



The Hong Kong College of Anaesthesiologists

Final Fellowship Examination

Paper I

13th March 2017 (Monday)

09:00 – 10:30 hours

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. Use ink or ball-point pen.
 - c. Answer **ALL** questions (nine questions). They are worth equal marks and you should spend approximately ten minutes on each question.
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Scenario A

A 64-year-old man is scheduled to undergo microvascular decompression for hemifacial spasm. He is taking clopidogrel 75 mg and aspirin 100 mg daily following placement of a drug eluting coronary stent to the left anterior descending artery, 12 months ago for acute coronary syndrome.

1. Justify your plan of management for the antiplatelet therapy in the perioperative period.
2. During surgery, two neurophysiologic monitoring modalities will be performed - evoked electromyogram of the facial, trigeminal, glossopharyngeal and accessory nerves; and brainstem auditory evoked potential. Explain how the use of neurophysiologic monitoring affect your choice of anaesthetics.
3. Upon completion of bone drilling, the neurosurgeon complained of “tight brain”. Describe your management to improve operating condition.

Scenario B

A 4-year-old boy is scheduled to have elective tonsillectomy and adenoidectomy for obstructive sleep apnoea.

4. What are your perioperative considerations for this boy?
5. His mother is very concerned about the “harmful effect of general anaesthesia to the brain development”. Discuss the current evidences that support or refute the harmful effects of general anaesthetic to brain development.
6. The operation went uneventfully and the patient was subsequently discharged to the ward. 6 hours later, you were called as he developed post-tonsillectomy bleeding needing re-exploration. On examination, he was pale. His pulse was 130/min, blood pressure was 80/40 mmHg, capillary refill was 4 seconds and respiratory rate was 25/min. Please outline your perioperative management including post-operative care.

Scenario C

You are the first-responder in a trauma team at a major hospital when five adult burn victims are brought into the Emergency Department after extrication from a fire in a train compartment.

7. Describe the principles of how you would triage the initial management of these five patients.
8. You note one of the patient is tachypnoeic with noisy breathing. What are the indicators that this patient may have thermal inhalation injury? Describe your initial assessment and management of this patient.
9. The patient is admitted to ICU with extensive burns to his trunk and all limbs. A week later he presents for wound debridement surgery. What are the anaesthetic considerations?

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