

1. US of stomach (exact image)



- a) Early phase solid food
- b) Late phase solid food
- c) Liquid
- d) Empty stomach**

2. 4 bottle chest drain system. What does 4th do? (protect against consequences of...) excess negative pressure kinking

- a) Suction failure
- b) Kinking of drain
- c) Excess positive pressure
- d) ?excess negative pressure

3. Obese patient. Which drug would you use TBW to dose?

a) Suxamethonium

4. Child 30kg for Bier's Block with lignocaine 0.5% what volume safe?

a) 18ml

6. CVS effects not seen in hyperthyroidism? diastolic dysfunction., svr change, pvr change

a) Diastolic dysfunction

b) SVR Change

d) PVR Change

9. During a tracheostomy, what vessel is most at risk beneath tracheostomy and above sternal notch?

a) Brachiocephalic artery

b) Brachicephalic Vein

c) Superior thyroid artery

d) Inferior thyroid artery

e) Carotid artery

10. Picture of a laryngectomy tube. What is this?

a) Laryngectomy tube

b) Tracheostomy tube

c) South facing RAE tube

12. Muscle weakness and sensory changes post TKR with tourniquet. Least likely nerve:

a) Saphenous

15. Methylene blue can be used in treatment of all except?

- a) Priapism
- b) Methaemoglobinaemia
- c) Hepatopulmonary Syndrome
- d) G6PD deficiency**

16. Hepcidin upregulated by all except:

- a) Anaemia
- b) Inflammation
- c) Acute leukaemia
- d) Infection
- e) Excess iron stores

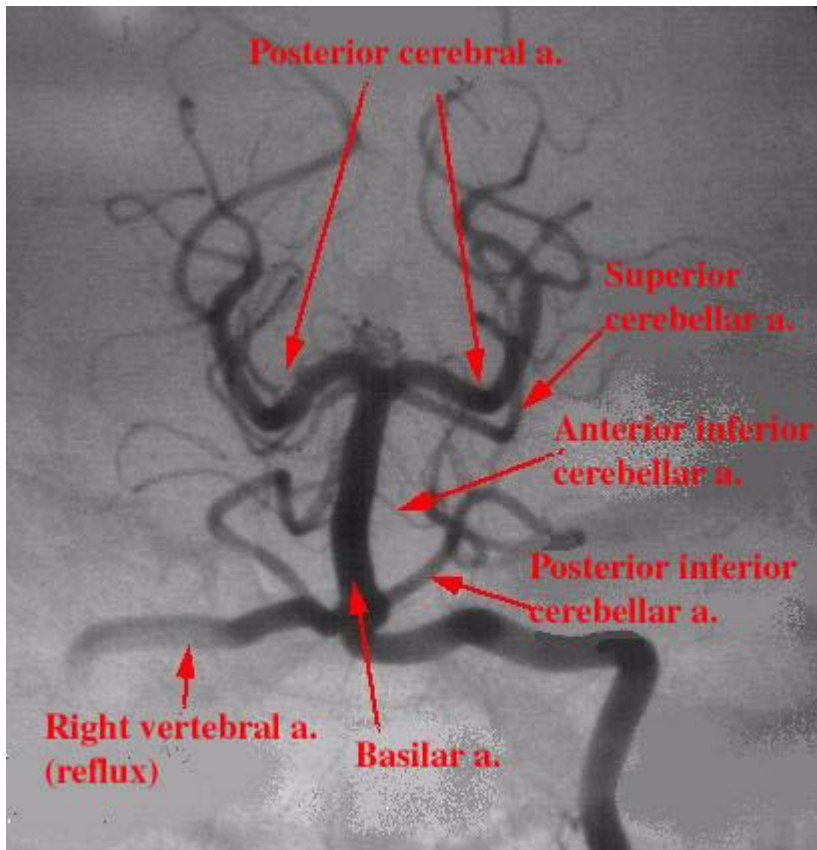
18. Nitrous oxide chronic use complications:

- a) Chronic neurological symptoms from methionine depletion

19. Preop patient with known hereditary angioedema what to give?

- a) FFP
- b) Icatibant
- c) Hydrocortisone
- d) Danazole

20. Picture of cerebral angiogram of posterior circulation. Which vessel is this?



- a) Posterior cerebral
- b) Superior cerebellar
- c) Inferior cerebellar

21. Least effective for increasing speed and/ or effectiveness of peribulbar block:

- a) Honan Balloon
- b) Digital Pressure
- c) Hyalase
- d) Ocular massage

22. Return to work post time off as an anaesthetist how many weeks minimum PER YEAR of time off in return to work program?

- a) 1 week
- b) 2 weeks
- c) 4 weeks**
- d) 6 weeks
- e) 5 weeks

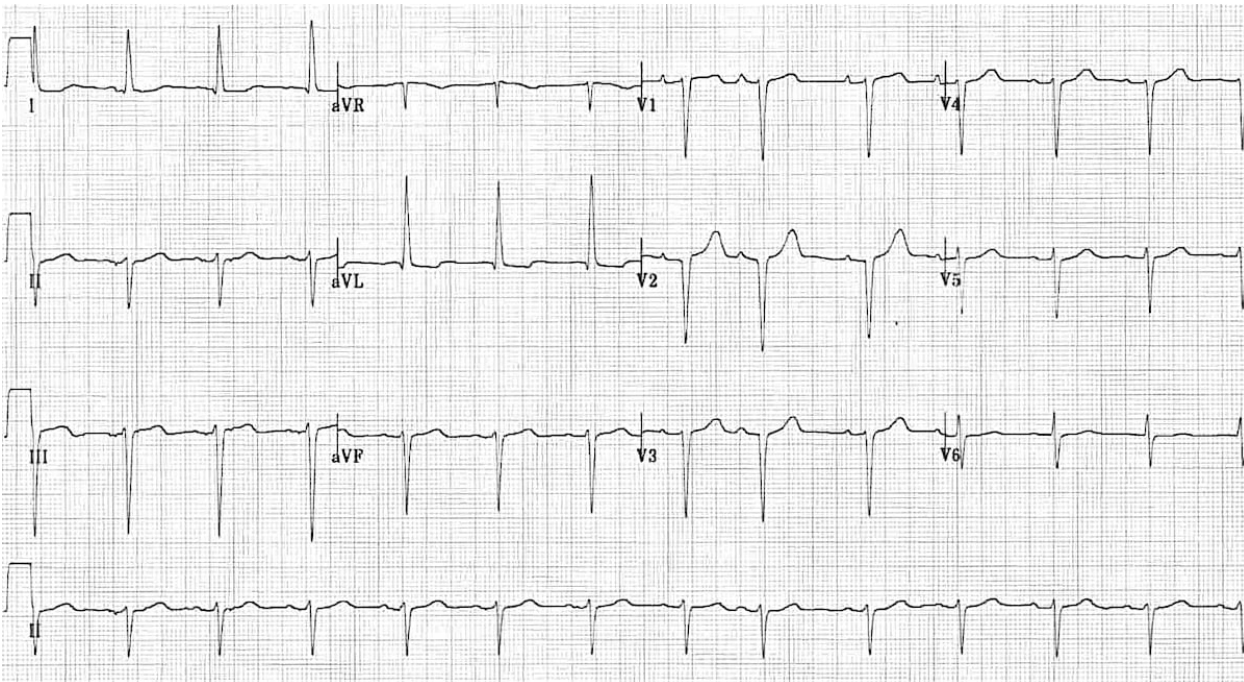
24. Right heart cath: PA pressure 75/26, CWP24. What was cause?

- a) LV failure
- b) Pulmonary Arterial Hypertension
- c) Pulmonary embolus
- d) Emphysema
- E) aortic stenosis

26. Sublingual (intralingual) sux 15kg kid what dose:

- a) 20mg
- b) 40mg
- c) 50mg
- d) 60mg
- e) 15mg
- ? 30mg as other option

30. ECG with left axis deviation:



a) Left anterior hemi block

b) Left posterior hemi block

c) RBBB

d) LBBB

e) Normal

31. Glucose tol test - GH elevated baseline result, suppression briefly. IGF 700

a) Acromegaly

32. TFTs thyroxine TSH < .05 T4 and T3 completely normal

a) Hypophysectomy

b) Subclinical Hyperthyroidism

c) Sick euthyroid

d) Toxic Multinodular goitre

34. Ketone fasting what level minimum for suspecting euglycaemic ketoacidosis:

- a) 0.5
- b) 0.7
- c) 0.9
- d) 1.1

35. DKA initial priority

- a) Electrolyte correction
- b) Insulin
- c) IV hydration
- d) Bicarbonate

37. Post gastric bypass with vomiting, hypochloraemic metabolic alkalosis and K 3.0 what management?

- a) Return for laparoscopy
- b) Normal saline with potassium replacement
- c) Acetazolamide

38. Confused post hysteroscopic myomectomy Na 118, drowsy but rousable, orientated to time but not place:

- a) 3% saline 100ml
- b) Frusemide
- c) Nothing

39. Most likely to get venous air embolism:

- a) LUSCS
- b) Prostatectomy
- c) Coronary artery surgery
- d) Spinal surgery

40. ARDS least effective strategy?

- a) High PEEP
- b) Recruitment maneuvers
- c) Neuromuscular blockade
- d) Prone
- e) Negative fluid balance

41. Muscle most resistant to NMB:

- a) Diaphragm
- b) Abdominal muscles
- c) Obicularis Oculi
- d) Adductor pollicis
- e) Laryngeal muscles

42. Young man has a 2 hour anaesthetic with deliberate induced hypotension at 40% of baseline. Wakes confused/agitated and CT shows ischaemic changes. Makes full recovery within 24 hours. What is this?

- a) Near miss
- b) Adverse event
- c) Sentinel event
- d) Malfeasance
- e) Misconduct

43. SAH best intervention mortality:

- a) Coil within 24 hours
- b) Clip within 24 hours
- c) Coil after 24 hours
- d) Clip after 24 hours
- e) Early treatment of vasospasm

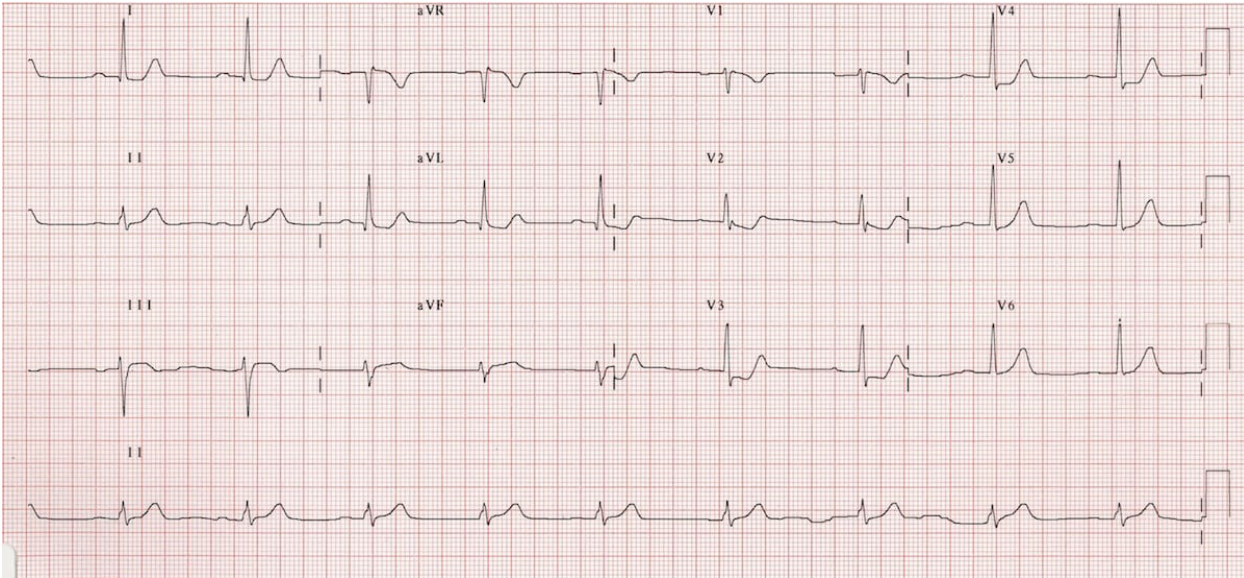
44. Paed fasting under 6 months

c) Breast milk 3 hours before and clear fluids 1 hour before (up to 3ml/kg/hr)

45. What lesion stroke right homonymous hemianopia and right hemisensory loss

- a) Posterior Cerebral
- b) Superior cerebellar
- c) Inferior cerebellar

47. ECG with infarct what territory (anteroseptal deep ST depression)what vessel (posterior infarct - pic below is wrong)



- a) PDA
- b) Obtuse marginal
- c) LAD
- d) RCA
- e) Left circumflex

48. What order to you remove your PPE?

- a) Gloves, gown, goggles, mask, wash hands
- b) Gloves, gown, wash hands, goggle, mask
- c) Gown, goggles, mask, glove, wash hands
- d) Goggles, mask, gown, glove, wash hands

49. Stellate ganglion block what pupil changes?

- a) Pupillary constriction without response to light
- b) Pupillary constriction with preserved response to light
- c) Pupillary dilation without response to light
- d) Pupillary dilation with preserved response to light

50. Brain Trauma foundation recommends treating ICP above what value?

- a) 10mmHg
- b) 15mmHg
- c) 20mmHg
- d) 22mmHg**
- e) 30mmHg

51. According to interventional neuroradiologist society, what do you aim for in acute stroke?

- a) SBP 140-180mmHg

54. NOACS non vit K effects worsened with?

- a) Diltiazem
- b) Clarithromycin
- c) Atorvastatin
- e) Fluconazole*

55. What can you dialyse?

- a) Clopidogrel
- b) Dabigatran

56. Time to perform neuroaxial post ceasing apixiban with normal renal function

- a) 24 hours
- b) 48 hours
- c) 72 hours
- d) 96 hours
- e) 120 hours

57. MMR vaccine anaphylaxis what can't you have?

- a) Protamine
- b) Penicillin
- c) Sulphonamides
- d) Gelofusine**

59. IgE mediated allergy penicillin what rate ANAPHYLAXIS cephalosporin:

- a) 1%
- b) 2%
- c) 5%
- d) 10%
- e) 20%

63. CXR complete left sided whiteout confused hypoxic, air bronchogram present on XR:

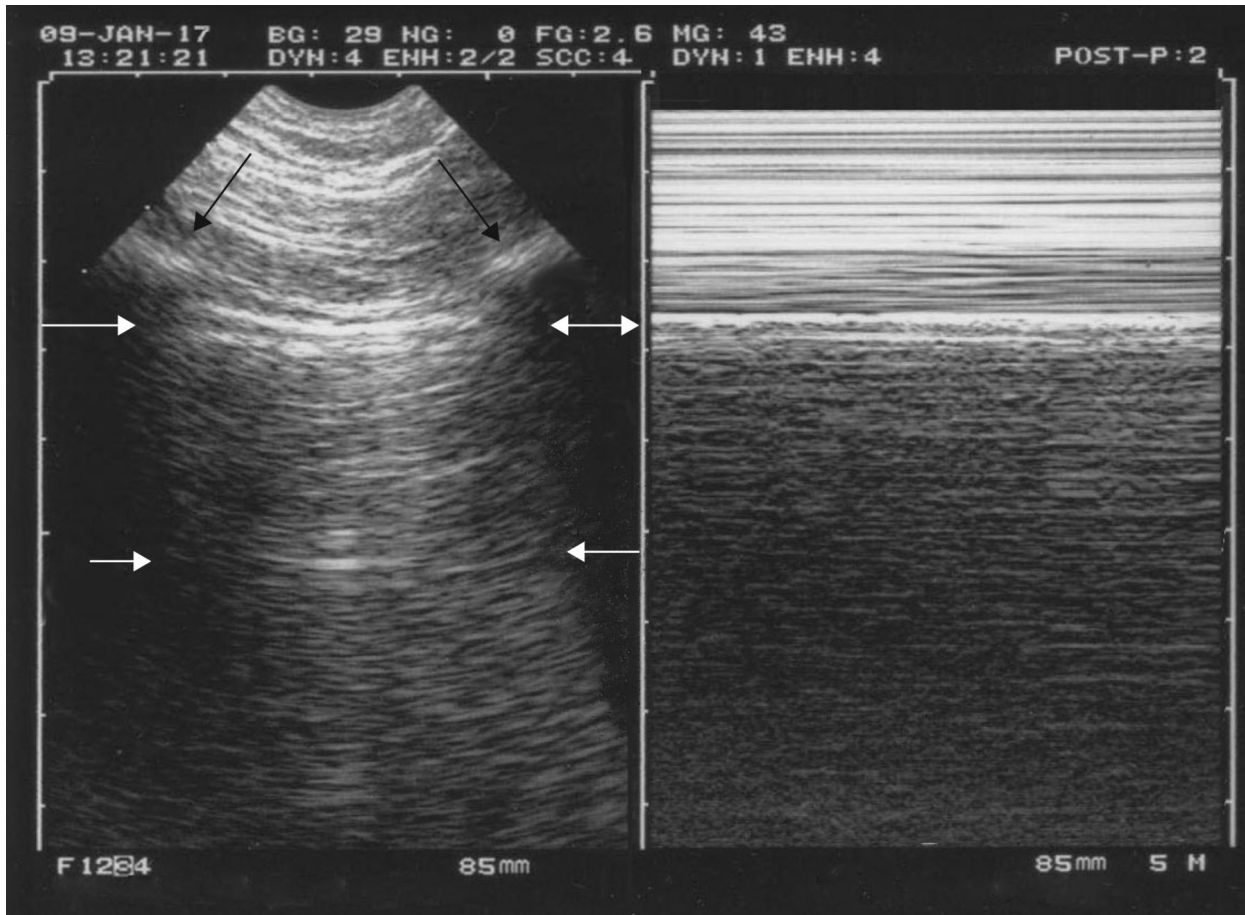
- a) Pneumothorax
- b) Pneumonia
- c) Post pneumonectomy
- d) Pleural effusion

64. Best resolution US probe for median nerve visualisation:

d) 5-10mHz

e) 6-13mHz

65. Lung US picture post CVC insertion what does it show?



a) Pneumothorax

b) Effusion

c) Pneumonia

d) Oedema

e) Normal lung

66. Young person for non adrenal paraganglionoma resection secreting metanephrine. What initial treatment as an outpatient?

- a) Prazocin
- b) Phentolamine
- c) Magnesium
- d) Phenoxybenzamine
- e) Ca channel blocker

69. Differential hypoxia is seen during what?

- a) VA ECMO
- b) VV ECMO
- c) LVAD

72. Bicarbonate during arrest for hyperkalaemia in 60kg man dose of 8.4%:

- a) 60mls

73. Perioperative hypothermia down to 35degrees - effect on bleeding:

- a) More bleeding with normal INR and APTT
- b) More bleeding with normal INR and raised APTT
- c) More bleeding with raised INR and normal APTT
- d) Unchanged bleeding and normal INR and APTT
- e) Unchanged bleeding and elevated INR and APTT

74. Which of the following would be seen with GOLD 3 COPD:

- a) FEV1 83%
- b) FEV1 57%
- c) FEV1 43%**
- d) FEV1 27%
- e) FEV1 19%

75. RFTS: Normal ratio, low FVC, low FEV1, Normal DLCO:

- a) Sarcoid
- b) Myasthenia Gravis**
- c) Asthma
- d) Emphysema

76. FONTAN post induction sats 75% and SBP 85. What to do next?

- a) Increase PEEP
- b) Increasing TV
- c) Reduce FiO2
- d) Reduce volatile**
- e) Reverse trendelenberg

77. What is the static compliance? PEEP 8, autopeep 4, plateau pressure 32, peak insp pressure 38, TV 600

- a) 20ml/cmH2O
- b) 30ml/cmH2O**

78. NNT nausea for antiemetic 25 vs 20%

a) 20

79. Blood gas lady CO2 85 normal pH HCO3 43ish pH 7.33

a) Chronic respiratory acidosis with metabolic compensation and normal anion gap

80. Called to assist a colleague who is having trouble intubating a large male. LMA has been inserted and an exchange catheter placed. How much catheter would be out of mouth if at carina?

a) 45cm

b) 40cm

c) 30cm

85. SIADH Na 110. What finding would support diagnosis?

a) Urine osmolality <100

b) Urine sodium >40

c) Euvolaemia

d) Normal cortisol

e) Hypoosmolality

86. Composition of NaCl 0.9%

a) Na 154, osmol 308

87. Highest cause anaesthetic airway death NAP 4:

a) Failed intubation

b) Tracheostomy displacement

c) Aspiration

88. Overall awareness risk in GA caesar?

- a) 1:700
- b) 1:9000
- c) 1:18000

90. Flow, pressure and volume graphs over 2-3 breaths. TV 500-600ml, max pressures above 30, long expiration that did reach 0 just before next breath:

- a) Gas trapping
- b) Patient triggering
- c) COPD
- d) Circuit leak

91. Whats AA gradient 40% FiO₂, PaO₂ 135, CO₂ 48, SpO₂ 100%:

- a) 90mmHg**

92. Rheumatoid arthritis on 5mg OD pred for years. What steroids to give?

- a) Prednisolone 5mg daily
- b) Prednisolone 25mg
- c) Hydrocortisone IV 50mg
- d) Hydrocortisone IV 25mg

94. Which neuro disease is made worse by hyperthermia?

- a) Multiple sclerosis**
- b) Myasthenia gravis
- c) Muscular dystrophy

95. Iron deficiency on bloods (Hb 110, CRP 10, Ferritin 50) before elective Total hip revision in 2 weeks?

- a) IV iron and proceed
- b) Proceed
- c) Transfuse 2 XPRBC and proceed
- d) Oral iron and proceed
- e) Oral iron and postpone for 6 weeks

96. The choking man what to do as per ALS:

- a) One back blow
- b) One back blow and one chest thrust
- c) One chest thrust
- d) One abdominal thrust

97. Commence replacement in PPH when fibrinogen level less than:

- a) 1
- b) 1.5
- c) 2**

98. Chest pain at rest last 30 minutes and raised trop 10 days post non cardiac surgery, no ecg changes

- a) NSTEMI
- b) STEMI
- c) Unstable angina
- d) Myocardial injury after noncardiac surgery (MINS)

100. Perioperative OSA is associated with:

- a) Increased AMI
- b) Increased mortality
- c) Increased AF
- d) Increased admission post ambulatory surgery
- e) Increased AKI

101. What is severe paediatric OSA in terms of AHI:

- a) >10
- b) >15
- c) >30
- d) > 20 *

102. Lady with chronic pain coming for surgery on Hydromorphone 12mg orally what equivalent parental morphine does?

- a) 10mg
- b) 20mg**
- c) 30mg
- d) 40mg
- e) 50mg

103. Which drug not metabolised by CYP2D6?

- a) Oxycodone
- b) Tramadol
- c) Amitryptiline
- d) Codeine
- e) Hydromorphone**

104. Benztropine antagonizes what?

- a) Dopamine receptor
- b) Nicotinic Ach receptor
- c) Muscarinic Ach receptor

106. Highest risk bloodstream infection per day?

- a) PICC
- b) Short term CVC
- c) Short term cannula
- d) Tunnelled port
- e) Arterial line

107. 10 days post cardiac surgery most inappropriate to give in ALS:

- a) Atropine 3mg
- b) Adrenaline 1mg
- c) 1L crystalloid
- d) Amiodarone 300mg
- e) 3 stacked shocks

109. ECG calibration, 10mm on Y axis is equal to:

b) 1mV

114. Mast cell tryptase: which does NOT cause elevated baseline?

a) Chronic renal failure

b) Alcoholic liver disease

c) Chronic eosinophilic leukaemia

d) Mastocytosis

e) Acute myeloid leukaemia

115. In pregnancy what changes?

a) Reduced MV

b) Reduced TV

c) Reduced FRC

116. Laryngoscope scope cleaning of handle, with no gross contamination/debris:

a) Disinfect with chlorhex/alcohol

b) Autoclave

c) Wipe with detergent*

d) Nothing

e) Sterilise

REPEATS

5. Adductor canal vs femoral nerve block:

a) Various combinations

of analgesia and motor weakness

e) Less quadriceps weakness

7. Aprepitant acts on receptors for the following?

1. Neurokinin 1
2. Substance P

8. Image of lumbosacral plexus with arrow pointing at obturator nerve (Exact image below without the labels)

- a) Lateral Femoral Cutaneous Nerve Thigh
- b) Femoral
- c) Sciatic
- d) Obturator**
- e) Iliohypogastric

11. Adduction of thigh during diathermy of bladder wall

a) Obturator nerve

13. Women with weakness in hip flexion and knee extension + anterior thigh numbness post caesar which lesion?

- a) Lumbosacral**
- b) Femoral
- c) Obturator

14. Dental damage which tooth most likely?

a) Left central maxillary incisor

17. Symptoms of organophosphate poisoning, which is not appropriate tx?

- a) Glycopyrrolate
- b) Rocuronium
- c) Diazepam
- d) Suxamethonium**
- e) Pralidoxime

23. Brown sequard- what symptoms on the ipsilateral side?

- a) Motor block
- b) Pain and temperature
- c) Light touch
- d) Proprioception

25. Shown TTE VTI with peak at 3cm/s. CVP of 5. RVSP calculation:

- a) 41mmHg

27. Drug least likely to affect SSEP:

- a) Fentanyl
- b) Midazolam
- c) Propofol

28. Picture balloon pump 1:2 inflation:

- a) Early deflation (looked like this)**

29. Immediate Management of Haemoptysis post PAC insertion:

a) Withdraw 2cm and insert DLT

33. Lithium what drug not to give:

a) Diclofenac

36. Which nerve needs to be blocked for 4th toe amputation:

a) Sural

b) Saphenous

c) Posterior tibial

d) Calcaneal

e) Deep peroneal

46. Deviated tongue to right after LMA:

a) Right glossopharyngeal

b) Left glossopharyngeal

c) Right hypoglossal

d) Left hypoglossal

e) Right vagus

52. Paediatric CXR, what does it show? (Exact image)

a) ASD closure device

53. All are possible complications of dural puncture except:

- a) Cortical vein thrombosis
- b) Subdural haemorrhage
- c) Seizure
- d) **Encephalitis**

58. Bleeding post AFE what's contraindicated?

- a) FFP
- b) Cryoprecipitate
- c) Platelets
- d) Novoseven (Factor 7a) *?
- e) **Prothombinex**

60. IJ US probe colour doppler?

- a) Red is artery and blue is vein
- b) Blue is artery and red is vein
- e) **Red or blue depending on angulation of probe**

61. Man is breathless in recovery post hemicolectomy. Interpret CXR:

- a) Left pneumothorax
- b) Right pneumothorax
- c) **Left lower lobe collapse**
- d) Right lower lobe collapse
- e) Normal XR

62. Mild epistaxis with type 1 vWD what initial treatment?

- a) TXA
- b) vWF concentrate
- c) FFP
- d) Factor 8
- e) Factor 7a

67. Confidence interval if 100 subjects studied with no outcomes found:

- a) 0/100
- b) 1/100
- c) 3/100**

68. What nerve not needing to be blocked in nasal AFOI?

- a) Anterior Ethmoidal
- b) Tonsillar
- c) Palatine
- d) Glossopharyngeal
- e) Lingual

70. Prolonged block post mivacurium what to do?

- a) Neostigmine 100mcg/kg
- b) FFP
- c) Wait
- d) Sugamadex

71. COPD and chronic AF on digoxin 115mcg. Bronchospasm intra op so given salbutamol and resolved. Then fast AF at 120bpm. ETCO2 40, SBP 90:

a) Amiodarone 150mg over 10 minutes

then 0.5-1mg/min

b) Digoxin 500mcg IV load

c) Esmolol 500mcg/kg over 1-2 minutes

then infusion at 50mcg/kg/min

d) Cardioversion

e) Metoprolol 2.5-5mg over minutes

and repeated ever 2-3 minutes

81. Deranged LFTs in pregnancy with INR 2.1:

a) Acute fatty liver

82. Early dialysis in sepsis:

a) No benefit

83. Early haemodynamic changes in burns repeat:

a) Increase PVR

b) Decreased SVR

c) Increased cardiac index

d) Increased stroke volume

84. SBP in TBI as per BTF for age 50-69 (or 15-49 & >70)

a)110mmHg

B) 100mmhg

89. Graph variable extrathoracic obstruction

93. 50 year old with AF and no other medical issues. Anticoagulant plan?

a) Nothing

99. Venturi mask max FiO₂:

c) 60%

105. Prevent agitation post ECT least useful

a) Remifentanyl bolus

108. Number of amps for macroshock for VF:

a) 100mA

110. Contraindication to blind nasogastric, all except:

a) C-spine injury

b) Recent nasal surgery

c) Oesophageal fracture

d) Base of skull fracture

111. TAVI compared to AVR:

- a) Reduced vascular injury
- b) Reduced mean valve gradient**
- c) Reduced paravalvular leak
- d) Reduced complete heart block
- e) Reduced reintervention

112. Risk factors for cement implantation syndrome

113. Renal blood flow infra renal cross clamp:

- a) Increased by 40%
- b) Increased by 20%
- c) Unchanged
- d) Decreased 20%
- e) Decreased 40%**

112. Central line position for cavo atrial junction:

- a) 2 vertebral bodies superior to carina
- b) 1 vertebral body superior to carina
- c) At the carina
- d) 1 vertebral body inferior to carina
- e) 2 vertebral bodies inferior to carina

117. Pain, proptosis post peribulbar block. Purpose of lateral canthotomy:

Allow eye to proptose

Reduce traction on eye (yes they said traction!)

118. Epidural filter size

0.2 micrometres

119. Blalock shunt connects what to what?

right subclav to right PA