Final Fellowship Examination Essay & Short Answer Question Paper 12th September 2012

There are 10 questions, 5 in Section A and 5 in Section B
Answer ALL 10 questions

Time allowed for this paper is 3 hours

Section A

Question 1

A 79 year old man has been booked for urgent laparotomy for a perforated colon secondary to diverticular disease. He has a past medical history of hypertension and ischaemic heart disease and had a drug eluting intracoronary stent inserted 12 months previously. His current medications are lisinopril, bisoprolol, simvastatin, clopidogrel and aspirin. You are told that he is pyrexic (37.7 C), is in atrial fibrillation with a ventricular rate of 120 bpm and his blood pressure is 98/58 mmHg.

Describe your perioperative assessment and management of this patient.

Question 2

How would you define "conscious sedation"? What are the indications for it? List drugs that are commonly used and comment on the intraoperative management of patients undergoing this technique.

Question 3

How does one assess the nutritional needs of critically ill patients? What are the advantages of Enteral Nutrition compared to Parenteral Nutrition? List the possible *complications* of Enteral Nutrition

Question 4

Discuss the likely diagnosis and initial management of a 12 month old infant who presents to the Emergency Medicine Department of a non-specialist hospital with a 24 hour history of fever and coryzal symptoms. The infant has been irritable but now appears lethargic and is noted to be developing a petechial rash.

Question 5

Define (1) Volume of Distribution (2) Clearance and (3) Elimination Half Life. What advantages does a Total Intravenous Anaesthesia technique have over an inhalation one? What do you understand by the term "Target Controlled Infusion" (TCI)? What drugs are usually associated with *this* technique? What advantage does it confer over an "ordinary" drug infusion?

-----[Now Turn To Section B]-----

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Section B

Question 6

A 37 year old parturient G3P2 of 39 weeks gestation, who had presented earlier in spontaneous labour on the labour ward, suddenly collapses.

She is not making any respiratory effort and has no detectable pulse.

She had had an epidural sited earlier which had been functioning well.

The midwives say that she had complained of difficulty breathing, lost consciousness and had a seizure.

After initial resuscitation the patient developes a coagulopathy.

Discuss the initial management and suggest your differential diagnosis. Also discuss the *most likely* diagnosis and subsequent management of this patient.

Question 7

A 30 year old previously fit and healthy male has been declared brain stem dead following head injury, and is scheduled for organ donation. What may cause cardiovascular instability in such a patient? Why is it important to maintain cardiovascular stability pre- operatively? Describe what methods you might use, giving the rationale for your management.

Question 8

What are the indications for surgical tracheostomy? Describe a suitable anaesthetic technique for this procedure.

Ouestion 9

A 35 year old man is induced with propofol, fentanyl and suxamethonium for extraction of wisdom teeth. One hour later he has failed to establish spontaneous respiration. Discuss the possible causes and a suitable management plan. What advice would you give him regarding future anaesthetics?

Ouestion 10

What do you understand by "Therapeutic Hypothermia"?

List the indications for therapeutic hypothermia.

Suggest some mechanisms of action on the injured brain in therapeutic hypothermia.

What are the potential complications of therapeutic hypothermia?

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