and has tried several methods for it and failed. How to manage such a case?

SUICIDE

* RF for suicide

ECT

* What is ECT? Write the indications and C/I for use of ECT in psychiatry

PERSONALITY DISORDERS

* Classify and enumerate the various personality disorders

PANIC DISORDERS

* C/f of panic disorders

SOMATOFORM DISORDERS

* List 5 somatoform disorders and the management of somatoform disorders

MANIA

* An adolescent boy presents with 10 days h/o irritability, increased talking, demanding and overspending, reckless driving with decreased sleep and appetite
	+ Possible diagnosis
	+ Treatment

CHILDHOOD ILLNESS

* C/f of childhood autism
* 4 yr old boy brought by parents to OPD concerns regarding inadequate development. He just started walking and is able to address his parents as mama and baba since last few weeks. Passes urine in his pants and doesn’t seem to be bothered by it. He has to be fed by his mom and he can’t even take off his pants. He appears shaky, shakes hands of doctor and plays with rattle offered. He appeared shy and couldnot even identify his body parts. Which given a pen he started scribbling but coulnot draw any figure
	+ Diagnosis
	+ Common causes of developmental delay

MISCELLANEOUS

* Healthy parenting
* Gadget addiction
* Define insight and describe different grades of insight