

## MCQs Irish Final FCARCSI

- 1) Vapourisers for use in the circle system
  - A. are highly efficient
  - B. have large vapourising chamber
  - C. have a low resistance
  - D. must be temperature compensated
  - E. can be placed in the inspiratory or expiratory limb
  
- 2) In near drowning
  - A) seawater inhalation can cause hypovolaemia
  - A) haemolysis is recognised complication of fresh water aspiration
  - B) seawater inhalation frequently leads to an increase in serum sodium
  - C) acute renal failure is a common occurrence
  - D) Steroids confer neurological protection
  
- 3) typical features of cushings disease include
  - A) generalised obesity
  - B) Menorrhagia
  - C) Peripheral neuropathy
  - D) Increased susceptibility to infections
  - E) Hypotension
  
- 4) three in one nerve block acts on
  - A) the femoral nerve
  - B) the ilioinguinal nerve
  - C) the obturator nerve
  - D) the genitofemoral nerve
  - E) the lateral cutaneous nerve of thigh
  
- 5) in one lung ventilation, hypoxic pul vasoconstriction in the non dependent lung is inhibited by
  - A) clonidine
  - B) inhalational agents
  - C) intravenous induction agents
  - D) hypocapnia
  - E) positive end expiratory pressure to the dependant lung
  
- 6) peribulbar block for cataract operation
  - A) is not as safe as retrobulbar block
  - B) can result in subarachnoid injection
  - C) results in enophthalmos
  - D) reduces intraocular pressure
  - E) is best performed with the eye looking up and in

- 7) CO poisoning is associated with
- A) cutaneous bullae
  - B) atrial fibrillation
  - C) cyanosis
  - D) hyperventilation
  - E) Hyperpyrexia
- 8) indications for insertion of a temporary preoperative pacing wire include
- A) asymptomatic complete heart block
  - B) Mobitz type II second degree heart block
  - C) Wenkebach type I second degree heart block
  - D) Sick sinus syndrome
  - E) Wolff Parkinson White syndrome
- 9) with a PA flotation catheter
- A) the thermistor is situated at 20 cm from the balloon
  - B) the Pulmonary art pressure waveform must be displayed continuously
  - C) cardiac output can be derived from pressure measurements
  - D) readings are more accurate if it is inserted through jugular vein
  - E) the proximal lumen is used for measuring CVP
- 10) Awareness during anaesthesia
- A) is always avoidable
  - B) may occur in the absence of pain
  - C) can occur in a spontaneously breathing patient
  - D) is most commonly found during Caesarian sections
  - E) can be effectively treated with benzodiazepines
- 11) cauda equine syndrome typically causes
- A) lower limb hyperreflexia
  - B) impotence
  - C) persistent numbness
  - D) bladder atony
  - E) reduced anal tone
- 12) intubation is more difficult in a neonate because the
- A) epiglottis is vestigial
  - B) head is small in relation to the body
  - C) tongue is large in relation to the size of the oral cavity
  - D) larynx is more caudal
  - E) narrowest part of the upper airway is infraglottic
- 13) Minimum alveolar concentration
- A) increases during pregnancy
  - B) is a measure of potency

- C) is directly related to the oil gas partition coefficient
  - D) increases with hypothermia
  - E) remains the same throughout a particular anaesthetic
- 14) Neuromuscular monitoring ( q base 1-62)
- A) A T4:T1 ratio of 0.75 means that the patient is suitably reversed for extubation
  - B) Double burst stimulation is of particular value for monitoring deep relaxation
  - C) Post tetanic count is most often used for assessing suitability for extubation
  - D) Normal neuromuscular function will display n fade with a supramaximal 50 Hz stimulus for 5 seconds
  - E) Tetanic stimulation can be reassessed only once a minute
- 15) in a normal PA chest radiograph (q base 1-75)
- A) the right diaphragm is 2.5 cm lower than the left
  - B) the cardiac shadow is less than half the thoracic diameter
  - C) the horizontal fissure lies at the level of T5 posteriorly and the 4<sup>th</sup> rib anteriorly
  - D) radiographic density is independent of rotation
  - E) the right hilum lies above the left hilum
- 16) concerning the pleura (q base 1-76)
- A) both the right and left cross the midaxillary line at the level of the eighth costal cartilage
  - B) diaphragmatic pleura is supplied only by the phrenic nerve
  - C) the lung has the same surface markings as the cervical pleura
  - D) it is unguarded by the ribs at the right xiphisternal angle
  - E) lies 2 intercostal spaces below the lower borders of the lungs
- 17) stellate ganglion (q base 2-39)
- A) is present in all subjects
  - B) lies on the flat border of T2
  - C) when blocked can provide pain relief for herpes zoster infections
  - D) Chassaignac's tubercle is the landmark when preparing to block it
  - E) is formed by the fusion of the first 2 thoracic sympathetic ganglia
- 18) regarding analgesia during labour (q base 2-84)
- A) regional blockade of T10-L2 is required during the first 2 stages
  - B) paracervical block is associated with fetal arrhythmias
  - C) nitrous oxide is useful in 80% of patients
  - D) the volume of the epidural space is reduced by the uterus
  - E) intramuscular pethidine is safe within the 4 hrs of the delivery

- 19) systemic inflammatory response syndrome (Qbase 3-27)
- A) Is initiated by infection in over 80% of the cases
  - B) Is more commonly caused by gram negative than gram positive organisms
  - C) Cannot be diagnosed until patient is hypotensive despite adequate fluid resuscitation
  - D) Has a mortality of 40-60%
  - E) Should be treated with monoclonal antibodies effective against endotoxin
- 20) sources of error in pulse oximetry include (Qbase 3-35)
- A) vasoconstricted digits
  - B) the presence of fetal haemoglobin
  - C) dark coloured nail varnish
  - D) tricuspid incompetence
  - E) high ambient light intensity
- 21) An acute pain service (Qbase 3-38)
- A) should consist of a consultant anaesthetist with junior anaesthetic support
  - B) intervention should be based on assessment and frequent reassessment of the pain
  - C) education of patients and staff is an important goal
  - D) should be based on the use of drug and non drug therapeutic strategies
  - E) has no effect on duration of hospital stay
- 22) the following are associated with hypokalaemia (Qbase 3-75)
- A) diarrhoea
  - B) salbutamol
  - C) rhabdomyolysis
  - D) paralytic ileus
  - E) renal artery stenosis
- 23) concerning the diagnosis of brain stem death (Qbase 3-83)
- A) clinicians performing the tests should have been registered for 5 yrs
  - B) An isoelectric EEG excludes neurological recovery following cerebral ischaemia
  - C) The time of death is at the cessation of the heart beat or removal of the heart if the patient becomes a donor
  - D) The interval between the two set of tests should be in excess of 4 hours
  - E) The tests involve demonstrating stem areflexia with 5 tests and confirming persistent apnoea

- 24) concerning the larynx (Qbase 3-84)
- A) the recurrent laryngeal nerve supplies the mucous membrane above the vocal cords
  - B) the cricothyroid muscle is supplied the external laryngeal nerve
  - C) the vocal cords are lined by stratified squamous epithelium
  - D) it is raised by the infrahyoid muscle
  - E) the rima glottides lies between the vocal folds
- 25) concerning gas embolism (Qbase 3-85)
- A) neurosurgery performed in the sitting position carries a 25% incidence
  - B) a right lateral head down position is recommended
  - C) there is sudden increase in lung dead space
  - D) the central venous pressure and endtidal CO<sub>2</sub> will fall
  - E) Doppler is the most sensitive means of detecting air
- 26) the following biochemical values will indicate that acute renal failure is prerenal in origin (Qbase 3-89)
- A) 24 hr urinary volume 800 ml
  - B) Urine sodium concentration >40 mmol/litr
  - C) Urine:serum urea concentration >10:1
  - D) Urine : serum osmolality concentration <1.1:1
  - E) Serum creatinine 185 mmol/litre
- 27) Sickle cell trait
- A) Autosomal dominant
  - B) Tourniquet cannot be used
  - C) May have severe anaemia
- 28) Massive transfusion
- A) Hypocalcaemia
  - B) Metabolic acidosis
  - C) Hypothermia causing CVS changes
- 29) Digoxin toxicity
- A) Caused by Hypokalaemia
  - B) Bradycardia
  - 
  - 
  -
- 30) post herpetic neuralgia
- A) spares the unmyelinated C fibres
  - B) Capsaicin is anti irritant
  - C) Lignocaine gel may help

31)The following cause uterine relaxation

- A) Ritodrine
- B) Atracurium
- C) Sevoflurane

32)Magnesium sulphate

- A) Epileptogenic
- B) Better than phenytoin + Diazepam

33)Downs syndrome

- A) Difficult intubation
- B) May have hearing difficulty
- C) 25% have epilepsy

34)Malignant hyperthermia

- A) Chromosome 19
- B) incidence 1:15000
- C) suxamethonium is the only trigger
- D) dantrolene has shelf life of 3 yrs

35)metabolic acidosis causes are

- A) lactic acidosis
- B) acute renal failure
- C) ileostomy
- D) Ureterosigmoid fistula

36)Magnesium sulphate

- A) sensitizes non depolarizing muscle relaxant
- B) sensitizes depolarizing muscle relaxant
- C) better than diazepam /phenytoin in eclampsia

37)Pre-eclampsia

- A) always precede eclampsia
- B) .....
- C) .....
- D) .....
- E) .....

38)Amitriptylline

- A) inhibit uptake of norad +serotonin
- B) causes increased IOP
- C) has opioid sparing effect

39) warfarin action is affected by  
A) Oxycodone  
B) celecoxib  
C) carbamazepine

40)stellate ganglion Block  
A) lateral to carotid sheath  
B) formed by C7 and C8  
C) Ipsilateral Mydriasis

41)Gas gangrene  
A) cause by clostridium botulinum  
B) causes gas in compartments

42)intraabdominal Hypertension  
A) >10 causes symptoms  
B) >35 causes CVS disturbances

43)Post herpetic neuralgia  
A) Capsaicin is anti iriitant

44)cauda equine syndrome

-  
-  
-  
-  
-

45)patient with quadriplegia for 1 week

-  
-  
-  
-  
-

46)Thoracic aneurysm repair

A) Clamp >30 mins causes renal failure  
B) Right thoracotomy  
C) clamp causes proximal hypotension

47) Transdermal administration of drugs

A) high lipid solubility

48) Acid/ Base/ Ph

A) 0.1M HCl has a Ph of 1

B) Decrease in ph by 0.3 will half the hydrogen ion concentration

49) percutaneous tracheostomy complications

A) causes Hypoxia

B) Tracheal stenosis

C) Haemorrhage

50) dantrolene

A) shelf life of 3 yrs

51) Anion Gap

A) Determined from  $Na - HCO_3 + Cl$

B) high in lactic acidosis

52) Von Willebrand's

A) carrier of factor VIII

B) respond to DDAVP

53) 3year old

A) blood volume is 1.1 litres

B) systolic BP 85 mmHg

54) Temperature monitoring

-  
-  
-  
-  
-

55) Anaphylaxis

A) Type IV reaction

56) Concerning catheter related blood stream infection

A) Mainly caused by haematogenous spread of micro organisms

B) Blood cultures drawn through CVP are of no value

C) A positive culture from the line tip indicates CRBSI and treatment should be started

57) APGAR score

A) colour is less important

B) crying scores 2 for resp effort

C) HR of 100/min scores 1

D) Hypotonia scores 1

58) Group I antiarrhythmics

A) Include bretylium

B) are membrane stabilizers

58) Clarke electrode

A) useful for breath to breath analysis

B) Has platinum electrode

C) KOH solution

D) Electrons at anode

59) Normal pregnancy

A) presence of 3<sup>rd</sup> heart sound = heart failure

B) aortic stenosis

60) Indications for haemofiltration

A) Pulm oedema

B) Metabolic acidosis

61) Abdominal AAA

A) Initial rapid fluid resus is the goal

-

- 
- 
- 

62)MAC of inhalational agents

- A) Increase with age ( after neonatal period)
- B) with sevoflurane it is decreased by 50% with 70% N2O
- C) with isoflurane it is decreased by 50% with 70% N2O

- 
- 

63)LMA

- A) can be used for microlaryngoscopy
- B) No effect on LOS tone

64)Brain stem death

- 
- 
- 
- 
- 

65)Drowning

- A) Hypovolaemia
- B) Hyponatraemia
- C) renal failure

66)Chronic alcoholism

- A) Macrocytosis
- B) Thrombocytosis
- C) Arrhythmias

67)Hypophosphataemia

- 
- 
- 
- 
-

68) Crocodoid

- 
- 
- 
- 
- 

69) Pre renal oliguria

A) increase urinary sodium

- 
- 

70) Hypothermia in theatre

A) presence of U waves

- 
- 
- 
- 

71) Attenuating pressor response to intubation

A) topical lignocaine

B) IV fentanyl

C) deep inhalational agents

D) Ketamine

72) Glasgow coma scale

- 
- 
- 
- 
- 

73) Salbutamol

- 
- 
- 
- 
- 

74) indication for oxygen therapy

A) Pao<sub>2</sub> of 8 ; Pco<sub>2</sub> 3.7

B) polio

75) Remifentanyl

- A) prolong action in pseudocholinesterases def
- B) acts all opioid receptors
- C) an anilipiperidine derivative

76) Acute epiglottitis

- A) Haemophilus Influenza
- B) Needs Rapid sequence induction
- C) resolve with out intubation
- D) airway is not compromised

77) Spread of LA in spinal depends on

- A) age
- B) level of injection
- C) Baricity of solution
- D) volume of injection

78) causes of renal failure in elective AAA

- A) infrarenal clamp
- B) suprarenal clamp

-

79) Indication for Insertion of temporary pacing wire

- A) Mobitz type II block

-

-

-

-

80) Cardiac tamponade

- A) Fall in CVP on inspiration

-

-

-

-

81) Cauda equine syndrome

- A) unilateral sensory loss

-

-

-

-

82) Quadriplegia with in 1 week

A) Hyperreflexia

-  
-  
-  
-

83) Child pugh classification in liver failure

-  
-  
-  
-  
-

84) concerning diagnosis of brain stem death

A) year of doctors registration not important

-

85) Guillian Barre syndrome

A) Campylobacter jejuni infection

-  
-  
-  
-

86) Latex Allergy

A) More common in powdered gloves

-  
-  
-  
-