April-2001

[KD 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

Branch III — Nephrology

(Revised Regulations)

Paper II — CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time : Three hours Maximum : 100 marks

Answer ALL questions.

1. Describe the clinical features, etiopathogenesis, management and prevention of peritonitis in patients on ambulatory peritoneal dialysis. (25)

2. Describe the clinical manifestations, pathogenesis, histology and management of IgA nephropathy. (25)

3. Write briefly on : (5 × 10 = 50)

(a) Interleukin — 2 receptor antagonists

(b) Hemostatic disturbances in chronic renal failure

(c) Value of ambulatory blood pressure monitoring

(d) Extrarenal manifestations of autosomal dominant polycystic kidney disease

(e) Renal involvement in lymphoma.

November-2001

[KE 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II — CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time : Three hours Maximum : 100 marks

Answer ALL questions.

1. Describe the pathogenesis, clinical presentation and management of pregnancy – induced hypertension. (25)

2. Discuss the implication and management of pre and post–transplant hepatic dysfunction. (25)

3. Write short notes : (5 x 10 = 50)

(a) Mal–nutrition in chronic renal failure

(b) Long–term complication of renal transplantation

(c) Glomerular collagens in ALPORT syndrome

(d) REDY system for dialysis

(e) Non–infectious complications of continuous ambulatory peritoneal dialysis.

March-2002

[KG 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II — CLINICAL NEPHROLOGY DIALYSIS AND TRANSPLANTATION

Time : Three hours Maximum : 100 marks

Answer ALL questions.

1. Discuss the current concepts in the aetiopathogenesis of pregnancy induced hypertension and the principles of managing a case of HELLP syndrome presenting in 34th week of gestation. (25)

2. Briefly describe the metabolic complications in patients on CAPD and outline the approach to their management. (25)

3. Write briefly on : (5 × 10 = 50)

(a) Steroid resistant Acute Rejection

(b) Iron therapy in CRF patients

(c) Nutrition in critically ill ARF patient

(d) Cyclosporin in glomerular disease

(e) Findings of the UKPD study and its relevance to the nephrologist.

[KK 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II — CLINICAL NEPHROLOGY

Time : Three hours Maximum : 100 marks

Theory : Two hours and forty minutes Theory : 80 marks

M.C.Q. : Twenty minutes M.C.Q. : 20 marks

Answer ALL questions.

A. Essay questions : (2 × 15 = 30)

(1) Discuss in detail about the long term management of Hepatitis *B* and Hepatitis *C* infected renal allograft recipient.

(2) Discuss the differential diagnosis, investigations and management of paediatric hypertension.

B. Short notes on : (10 × 5 = 50)

(1) Hepato renal syndrome

(2) Cerebral salt wasting syndrome

(3) Cast nephropathy

(4) Sterile peritonitis

(5) Organ preservation

(6) Obstetric Acute renal failure

(7) Cardio vascular risk intervention in End stage renal disease

(8) Medical management of Renal Stone disease

(9) Tertiary prevention of diabetic nephropathy

(10) Peritoneal equilibrium test.

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[KM 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II — CLINICAL NEPHROLOGY

Time : Three hours Maximum : 100 marks

Theory : Two hours and forty minutes Theory : 80 marks

M.C.Q. : Twenty minutes M.C.Q. : 20 marks

Answer ALL questions.

I. Essay : (2 × 15 = 30)

(1) Discuss in detail the Renal involvement in HIV infection.

(2) Discuss the factors responsible for the progression of Renal disease.

II. Write notes on : (10 × 5 = 50)

(a) Etio-pathogenesis of Malignant Hypertension.

(b) Experimental models of Acute renal failure.

(c) Hepato-Renal syndrome.

(d) Current concepts of renal bone disease.

(e) Infection localisation tests in Urinary Tract Infection.

(f) Type-4 Renal Tubular Acidosis.

(g) Plant toxin induced Acute Renal Failure.

(h) Role of Anti Neutrophil Cytoplasmic Antibody (ANCA) in vasculitis.

(i) Steroid Resistant Nephrotic Syndrome.

(j) Endocrine abnormalities in Chronic Kidney Disease.

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[KO 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II — CLINICAL NEPHROLOGY

Time : Three hours Maximum : 100 marks

Theory : Two hours and forty minutes Theory : 80 marks

M.C.Q. : Twenty minutes M.C.Q. : 20 marks

Answer ALL questions.

I. Essay : (2 × 15 = 30)

1. Discuss the specific pharmacological approaches to clinical Reno protection.

2. Discuss cardiovascular disease in chronic kidney disease.

II. Write short notes on : (10 × 5 = 50)

(a) Parenteral Iron therapy in Chronic Kidney disease.

(b) Acute Renal Failure in specific clinical settings.

(c) Contrast induced nephropathy.

(d) Fluid and Electrolyte disorders in the ICU.

(e) Microalbinuria – its role in kidney disease.

(f) Hypertension in chronic kidney disease.

(g) Renal involvement in multiple myeloma.

(h) Treatment of IgA nephropathy.

(i) Catheter associated urinary tract infection.

(j) Ischemic Nephropathy.

[KP 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II — CLINICAL NEPHROLOGY

Time : Three hours Maximum : 100 marks

Theory : Two hours and forty minutes Theory : 80 marks

M.C.Q. : Twenty minutes M.C.Q. : 20 marks

Answer ALL questions.

I. Essay :

(1) Describe the clinical manifestations, pathogenesis, histology and management of IgA nephropathy. (20)

(2) Pathologic classification and management of FSGS. (15)

(3) Metabolic syndrome and its renal consequences. (15)

II. Write notes on : (6 × 5 = 30)

(a) Polycystic kidney disease and cilia.

(b) Tuberculosis and the Kidney.

(c) Thin basement membrane disease.

(d) Renal Failure Associated with Cancer.

(e) Obesity and the Kidney.

(f) Fungal infections of urinary tract.

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[KQ 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II – CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time : Three hours Maximum : 100 marks

Theory : Two hours and forty minutes Theory : 80 marks

M.C.Q. : Twenty minutes M.C.Q. : 20 marks

Answer ALL questions.

I. Essay :

1. Discuss pathogenesis, clinical manifestations and management of hepatitis C associated glomerular disease. (20)

2. Discuss the factors responsible for the progression of Renal disease. (15)

3. Pathogenesis, diagonsis and treatment of thrombotic thrombocytopenic purpura. (15)

II. Short notes : (6 × 5 = 30)

1. Filarial nephropathy.
2. Obstructive nephropathy.
3. Post-transplant lymphoproliferative disease.
4. Refractory post-transplant hypertension.
5. Deafness and renal disease.
6. Renal epidemiology in India.

[KR 010] **Sub. Code : 1202**

D.M. DEGREE EXAMINATION.

(Higher Specialities)

(Revised Regulations)

Branch III — Nephrology

Paper II — CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Time : Three hours Maximum : 100 marks

Theory : Two hours and forty minutes Theory : 80 marks

M.C.Q. : Twenty minutes M.C.Q. : 20 marks

Answer ALL questions.

I. Essay questions :

(1) Discuss Etiopathogenesis, clinical spectrum and management of ANCA-associated vasculitis (AAV). (20)

(2) Discuss the management of Hypertension during pregnancy. (15)

(3) Describe renal diseases associated with dysproteinemia. (15)

II. Short notes : (6 × 5 = 30)

(a) Cholesterol embolism

(b) Chronic malarial nephropathy

(c) Calcimimetics agents

(d) Eractile dysfunction in chronic renal failure

(e) Post transplant proteinuria

(f) Renal papillary necrosis.

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August 2008

[KT 010] **Sub. Code: 1202**

D.M. DEGREE EXAMINATION

(Higher Specialities)

(Revised Regulations)

Branch III - Nephrology

Paper II– CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Q.P. Code: 161202

Time: Three hours **Maximum: 100 Marks**

ANSWER ALL QUESTIONS
Draw suitable diagrams wherever necessary.

I. Essays: **2 x 20 = 40 Marks**

1. IgA nephropathy: Pathogenesis, histology, markers of progression and management.

2. Relationship between aldosterone blockade, ACE inhibition and PROTEINURIA.

II. Write short notes on: **10 x 6 = 60 Marks**

1. Cisplatin nephrotoxicity.
2. Role of podocyte in renal disease.
3. Acute kidney injury in pregnancy.
4. Adynamic bone in patients with CKD.
5. Early arteriovenous Fistula Failure.
6. Personal Dialysis Capacity test.
7. Screening for renovascular hypertension.
8. Pathogenesis and diagnosis of myeloma kidney.
9. Sustained low efficiency or extended daily dialysis.
10. Use of mycophenolic acid in non-transplant renal diseases.

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August 2009

[KV 010] **Sub. Code: 1202**

D.M. DEGREE EXAMINATION

(Higher Specialities)

Branch III – Nephrology

(Revised Regulations)

Paper II – CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Q.P. Code: 161202

Time: Three hours **Maximum: 100 Marks**

Answer ALL questions

Draw suitable diagrams wherever necessary.

I. Essays: **2 x 20 = 40**

1. Discuss the pathogenesis of renal stone disease.
2. Discuss on biomarkers in acute and chronic kidney disease.

II. Write short notes on: **10 x 6 = 60**

1. Bartter syndrome.
2. Pathogenesis of Nephrotic hyperlipidemia.
3. RIFLE classification scheme for ARF.
4. Bone marrow transplantation nephropathy (BMTN).
5. Renal vein thrombosis.
6. Vascular access related steal syndrome.
7. No – Heparin hemodialysis.
8. First use syndrome.
9. Fungal peritonitis.
10. Peritoneal equilibration test (PET).

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August 2011

[KZ 010] **Sub. Code: 1202**

DOCTORATE OF MEDICINE (D.M.) DEGREE EXAMINATION

(SUPER SPECIALITIES)

BRANCH III – NEPHROLOGY

CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Q.P. Code: 161202

Time : 3 hours **Maximum : 100 marks**
(180 Min)

Answer ALL questions in the same order.

I. Elaborate on :	**Pages (Max.)**	**Time (Max.)**	**Marks (Max.)**
1. Discuss in detail the etiology, pathogenesis, experimental models, classification, clinical features, diagnosis and management of Renovascular hypertension.	11	35	15
2. Detail nutritional assessment in nephrology. Discuss dietary management in nephrotic syndrome, AK1 and CKD.	11	35	15
II. Write notes on :			
1. Renal failure indices.	4	10	7
2. Non proteinuric hypertension in pregnancy.	4	10	7
3. Nail Patella Syndrome.	4	10	7
4. Ethylene glycol poisoning.	4	10	7
5. Treatment of 19A Nephropathy.	4	10	7
6. Schistosomiasis and Renal Transplantation.	4	10	7
7. Cast Nephropathy.	4	10	7
8. Dialysis dosing in AK1.	4	10	7
9. Xeno transplantation.	4	10	7
10. Hepato renal syndrome.	4	10	7

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[LB 010] **AUGUST 2012** **Sub. Code: 1202**

D.M – NEPHROLOGY

Paper – II CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Q.P. Code: 161202

Time: 3 hours **Maximum: 100 marks**

(180 Min)

Answer ALL questions in the same order.

I. Elaborate on:	**Pages (Max.)**	**Time (Max.)**	**Marks (Max.)**
1. What is amyloid? How is it classified? Describe the renal lesions in amyloidosis.	16	35	15
2. Describe the renal lesions on systemic sclerosis. What is scleroderma crisis and how is it managed?	16	35	15
II. Write notes on:			
1. What is pseudohyperkalemia? What are the manifestations of acute hyperkalemia and how do you treat this?	4	10	7
2. How would you investigate a case suspected to have diabetes Insipidus? What is the differential diagnosis?	4	10	7
3. What is the current opinion on the role of Dopamine in acute kidney Injury?	4	10	7
4. What are the RIFLE and AKIN classification? What is the difference between the two and advantages of each?	4	10	7
5. Describe the kidney lesions seen with malarial infection.	4	10	7
6. What is the abnormal serology and pathology seen in the kidney in Wegners Granulomatosus? How is the condition treated?	4	10	7
7. What is Schols solution? What is its composition and indications for its use?	4	10	7
8. What are direct renin inhibitors? What is the advantage of using it over converting enzyme inhibitors or angiotensin receptor blockers?	4	10	7
9. What is e GFR? What is its importance? What are the common methods of estimating e GFR?	4	10	7
10. What is Masugis nephritis? How is it produced and what is the human equivalent?	4	10	7

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(LD 010) **AUGUST 2013** **Sub. Code:1202**

D.M. – NEPHROLOGY
Paper – II CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION
Q.P.Code: 161202

Time: Three Hours **Maximum: 100 marks**

I. Elaborate on: **(2X15=30)**

1. Membranous Nephropathy---Pathogenesis, Pathology, Natural History, Management and Post transplant recurrence.

2. Describe Rubin's time table of infections post transplant. Describe in detail the etiopathogenesis, clinical features, risk factors, diagnostic modalities and management of CMV infection in the post renal transplant setting.

II. Write notes on: **(10X7=70)**

1. Types of Heparin induced thrombocytopenia and management strategies.
2. Dialysis prescription in a pregnant woman on maintenance HD program.
3. Post transplant lymphoproliferative disorder types, clinical features, diagnosis and management.
4. Banff 2007 updated working classification of renal allograft pathology
5. Indications and complications of therapeutic plasma exchange.
6. Discuss the non-uremic applications of extracorporeal blood purification.
7. How to manage steroid resistant nephritic syndrome in children.
8. Causes and Management of Metabolic Acidosis in ICU.
9. Acute Kidney Injury in HIV patients: Epidemiology, Etiology, Risk factors and management.
10. Emphysematous Pyelonephritis: Clinicoradiological Classification, Pathogenesis Current Management and Prognosis.

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[LF 010] **AUGUST 2014** **Sub. Code: 1202**

D.M. – NEPHROLOGY

Paper II – CLINICAL NEPHROLOGY, DIALYSIS, TRANSPLANTATION

Q. P. Code: 161202

Time: Three Hours **Maximum: 100 Marks**

Answer ALL questions in the same order.

I. Elaborate on: **(2 x 15 = 30)**

1. Discuss the Clinical features, Genetics, Histology & Management of Steroid Resistant Nephrotic Syndrome in a 6 year old boy.

2. Discuss the various changes in renal senescence.
   What are the risk factors of Acute Kidney Injury in elderly?
   How will you prognosticate & treat an elderly man with Acute Kidney Injury?

II. Write notes on: **(10 x 7 = 70)**

1. ACOG 2014 classification of Hypertensive Disorders of Pregnancy.
   Compare the current classification with the previous classification and write the explanations for the modification.

2. Role of Ambulatory Blood Pressure Monitoring (ABPM) in the management of Hypertension.

3. What are the Podocyte changes in Diabetes?
   How will you retard the progression of Diabetic Kidney Disease?

4. Current guidelines on management of Granulomatosis with Polyangitis?

5. What is resistant Lupus Nephritis? How will you treat a patient with resistant Lupus Nephritis?

6. How will you diagnose and treat HCV infection in a patient on Hemodialysis, awaiting Kidney transplantation?
   What are the guidelines to prevent spread of HCV infection in the Dialysis Unit?

7. Differential Diagnosis of Nodular glomerulosclerosis.

8. Explain ADPKD as a ciliopathy. What are the drugs used in the treatment of ADPKD?

9. What are the strategies to enhance the donor pool in Kidney Transplantation?

10. Pathophysiology of VUR and Reflux Nephropathy.