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## The Hong Kong College of Anaesthesiologists

## Final Fellowship Examination Paper II 14<sup>th</sup> March 2014 (Friday) 11:00 – 12:30 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.
- 1. A 42-year-old lady recently diagnosed to have ovarian carcinoma, is scheduled for laparoscopic assisted hysterectomy and bilateral salpingo-oopherectomy on the following day. She weighs 105 kg with a body height of 1.6m (BMI 41kg/m2). Discuss how you will assess and manage this patient's airway for anaesthesia.
- 2. A 76-year-old man with a known history of diabetes mellitus, coronary artery disease and asthma is undergoing Transurethral Resection of Prostate (TURP) under spinal anaesthesia. Thirty minutes into the surgery the patient complains of difficulty in breathing. Outline your approach in managing this patient.
- 3. Discuss the limitations of using bispectral index for monitoring depth of anaesthesia.
- 4. What are adjuvant analgesics (10%)? Give a brief account of the pharmacology of gabapentin (30%) and discuss its perioperative use as an adjuvant analgesic (60%).
- 5. Describe the principles underlying intra-aortic balloon pump counter-pulsation therapy (50%). Also list the indications, contraindications and complications (50%).
- 6. A 50-year-old woman with chronic hypertension was just admitted after a brief seizure. CT brain showed acute subarachnoid haemorrhage and she is scheduled for an emergency endovascular coiling procedure. She opens her eyes to command, is mildly confused in speech and moves upon request with left side weakness. Her blood pressure is 195/110 mmHg and pulse 90/min.
  Describe anaesthetic considerations and management which are important for a
  - favourable neurological outcome.
- 7. Justify perioperative steroid supplementation of patients on long term steroids presenting for elective surgery.
- 8. As the director of anaesthesia in your hospital, describe briefly your major considerations in setting up a hospital-based ambulatory surgery unit.

9. A young healthy woman is undergoing knee arthroscopy under general anaesthesia. Ten minutes into the operation, you inject intravenously 5 mg morphine that was prepared by your trainee. Within one minute, blood pressure increases to 210/130 mmHg with sinus tachycardia of 140/min. You immediately check the opened ampoule in the drug tray and confirm wrong drug administration. You discover a 1 mg in 1 ml adrenaline ampoule which looks very similar to a 10 mg in 1 ml morphine ampoule. How would you treat the patient (50%)? How would you prevent this from happening again in your hospital (50%)?

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