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**University Hospital, Geelong
Emergency Medicine
Trial Fellowship Exam
Short Answer Questions (SAQ)
Week 12**

DIRECTIONS TO CANDIDATE

1. Answer each question in the space provided in this question paper.
2. Do not write your name on this question paper.
3. Enter your examination number in the space below.
4. Cross out any errors completely.
5. Do not begin the exam until instructed to do so.
6. Do not take examination paper or materials from this room.
7. The booklet binder may be removed during the exam.

**QUESTION & ANSWER
BOOKLET**

Question 1 (18 marks)

- a. What is the role of the ROSIER scale in the Emergency Department? State three (3) points in your answer. (3 marks)

1. _____

2. _____

3. _____

A patient presents after a sudden onset of dense right hemiparesis.

- b. List five (5) inclusion criteria that must be met for the patient to be considered for thrombolysis. (5 marks)

1. _____

2. _____

3. _____

4. _____

5. _____

Question 1 (continued)

A non-contrast CT brain is taken- refer to the props booklet- page 1.

- c. State the diagnosis, based on this CT scan and the clinical features provided.(1 mark)

The patient undergoes thrombolysis and suffers a lethal intracerebral bleed. It is discovered that the patient had a recognised contraindication to thrombolysis.

- d. List the five (5) elements involved in the process of open disclosure. (5 marks)

1.

2.

3.

4.

5.

Question 1 (continued)

e. In general, list four (4) factors that would support the role for decompressive craniectomy. (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 2 (12 marks)

A 75 year old woman presents following a fall from standing. She is complaining of bilateral hip pain only.

Her observations are:

BP	75/ 50	mmHg
HR	135	/ min
RR	20	/ min
Oxygen saturations	98%	room air
GCS	13	E3, V4, M6

A pelvis xray is taken- refer to the props booklet- page 2.

a. State four (4) abnormal findings shown in this xray. (4 marks)

1. _____

2. _____

3. _____

4. _____

b. List four (4) further imaging studies that you would consider for this patient (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 2 (continued)

- c. Assuming that you have IV access, list four (4) steps in your approach to managing her pain control. (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 3 (12 marks)

A 25 year old presents following a stab wound to the neck.

a. List four (4) key historical features that are important in this case. (4 marks)

1. _____

2. _____

3. _____

4. _____

5. _____

b. List four (4) examination features that are important in this case. (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 3 (continued)

c. As they pertain to the neck, list the boundaries of the following. (3 marks)

Zone 1: _____

Zone 2: _____

Zone 3: _____

d. What feature of the wound would allow definitive repair in the emergency department. (1 mark)

Question 4 (12 marks)

A 3 month old infant presents with shortness of breath and difficulty breathing.

Her observations are:

BP	85/ 50	mmHg
HR	125	/ min
RR	80	/ min
Oxygen saturations	98%	room air
Temperature (rectal)	36.5	°C

- a. List four (4) likely differential diagnoses for this patient (each to be from a different pathological category). For each, list the method of confirmation of diagnosis. (8 marks)

	Differential diagnosis (4 marks)	Method of confirmation of diagnosis (4 marks)
1		
2		
3		
4		

Question 4 (continued)

- b. List four (4) historical factors that would suggest a serious illness for this patient. (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 5 (12 marks)

An 87 year man presents from a nursing home with acute deterioration.

An ECG is taken- refer to the props booklet- page 3.

a. What is the most likely diagnosis? (1 mark)

b. List three (3) features of this ECG that support this diagnosis. (3 marks)

1. _____

2. _____

3. _____

c. List four (4) likely causes for this diagnosis. (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 5 (continued)

d. List four (4) treatments that you would consider for this patient. (4 marks)

1. _____

2. _____

3. _____

4. _____

Question 6 (12 marks)

A 45 year old man presented following a fall from a ladder. He has suffered an isolated injury to his right arm.

An elbow X-Ray is taken- refer to the props booklet- page 4.

a. List four (4) potential complications of this injury in the first 7 days. (4 marks)

1. _____
2. _____
3. _____
4. _____

He last ate 2 hours ago. He has received 20 mg morphine IV en route in the ambulance. His BP is 140 mmHg and HR 110 / min.

b. List your preferred analgesic/ sedative regime for the correction of this injury in the Emergency Department (include doses and routes). State three (3) points in your answer. (3 marks)

1. _____
2. _____
3. _____

Question 6 (continued)

c. Assuming adequate analgesic/ sedation, list five (5) steps in your measures to correct this abnormality. (5 marks)

1. _____

2. _____

3. _____

4. _____

5. _____

Question 7 (10 marks)

A 47 year old man with a history of chronic liver disease and schizophrenia is brought to your emergency department with acute confusion.

His observations are:

BP	120/60	mmHg
HR	120	/min
RR	40	/min
GCS	12	E3, V4, M5

Selected biochemistry are taken- refer to the props booklet- page 5.

a. Provide two (2) calculations to help you to interpret these results. (2 marks)

Derived value 1: _____

Derived value 2: _____

Question 7 (continued)

b. List four (4) likely explanations for these results. (4 marks)

1. _____
2. _____
3. _____
4. _____

You assess the patient as being moderately dehydrated.

c. List four (4) points in your approach to his fluid replacement regime. (4 marks)

1. _____
2. _____
3. _____
4. _____

Question 8 (12 marks)

A 26 year old man presents four hours following a recreational drug binge. A friend reports that he has been using large doses of "ICE".

a. List four examination findings that may be seen with ICE use. (4 marks)

1. _____
2. _____
3. _____
4. _____

The patient refuses to remain for assessment. You are required to chemically sedate the patient.

b. List your preferred drug regime in this situation, for the stated circumstances (include drug, dose and route): (3 marks)

i) Will accept oral treatment _____

ii) Refuses oral medication, moderate degree of agitation _____

iii) Refuses oral medication, going "nuts" _____

Question 8 (continued)

The patient is sedated. Physical restraint is not required. Your complete assessment detects no organic pathology.

c. List five (5) key components to the ongoing care of this patient. (5 marks)

1. _____
2. _____
3. _____
4. _____
5. _____

Question 9 (18 marks)

A 5 year old girl is referred by a GP with pallor and lethargy.
On examination she is extremely pale but appears alert and interactive.
Her observations:

BP	100/60	mmHg
HR	110	/min
RR	20	/min
O2 saturations	98%	on room air
Temperature	36.8	°C
GCS	15	

Selected blood tests are taken- refer to the props booklet- page 6.

a. List four (4) different pathological causes for these results. (4 marks)

1. _____
2. _____
3. _____
4. _____

Question 9 (continued)

b. List six (6) further investigations that you would perform in the emergency department for this girl. (6 marks)

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

Question 9 (continued)

The mother refuses any blood products based on religious beliefs.

c. List five (5) situations under which you may override these wishes. (5 marks)

1. _____
2. _____
3. _____
4. _____
5. _____

None of these situations are met.

d. List three (3) alternative treatments that you could institute, other than the provision of blood products for this patient. (3 marks)

1. _____
2. _____
3. _____

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Week 12

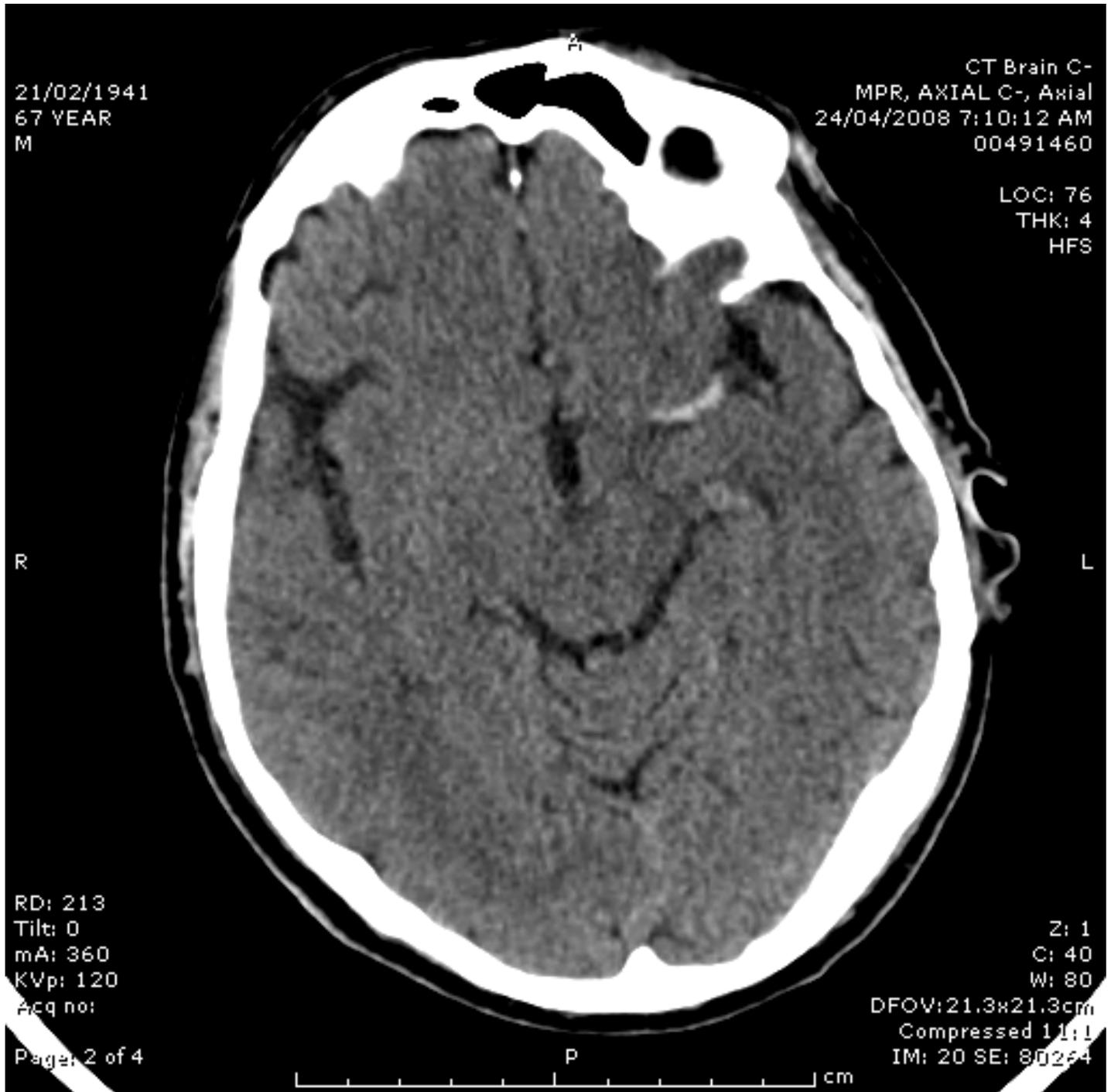
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PROP BOOKLET

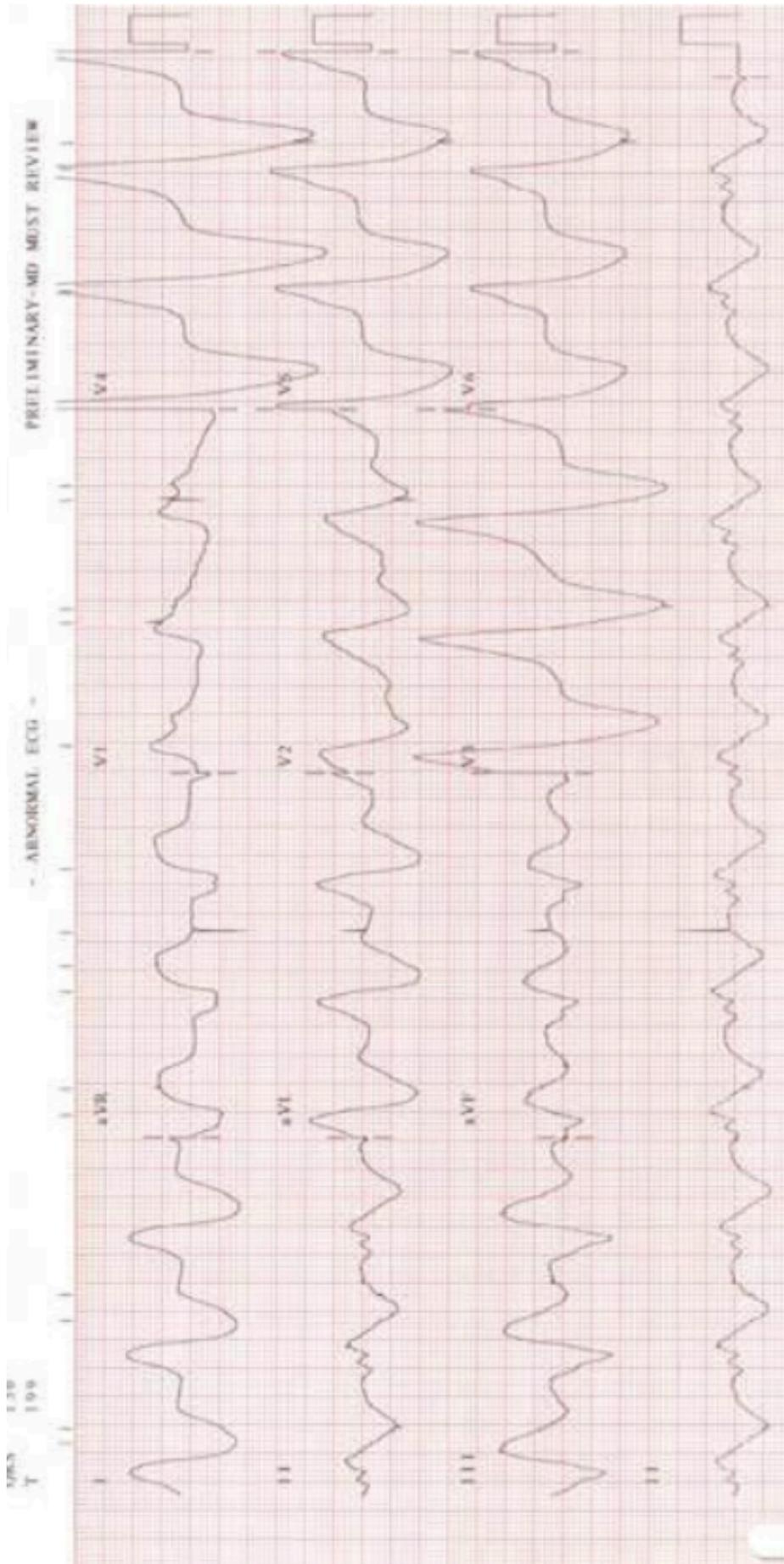
Question 1



Question 2



Question 5



Question 6



Question 7

			Reference Range
Arterial Blood Gas			
FiO ₂	21	%	
pH	7.30		7.35-7.45
pO ₂	91	mmHg	80-95
pCO ₂	15	mmHg	35-45
HCO ₃ ⁻	9	mmol/L	22-28
Lactate	14	mmol/L	< 2.0
Electrolytes			
Na ⁺	101	mmol/L	134-146
K ⁺	4.7	mmol/L	3.4-5
Cl ⁻	73	mmol/L	98-106
Glucose	10.5	mmol/L	3.5-5.5

Question 9

Her full blood count results are as follows

		Reference Range	Units
Hb	35	(101-131)	g/L
WCC	9.1	(6.0-11.0)	$10^9/L$
PLT	260	(150-450)	$10^9/L$
RBC	2.18	(3.9-5.3)	$10^{12}/L$
MCV	56.0	(75-85)	fL
MCH	16	(23-31)	pg
MCHC	286	(310-355)	g/L
Retic %	3.6	(0.2-2.0)	