

A 55 year old man, smoker and H/O hypertension presents with a 2 hour history of central chest pain and shortness of breath, sweaty.

List 8 points of the initial management. 4 points

O2 via face mask, cannula, aspirin, BP, pulse, ECG, pulse oximetry, GTN SL

List 2 history criteria for eligibility for thrombolysis 1 point

*20 min continuous ch pain < 12h ago
Intermittent pain <24 hours, worst episode <12h*

List 3 ECG criteria for eligibility for thrombolysis. 1.5 points

*1 mm ST elev 2 limb leads
2mm ST in 2 chest
New onset LBBB*

List 7 absolute contraindications for thrombolysis. 3.5 points

*Haemorrhagic stroke
Ischaemic stroke last 6/12
CNS damage or neoplasms
Recent major trauma/surgery/HI
GI bleed last 6/12
Known bleeding disorder
Aortic dissection*

1) Regarding anaesthesia in the A&E department.
Name 4 different methods of anaesthesia which can be used to reduce a Colle's fracture. 2 points

GA, Bier's block, haematoma block, axillary block, Nitrous Oxide, sedation

What is the maximum dose of lignocaine with and without adrenaline. 2 points

3-4.5 mg/kg and with adrenaline 7 mg/kg

Name 3 general anaesthetic drugs which can be used in RSI and their doses. 3 points

*Ketamine- 1-2 mg/kg
Propofol- 2-3 mg/kg
Thiopental – 3-5mg/kg
Midazolam- 0.1-0.2 mg/kg
Fentanyl- 5-15 µg/kg
Etomidate 0.2-0.3 mg/kg*

Until what age is straight blade laryngoscope preferable and why? 2 points

*1-5 years old
Epiglottis is floppy and obstructs view.*

Name 2 methods of ensuring that the femoral nerve block is being injected in the correct area. 1 point

*Nerve stimulator
USS*

2)Regarding Bier Block.

Which local anaesthetic is contraindicated in Bier's block ? 1point

Bupivacaine

To what pressure should the cuff be inflated in Bier's block and how long can it stay inflated? 2 points

*100mmHg > systolic
20-90 min*

Name 6 contraindications to Bier block. 6 points

*Peripheral vascular disease
Raynaud's syndrome
Sickle cell disease
Cardiac conduction abnormalities
Hypertension, BP > 200 mmHg systolic
Cellulitis/infected extremity
Uncooperative patients
Young children (<5 years)
Local anesthetic allergy*

What is the most common side effect of the block and how can it be minimised.
1 point

Cuff pain- inflate the proximal cuff after the LA injection and deflate the proximal cuff.

23 year old woman presents to A&E with SOB, difficulty in finishing sentences. She has a history of asthma and takes regular inhalers.

Describe your initial management of this patient 3 points

*O2, nebulised salbutamol 5mg and ipratropium 0.5 mg, steroids- 40-50mg pred or 100-200mg Hydrocort
Check PEFr, O2 sats*

List 6 signs of life threatening asthma 3 points

Silent chest, pO₂<8kPa or sats < 92%, normal pCO₂, bradycardia, cyanosis, hypotension, feeble resp effort, PEFr <33%,, confusion, coma

List 6 therapies except the initial management which can be used in severe or life threatening asthma 3 points

Mg 2+, BiPAP, continuous nebulised Beta agonist, IV aminophylline after senior consultation, salbutamol infusion, Heliox- although not currently recommended, anaesthetic gases, ketamine, adrenaline

What is the best predictor of outcome in acute asthma presentation in ED 1 point

Response to treatment