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Reg. No.				

MANIPAL UNIVERSITY

SECOND YEAR M.Sc. (RRT & DT) DEGREE EXAMINATION – JUNE 2017

SUBJECT: MDT 702 – MANAGEMENT OF HEALTHCARE ORGANIZATION (TWO YEARS PROGRAMME 2014-15)

Saturday, June 03, 2017

Time: 10:00 - 13:00 Hrs.

Max. Marks: 80

1. Define the term 'Dialysis'. Discuss the steps in implementation of a dialysis unit for a tertiary care hospital.

(5+15 = 20 marks)

- 2. Write short notes on the following questions:
- 2A. PCPNDT Act
- 2B. Span of management
- 2C. Hospital blood bank
- 2D. Theories of motivation
- 2E. Budgeting in hospitals
- 2F. Management by objectives (MBO)

 $(10 \text{ marks} \times 6 = 60 \text{ marks})$

Reg. No.					
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MANIPAL UNIVERSITY

SECOND YEAR M.Sc. (RRT & DT) DEGREE EXAMINATION – JUNE 2017

SUBJECT: MDT 701a/MDT 801 – ADVANCED HD PROCEDURES, COMPLICATIONS IN RENAL DISEASE PATIENTS & DIALYSIS PATIENTS AND PATIENT EDUCATION (TWO/THREE YEARS PROGRAMME 2014-15)

Thursday, June 01, 2017

Time: 10:00 - 13:00 Hrs.

Max. Marks: 80

- 1A. ECG changes indicative of potassium intoxication include
 - i) All tented T waves
 - ii) Prolonged PR intervals
 - iii) Wide QRS complex
 - iv) All of the above
- 1B. In chronic kidney disease, multiple complex derangements occur in calcium metabolism. As a result, patient experience
 - i) Secondary hyperparathyroidism
 - ii) Metastatic calcification
 - iii) Oesteomalacia
 - iv) All of the above
- 1C. Dialysis disequilibrium syndrome may be prevented by all of the following except
 - i) High ultrafiltration
 - ii) Short frequent dialysis
 - iii) Slow blood flow rate
 - iv) Osmotic agents
- 1D. The use of low sodium in dialysate solution can cause
 - i) Head ache, hypotension, muscle cramps
 - ii) Vomiting, restlessness, diarrhoea
 - iii) Hypertension, cramps, abdominal pain
 - iv) Hypoglycemia, hypokalemia
- 1E. The dialysis personnel should recognize which one of the following factors as a cause of hemolysis during dialysis?
 - i) Extremely high levels of iron in the water
 - ii) Minimal anticoagulation
 - iii) Improper dialysate preparation
 - iv) Extremely low dialysate temperature
- 1F. Autoregulation in the kidney is not effective below mmHg mean arterial pressure
 - i) 100
 - ii) 120
 - iii) 140
 - iv) 80

- 1G. Which fluid is used to do peritoneal equilibration test
 - i) 2.5% dextrose
 - ii) Icodextrin
 - iii) 4.25% dextrose
 - iv) 1.5% dextrose
- 1H. All of the following are causes of hypo-responsiveness to Epoetin except
 - i) Severe hyperparathyroidism
 - ii) Iron deficiency
 - iii) Inadequate dialysis
 - iv) Hypoparathyroidism
- 11. Hemofiltration depends on
 - i) Diffusion
 - ii) Convection
 - iii) Radiation
 - iv) All of the above
- 1J. Creatinine clearance
 - i) Underestimates glomerular filtration rate
 - ii) Has no relation to glomerular filtration rate
 - iii) Overestimates glomerular filtration rate
 - iv) Equal to glomerular filtration rate

 $(1 \text{ mark} \times 10 = 10 \text{ marks})$

2. Long essay questions.

- 2A. Write about hemodialysis fluid and complications related to dialysate circuit and alarms.
- 2B. Write a note on anemia management in hemodialysis patients.

 $(10 \text{ marks} \times 2 = 20 \text{ marks})$

3. Short essay questions.

- 3A. Discuss complications during saline dialysis and what are the interventions should be taken for avoiding these complications.
- 3B. Explain Vitamin D derangement in chronic kidney disease.
- 3C. Discuss metabolic acidosis.
- 3D. Discuss patient education related to dialysis catheter care.
- 3E. Discuss complications associated with the types of anticoagulants used in hemodialysis.
- 3F. Discuss psychological issues related to chronic kidney disease patients.

 $(5 \text{ marks} \times 6 = 30 \text{ marks})$

4. Short note questions:

- 4A. List the complications associated with subclavian catheters.
- 4B. How does optimal ultrafiltration obtained without complication during hemodialysis?
- 4C. What are the disadvantages of fresh frozen plasma infusion during plasmapheresis?
- 4D. What is endotoxin?

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- 4E. What are the disadvantages of bicarbonate dialysate fluid?
- 4F. List the treatment options for hyperphosphatemia.
- 4G. What are the advantages of cuffs in peritoneal catheter?
- 4H. What is hemoperfusion?
- 4I. Write any two complications of tidal peritoneal dialysis.
- 4J. Which is the best vascular access and why?

 $(2 \text{ marks} \times 10 = 20 \text{ marks})$