
TEAM

ANESTHESIA



435

Anaesthesia General Revision

MCQs!!!

Dr. Jumana Baaj notes.

- Patient post-Op came with severe sore throats, Causes?⇒ They tried alone and had **difficult intubation.**
- The most important thing to assess preoperatively is ⇒ **The airway.**
- If you see only Hard palate and soft palate ⇒ **Mallampati III**
- Obesity BMI >30 ⇒ **ASA II**
- Morbid obesity BMI >40 ⇒ **ASA III**
- Patient with History of hyperthermia ⇒ **Avoid Succinylcholine and inhalational agents.**
- Patient had head injury with intracranial hemorrhage what's the ideal IV induction agent ⇒ **ETOMIDATE.**
- High ICP + IHD ⇒ **NO KETAMINE.**
- Cardiac patient ⇒ **Give Etomidate.**
- ASA III is **IMPORTANT** in the exam!!
- NCEPOD stand for ⇒ (National Confidential Enquiry into Patient Outcome and Death) Is **VERY IMPORTANT.**
- Patient with perforated duodenal ulcer ⇒ **URGENT!**
- PISS ⇒ For **Cylinders.**
- DISS ⇒ For **Gas Pipeline for central supply.**
- Most common position in OR ⇒ **Supine position.**
- Can't intubate or ventilate ⇒ **Call for help** and don't awake the patient.
- Indication of Cricoid pressure ⇒ **To prevent aspiration by preventing the gastric contents to go to the trachea but it will NOT prevent vomiting.**
- How to monitor the depth of anesthesia ⇒ **Bispectral index (BIS)**
- If you are monitoring NMJ which nerve ⇒ **ULNAR.**

- Relative complications of regional anesthesia ⇒ **Previous back surgery.**
- C/S ⇒ **Spinal regional anesthesia.**
- We use in spinal anesthesia ⇒ **Heavy Bupivacaine.**
- If you have 80 kg patient calculate the fluid maintenance ⇒ **use 4,2,1 rule.**
- Most common complications of massive blood transfusion ⇒ **COAGULOPATHY.**
- What will happen in the first drop of blood post-op ⇒ **Anaphylaxis reaction.** (Sx, tachycardia, flushing)
- Complications of left central line ⇒ **Chylothorax.**
- Most common side effects of Morphine ⇒ **N/V.**
- Patient with hysterectomy for spinal anesthesia ⇒ **Should be fasting for (6-8 hrs).**
- Breastfeeding ⇒ **fasting 4 hrs**
- Formula milk ⇒ **fasting 6 hrs.**
- Opioids receptors ⇒ **μ (mu), κ (kappa), and δ (delta).**
- Benzodiazepines receptors ⇒ **GABAA.**

Case scenario:

A 26 year old male patient is admitted to the emergency department diagnosed to have perforated appendix for urgent emergency appendectomy . last meal 2 hours ago. Vital signs: BP 120/70 mm Hg and HR 90/min.

The patient was previously healthy. PE: patient currently look ill. and CVS normal. Last meal 1hours ago.

- **How will you intubate the patient?** RSI (100% for 3-5 min > cricoid pressure >Rapid IV induction agents > succinylcholine > insert the tube rapidly) In other words, Keep suction ready and re-oxygenate until you have End tidal oxygen = 85% > Give propofol > give succinylcholine > wait 1 min **“It should be only 1 min!!”** > Then, first 45sec open the mouth and insert the laryngoscope slowly.

Done by: Samar AlOtaibi