

The Hong Kong College of Anaesthesiologists Final Fellowship Examinations

Paper I – Clinical Scenario (1 - 6) & SAQ (7 - 12) 12 August 2024 (Monday)

09:00 - 11:00 hours

Instructions:

- a. There are twelve pre-labelled answer books. Please make sure you answer the questions in the respective answer books.
- b. Write your candidate number on the cover of each answer book.
- c. Use ink or ball-point pen.
- d. There are 12 questions in this paper. Answer **ALL** questions. They are worth equal marks and you should spend approximately **ten minutes** for each question. For questions with multiple parts, allocation of marks is indicated in the brackets.
- e. Questions 1-3 are related to Scenario A, Questions 4-6 are related to Scenario B, Questions 7-12 are standalone short answer questions.

Scenario A

A 65-year-old man is scheduled for open thoracotomy repair of bronchopleural fistula, which has developed 1 week after video assisted thoracoscopic (VAT) right upper lobectomy for lung cancer. He is in ICU with a right chest drain in situ. He is a chronic smoker, but otherwise healthy. The surgeon mentioned that the right lung was not fully collapsed during the previous VAT surgery.

- 1) Explain the reasons for incomplete lung collapse during VAT surgery.
- 2) Discuss your intraoperative airway and ventilatory management of this patient.
- 3) Compare the use of thoracic epidural with paravertebral block for postoperative analgesia in this patient.

Go to page 3 for Scenario B
Questions 4-6

Scenario B

An 85-year-old woman is scheduled for hemiarthroplasty for her neck of femur fracture after a fall. She is on dabigatran for chronic atrial fibrillation and this was last taken 36 hours ago. She is otherwise healthy.

- 4) Outline your pre-anaesthetic assessment of this patient (30%), including withholding and recommencing dabigatran (35%) and its impact on your anaesthetic plan (35%).
- 5) Laboratory test reported haemoglobin of 10.5 g/dL. Discuss your perioperative blood management plan for this patient.
- 6) Compare and contrast femoral nerve block, fascia iliaca block and pericapsular nerve group (PENG) block for providing perioperative pain management for this patient.

Go to page 4 for Questions 7-12

Short Answer Questions

7) A 70-year-old man complains of blurred vision in the Recovery Room following a 5-hour robot assisted radical prostatectomy operation. For the blurred vision in this patient, list the causes (30%) and outline your assessment (50%) and management (20%).

8) What are the haematological, respiratory and circulatory changes during third trimester pregnancy (50%)? How are these changes affecting patient assessment and management during trauma (50%)?

9) What are the risk factors for spinal cord ischaemia after endovascular repair of thoracoabdominal aortic aneurysm repair (TEVAR) (50%)? Discuss the specific anaesthetic interventions to reduce this complication (50%).

10) A 68-year-old lady with cervical cancer is scheduled for brachytherapy (high-dose rate) in the radiation oncology department. What are the considerations in carrying out anaesthesia for this patient?

11) Compare and contrast propofol, etomidate and ketamine as induction agent in electroconvulsive therapy for drug-resistant depression.

12) You are called to attend a trauma call at emergency department. Describe your assessment of a 40-year-old gentleman who has been rescued from a house fire.

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