



**HONG KONG COLLEGE OF
ANAESTHESIOLOGISTS**

DIPLOMA OF FELLOWSHIP

**FINAL FELLOWSHIP (INTENSIVE CARE)
SHORT ANSWER PAPER**

15 Questions

TUESDAY, 2nd MAY 2006

9.00 am - 11:30 am

NOTICE

- (A) Write your answers in the books provided.
- (B) Start **each answer** on a **new page** and **indicate the question number**. It is not necessary to rewrite the question in your answer book.
- (C) You should answer each question in **ten minutes** or less.
- (D) The questions are worth equal marks.
- (E) Record your number on the cover of each book and hand in all books.

ANSWER THE FOLLOWING

1. Define status epilepticus and discuss the management.
2. List the indications for using albumin in the Intensive Care Unit. Briefly discuss the evidence supporting this.
3. Describe a method of measuring the central venous oxygenation saturation ScvO₂ in your Intensive Care Unit. Briefly discuss your indications for monitoring this and how you would interpret the data including pitfalls.
4. Describe what is meant by transfusion related acute lung injury TRALI. Briefly discuss its pathophysiology, clinical presentation and treatment.
5. Discuss delirium in the Intensive Care Unit in terms of its clinical presentation, importance, prevention and treatment options.
6. Discuss the treatment of variceal bleeding in cirrhotic patients.
7. Describe the meaning of the term patient-ventilator dyssynchrony. List the causes.
8. Compare and contrast haemorrhagic blood loss and hemolytic anemia.

9. Describe the ways to decrease antimicrobial resistance in the Intensive Care Unit.
10. Discuss the advantages and limits of protocolized care in the Intensive Care Unit.
11. Compare and contrast the use of citrate and unfractionated heparin in continuous renal replacement therapy.
12. What is abdominal compartment syndrome? Outline its pathophysiological consequences.
13. List the indications for the use of non-invasive ventilation. Describe briefly how you would begin non invasive ventilation for a patient.
14. List the etiologies and briefly describe the management of new onset atrial fibrillation in patients in Intensive Care.
15. Briefly discuss the diagnosis and management of rhabdomyolysis.