



The Hong Kong College of Anaesthesiologists

Final Fellowship Examination

Paper I

19th August 2011 (Friday)

09:00 – 10:30 hrs

Instructions:

- a. There are three pre-labelled answer books. Please make sure you answer the respective questions in the appropriate answer book.
 - b. Write your examination number on the cover of each answer book.
 - c. Answer **ALL** questions (nine questions). They are worth equal marks and you should spend approximately ten minutes for each question.
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Scenario A

A 65 years old woman has chronic glomerulonephritis and end-stage renal disease that requires chronic ambulatory peritoneal dialysis in the past 4 years. She has renal cell carcinoma of the right kidney and is scheduled for radical right nephrectomy.

1. What are the major considerations in the pre-anaesthetic assessment of this patient?
2. What are your considerations and your plan for perioperative renal replacement therapy in this patient?
3. Postoperatively in the recovery room, the patient's plasma potassium is 6.9 mmol/L. Discuss your management.

Scenario B

A 60 years old woman with moderate obesity and non insulin dependant diabetes mellitus is scheduled for right shoulder arthroscopy in the beach chair position. Before general anaesthesia, a right interscalene block was performed.

1. Discuss the problems associated with the beach chair position and the strategies to minimize them.
2. Surgery was uneventful. Following extubation and transfer to the recovery room, the patient complained of breathing difficulty with oxygen saturation on room air of only 90%. List the possible causes of post-operative hypoxaemia in this patient and briefly outline your management.
3. On the third post-operative day the patient complained to you about persistent numbness in her right forearm down to her little finger. List the factors that may contribute to post-operative nerve injury in this patient and discuss prognosis and treatment.

Scenario C

A 60 years old male, previously fit and healthy, presents with headache and confusion and is found to have a large frontal midline tumour with extensive cerebral oedema. He is scheduled for bi-frontal craniotomy.

1. Discuss your pre-operative preparation and intraoperative anaesthetic management of this patient.
2. In the immediate post-operative period, after initially waking, the patient has a two minutes grand mal seizure. Discuss the implications and your on-going management.
3. 48 hrs post-operatively, the patient coughs and sneezes and subsequently his level of consciousness deteriorates. Discuss the possible diagnosis of pneumocephalus and the anaesthetic management for a re-do craniotomy.

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