

The Hong Kong College of Anaesthesiologists

Final Fellowship Examinations

Paper I – Clinical Scenarios & SAQs

17 March 2025 (Monday)

09:00 – 11:00 hours

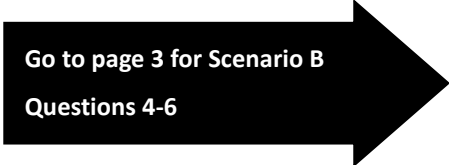
Instructions:

- 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 years old woman with a long-standing history of atrial fibrillation is scheduled for cardiac ablation in the interventional radiology (IR) suite.

- 1) Outline the challenges of providing anaesthesia in the IR suite for this patient.**
- 2) You have been tasked to look into the safety and quality of anaesthesia including infection control outside the operation theatres. How would you address these issues?**
- 3) How does atrial fibrillation affect the anaesthetic management of patients?**




**Go to page 3 for Scenario B
Questions 4-6**

Scenario B

A 35 years old term pregnant woman with good past health was just admitted to labour ward after rupture of membranes. Prompt vaginal examination revealed cord prolapse without full cervical dilatation.

- 4) Define “cord prolapse” (10%) and its classification (10%). Discuss the risk factors predisposing to cord prolapse (30%). What are the anaesthetic implications of cord prolapse (50%)?**
- 5) Describe the fetal circulation (20%) and placental oxygen gas exchange (20%). Explain strategies to optimize oxygen delivery to the fetus before delivery (60%).**
- 6) Obstetricians decided to proceed immediate cesarean section. Discuss your options and your preferred mode of anaesthesia and your anaesthetic management.**



**Go to page 4 for
Questions 7-12**

Short Answer Questions

- 7) A 25 years old man construction site worker was admitted to the A&E after falling from height. He has an open chest wound and is dyspnoeic. What are the causes of dyspnoea and the pathophysiology (20%)? How would you manage this patient in A&E (80%)?
- 8) What is your anaesthetic plan for a 4 years old boy scheduled for an elective adenotonsillectomy due to obstructive sleep apnea?
- 9) Describe the anatomy of adductor canal (30%). Discuss the use of adductor canal block as analgesia for total knee replacement (70%).
- 10) A 60 years old man came for day case inguinal hernia repair was found to have blood pressure 180/110 mmHg. Justify your decision to proceed or not proceed to day surgery.
- 11) A 70 years old man is scheduled for a 3-hour laser prostatectomy. What are the potential problems with lithotomy position (80%)? How to prevent them (20%)?
- 12) A 60 years old man is scheduled for a ESD (endoscopic submucosal dissection) to be done at endoscopy centre two days later, for a 2.5cm early cancerous lesion at transverse colon. He has diabetes mellitus. His body mass index is 36 kg/m². He is on metformin and newly started on dulaglutide (glucagon-like peptide-1 receptor agonist) weekly injection. What is the role of GLP-1 receptor agonist in management of diabetes and obesity (20%)? Outline the considerations in anaesthesia for this patient (80%).

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