# The Hong Kong College of Anaesthesiologists

## **Diploma in Pain Management Examination**

# Paper TWO

## Tuesday, 3 October 2000, 10:30 h. – 11:30 h.

Instructions:

- 1. There are three clinical scenarios; each scenario has three related short questions.
- 2. Please **answer** questions from **two scenarios only**.
- 3. There should be a total of six short questions answered and they carry equal marks.
- 4. Please write your answer for each scenario in appropriately labeled answer books.
- 5. Record your candidate number and question number on each answer book.

### Scenario 1:

A 55-year old male construction site worker was referred to your pain clinic from his general practitioner, complaining of sudden onset lumbar back pain while lifting a heavy load. There was no neurological abnormality and he was initially treated with diclofenac and bed rest. However his pain persisted, worse when bending his back. He has been smoking for 40 years.

- Q1 Briefly discuss your working diagnosis, listing signs and symptoms (red-flags) that may alert you to serious pathology.
- Q2 Describe how you would further investigate this patient.
- Q3 What are the psychosocial implications if the pain persist in this patient?

### Scenario 2:

A 49-year old man is now receiving intravenous patient-controlled analgesia with morphine for pain relief after laminectomy was performed at L2/3 and L3/4 level for spinal stenosis. On the first postoperative day, he is very distressed and tachypnoeic, and complained of agonising pain despite receiving large dose of morphine.

- Q1 Describe how you would assess this patient.
- Q2 List the common causes of inadequate pain relief with patient-controlled analgesia in relation to laminectomy.

Q3 Describe ways to minimise the risk of opioid overdose in patients receiving patientcontrolled analgesia.

#### Scenario 3:

A 50-year old man has been diagnosed with carcinoma of the head of pancreas. His main complaint is epigastric pain boring through to the break. He has been receiving pethidine 50mg every 4 hours for pain relief ever the last few days. He was referred to you by the surgeon because of persistent severe pain.

- Q1 Outline your psychosocail evaluation of this patient.
- Q2 Describe your management of the patient's abdominal pain.
- Q3 After your management, the patient was discharged home with the pain under control on oral medications. However, on subsequent follow-up, he complained of persistent nausea and vomiting. Discuss your plan of management.

End