1. **All of the followings are anesthetic measures to reduce the risk of regurgitation & aspiration in full stomach cases EXCEPT:**
2. Regional anesthesia if possible
3. Delay surgery if not emergency
4. N/G tube should be kept in place during induction of anesthesia
5. Decreasing of gastric contents

|  |
| --- |
| **Correct answer is C** |
| **Rational:**  N/G tube should not be kept in place during induction of anesthesia. Other options can decrease the risk of regurgitation and aspiration. |
| This question measures the following:  **Competency domain**: Preparation of Patients for Theatre **/**  **competency sub-domain:** Clinical Aspects for Fasting **/**  **Indicator**: Apply strategies to minimize regurgitation. |

1. **You are working in the operating room during the COVID-19 pandemic. You are about to receive a confirmed COVID-19 case who has severe trauma. What Personal Protective Equipment should you wear inside this operation?**
2. Gown, gloves, eye goggles and mask
3. Gown, gloves, eye goggles
4. N95 respirator, Gown, gloves, eye goggles
5. Surgical mask and gloves only

|  |
| --- |
| **Correct answer is a** |
| **Rational:**  When you face covid-19 patient, you have to wear all the measures that protect you. Those are Gown, gloves, eye goggles and mask.  N95 mask is not superior to surgical mask in protecting from covid-19. |
| This question measures the following:  **Competency domain**: Safety of practice and risk management **/**  **competency sub-domain:** Infection control and injury prevention **/**  **Indicator**: **Ability to follow Standard precautions of infection control protocols that reduce the risk of disease transmission when providing patient care** |

1. **A patient undergoes bronchoscope or removal of a foreign body. What neuromuscular blocker (NMB) is the best choice in this procedure?**
2. Succinylcholine
3. Vecuronium
4. Cisatracurium
5. Atracurium

|  |
| --- |
| **Correct answer is a** |
| **Rational:**  Succinylcholine is most often used because its short duration of action with an onset within 45-60 seconds, and a duration of action of 4-6 minutes of paralysis  Vecuronium duration of action is 25 to 30 minutes  Cisatracurium duration of action is 36 minutes (range: 29 to 46 minutes)  Atracurium duration of action is approximately 40 to 45 minutes |
| This question measures the following:  **Competency domain**: Preparation of Patients for Theatre **/**  **competency sub-domain:** Clinical Aspects for Fasting **/**  **Indicator**: Apply strategies to minimize regurgitation |

1. **While observing a 25 year old male healthy patient undergoing appendectomy under GA, a normal ETCO2 you'd accept for this patient is**
2. 40 mmHg.
3. 50 mmHg.
4. 30 mmHg.
5. 20 mmHg.

|  |
| --- |
| **Correct answer is a** |
| **Rational:**  A 'normal' EtCO2 for healthy patient is considered between 35–40 mmHg |
| This question measures the following:  **Competency domain:** Intra-operative care**/**  **competency sub-domain:** Patient monitoring **/**  **Indicator**: Apply routine monitoring and interpret values; |

1. **Hypotensive anesthesia is indicated in**
2. Inguinal hernia
3. Rhinoplasty
4. Laparoscopy cholecystectomy
5. Mastectomy

|  |
| --- |
| **Correct answer is b** |
| **Rational:**   Indications of hypotensive anesthesia are spinal surgery, hip or knee arthroplasty, craniosynostosis, hepatic resections, robotic surgery, and most surgeries at head area |
| This question measures the following:  **Competency domain**: Pharmacology**/**  **competency sub-domain:** Pharmacologic practice **/**  **Indicator**: Identify drugs required for use by the anesthetist for elective and emergency surgery |

1. **If the Blood Pressure of one patient is 150/90, then the Mean Arterial Pressure**
2. 70 mmHg.
3. 100 mmHg.
4. 110 mmHg.
5. 130 mmHg.

|  |
| --- |
| **Correct answer is c** |
| **Rational:**  MAP = {SBP + 2 (DBP)}/3  So, MAP = {150 + 2 (90) }/3= 330/3 = 110 |
| This question measures the following:  **Competency domain**: Intra-operative care **/**  **competency sub-domain:** Patient monitoring **/**  **Indicator**: Apply routine monitoring and interpret values. |

1. **In a 60 kg man, for Induction of anesthesia 350 mg of thiopentone sodium was injected through a cannula placed in cubital fossa. Even after 3 minutes patient was still awake and fingers of the cannulated hand started turning blue. Patient complained of severe pain in hand. Which one of the following Intervention is most appropriate at this stage?**
2. Injection of more thiopentone, suspecting inadequate of thiopentone
3. Injection of sodium bicarbonate through the same cannula to treat acidosis caused by tissue hypoxia
4. Injection of Lidocaine through the same cannula
5. Immediately remove the cannula and cannulate another vein to continue the procedure.

|  |
| --- |
| **Correct answer is C** |
| **Rational:**  ***Extra vascular infiltration*** should be avoided. Care should be taken to insure that the needle is within the [lumen](https://www.rxlist.com/script/main/art.asp?articlekey=20106) of the [vein](https://www.rxlist.com/script/main/art.asp?articlekey=5970) before injection of Pentothal (thiopental sodium) . Extra vascular injection may cause chemical irritation of the tissues varying from slight tenderness to venospasm, extensive [necrosis](https://www.rxlist.com/script/main/art.asp?articlekey=4514) and sloughing. This is due primarily to the high alkaline pH (10 to 11) of clinical concentrations of the drug. If extravasation occurs, the local irritant effects can be reduced by injection of 1% procaine locally to relieve [pain](https://www.rxlist.com/script/main/art.asp?articlekey=4723) and enhance vasodilatation. |
| This question measures the following:  **Competency domain**: Safety of practice and risk management **/**  **competency sub-domain:** Infection control and injury prevention **/**  **Indicator** Ability to manage accidental intra-arterial/ injection |

1. **What component of the circle system is not present in a Mapleson circuit?**
2. CO2 absorber
3. Reservoir
4. Fresh gas inlet
5. APL valve

|  |
| --- |
| **Correct answer is a** |
| **Rational: Anatomy of Mapleson Breathing Circuit**   * Face mask (towards patient end) * Reservoir bag (towards operator end) ... * Corrugated tube (between face mask and reservoir bag) * Fresh gas flow (FGF) inlet (at variable position) * Expiratory valve or Adjustable Pressure Limiting (APL) valve (at variable position)   **SO, Co2 absorber is not present at Mapleson Circuit** |
| This question measures the following:  **Competency domain**: Airway Management **/**  **competency sub-domain:** Oxygen Delivery Equipment & Self-Inflating Bags**/**  **Indicator:** Identify oxygen delivery devices. |

1. **Which one of the followings is false about AMBU Bag?**
2. Used for emergency ventilation because of their simplify and portability
3. It is not necessary in the operation room
4. Able to deliver almost 100 % oxygen
5. It contain a non-Rebreathing valve

|  |
| --- |
| **Correct answer is b** |
| **Rational:**  AMBU bag is simple and portable, it is used in emergency situations, able to deliver 100% of oxygen and it contains non rebreathing valve. Because of that, it is necessary in the operation room |
| This question measures the following:  **Competency domain**: Airway Management **/**  **competency sub-domain:** Oxygen Delivery Equipment & Self-Inflating Bags **/**  **Indicator**: Identify the use of self-inflating bags. |

1. **After emergence from anesthesia a patient in the recovery room seemed to experience vivid dreams and hallucinations, the most probable hypnotic drug used in this case**
2. Propofol
3. Pentothal
4. Ketamine
5. Midazolam

|  |
| --- |
| **Correct answer is C** |
| **Rational:**  Vivid dreams and hallucinations are known side effects of Ketamine |
| This question measures the following:  **Competency domain**: Sedation **/**  **competency sub-domain:** IV sedation **/**  **Indicator**: Identify side effects associated with the use of sedation |