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.

Scenario A

A 60-year-old lady presents with a severe headache and subarachnoid haemorrhage is suspected after a CT scan. She opens her eyes to commands, is slightly confused but obeys commands. There are no motor deficits. Her blood pressure is 200/120mmHg. Her family indicates that she was reluctant to seek medical care in the past and they are unaware of any significant medical history.

a) Discuss possible management options aimed at minimizing intracerebral complications in this lady.

b) Further imaging shows an aneurysm at the posterior communicating artery. The surgeons decide to take this patient for a craniotomy to clip the aneurysm. Discuss the factors you will consider in planning whether to extubate this patient or not.

c) The surgeons indicate the aneurysm has ruptured and they are trying to place a temporary clip to control the bleeding. Discuss how you would manage this crisis.

Scenario B

A 54-year-old man with a history of aortic stenosis presents with a perforated gastric ulcer requiring a laparotomy. He was previously offered corrective cardiac surgery but he refused.

a) Describe your preoperative assessment of the patient.

b) How would you anaesthetize this patient?

c) Intraoperatively, the patient develops hypotension. Describe your management.
Scenario C

A 60-year-old man with a 40 pack-year smoking history presents with a mid-oesophageal carcinoma for video-assisted thoracoscopic and laparoscopic oesophagectomy. He gives a history of progressive dysphagia over 3 months associated with 20 kg weight-loss. Examination reveals a cachexic male with stable vital signs on total parenteral nutrition.

a) Briefly describe the composition, indications and complications of total parenteral nutrition. How would it affect your perioperative management?

b) Devise an anaesthetic plan that would help to minimize postoperative morbidity.

c) How would you manage desaturation during the thoracoscopic dissection of the oesophagus?