



THE COLLEGES OF MEDICINE OF SOUTH AFRICA

Incorporated Association not for gain Reg No 1955/000003/08

Final Examination for the Fellowship of the College of Cardiothoracic Surgeons of South Africa

27 February 2020

Paper 1

3

(3 hours)

All questions are to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)

1	a) b) c)	Discuss deep hypothermia and circulatory arrest. Discuss methods of myocardial management in adult cardiac surgery. Discuss graft patency in coronary artery revascularisation.	(40) (40) (20) [100]
2	Brie	Briefly	

- a) Discuss chronic rheumatic heart disease in terms of aetiology and pathophysiology. (10)
- b) Compare and contrast mitral valve repair versus replacement in rheumatic heart disease.
- Apply aortic root anatomy in discussing aortic valve sparring procedures for ascending aortic aneurysms.

[100]

- a) Discuss the morphology of atrial septal defects and their surgical management. (40)
 - b) Classify ventricular septal defects and provide a morphological description. (30)
 - c) Describe the anatomy of vascular rings and slings and briefly discuss the principles of the surgical management. (30)

[100]



FC Cardio(SA) Final

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Paper 2

All questions are to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)

- 1 Write notes on the following clinical situations encountered in the management of non-small cell lung carcinoma. (Use lists and bullet paragraphs as far as possible)
 - a) Discuss the role of sublobar lung resection in a patient of 75-years of age with right upper lobe adenocarcinoma of 2.5cm in diameter. (40)
 - b) What are the oncological implications of a tumour that crosses a fissure between two adjacent lobes of the lung? (30)
 - c) Discuss the staging of a tumour located in the right main bronchus.

(30) [100]

- 2 Regarding the following thoracic conditions
 - a) Discuss your approach to cavitatory lung lesions. Your answer should include a list of causes. List investigations with reasons. List broad pathological categories and general management steps. You are not required to go into details of treatment of any specific pathology. (40)
 - b) Discuss the role of the open domicillary thoracotomy (also called fenestration or Eloesser flap) in the management of empyema thoracis. Your answer should list the principles of fenestration, the indications for fenestrations, the natural course of events following a fenestration and when might the surgeon consider closure of the fenestration. (30)
 - c) Discuss the pathophysiology of pectus excavatum.

(30) [100]

- 3 a) Discuss the aetiology and pathophysiology of pneumothorax. (20)
 - b) Discuss the indications and surgical management of pneumothorax. (40)
 - c) Discuss the management of rib fractures in a 65-year-old man who was involved in a motor vehicle accident. (40)

[100]