

# The Hong Kong College of Anaesthesiologists

# Final Fellowship Examination Paper I 19<sup>th</sup> August 2011 (Friday) 09:00 – 10:30 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.

### Scenario A

A 65 years old woman has chronic glomerulonephritis and end-stage renal disease that requires chronic ambulatory peritoneal dialysis in the past 4 years. She has renal cell carcinoma of the right kidney and is scheduled for radical right nephrectomy.

- 1. What are the major considerations in the pre-anaesthetic assessment of this patient?
- 2. What are your considerations and your plan for perioperative renal replacement therapy in this patient?
- 3. Postoperatively in the recovery room, the patient's plasma potassium is 6.9 mmol/L. Discuss your management.

#### Scenario B

A 60 years old woman with moderate obesity and non insulin dependant diabetes mellitus is scheduled for right shoulder arthroscopy in the beach chair position. Before general anaesthesia, a right interscalene block was performed.

- 1. Discuss the problems associated with the beach chair position and the strategies to minimize them.
- 2. Surgery was uneventful. Following extubation and transfer to the recovery room, the patient complained of breathing difficulty with oxygen saturation on room air of only 90%. List the possible causes of post-operative hypoxaemia in this patient and briefly outline your management.
- On the third post-operative day the patient complained to you about persistent numbness in her right forearm down to her little finger. List the factors that may contribute to post-operative nerve injury in this patient and discuss prognosis and treatment.

# Scenario C

A 60 years old male, previously fit and healthy, presents with headache and confusion and is found to have a large frontal midline tumour with extensive cerebral oedema. He is scheduled for bi-frontal craniotomy.

- 1. Discuss your pre-operative preparation and intraoperative anaesthetic management of this patient.
- 2. In the immediate post-operative period, after initially wakening, the patient has a two minutes grand mal seizure. Discuss the implications and your on-going management.
- 3. 48 hrs post-operatively, the patient coughs and sneezes and subsequently his level of consciousness deteriorates. Discuss the possible diagnosis of pneumocephalus and the anaesthetic management for a re-do craniotomy.

- END-