

**RESPIRATORY MEDICINE**

**PAPER-IV**

Time: 3 hours  
Max. Marks:100

RPD/J/19/42/IV

**Important Instructions:**

- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

**Write short notes on:**

1. a) Bronchoscopic treatment modalities to control endobronchial bleeding after endobronchial biopsy of right lower lobe bronchial neoplastic growth. 4+3+3  
b) Bronchoscopic treatment for emphysema.  
c) Conservative management of pneumothorax.
2. a) Sampling of peripheral pulmonary lesions. 3+3+4  
b) Complications of bronchoscopy.  
c) Rigid thoracoscopy.
3. a) Role of ultrasonography in pulmonary practice. 5+5  
b) Utility of Ultrasonography in ICU and describe different signs observed in different conditions.
4. a) Assessment of small airways function. 3+4+3  
b) EBUS.  
c) Liquid lung biopsy.
5. a) Pathophysiology of pleural effusion. 5+2+3  
b) What are different types of pleural effusion?  
c) Enumerate different causes of above types.
6. a) Mediastinal lymph node stations 4+3+3  
b) Stenting in airways obstruction  
c) Indications and complications of tracheostomy.
7. a) Evaluation of chronic cough. 4+4+2  
b) Management of cough.  
c) Complications of cough.
8. a) Pleurodesis 5+5  
b) NIV

**P.T.O.**

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|-----|---|-------|
| 9.  | a) Various techniques of oxygen administration.                         | 4+3+3 |
|     | b) Endotracheal intubation  |       |
|     | c) Allergy testing  |       |
| 10. | a) Indications for lung transplantation.                                | 4+3+3 |
|     | b) Post-operative management and complications of lung transplantation. |       |
|     | c) Immunosuppressive therapy after lung transplantation.                |       |

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