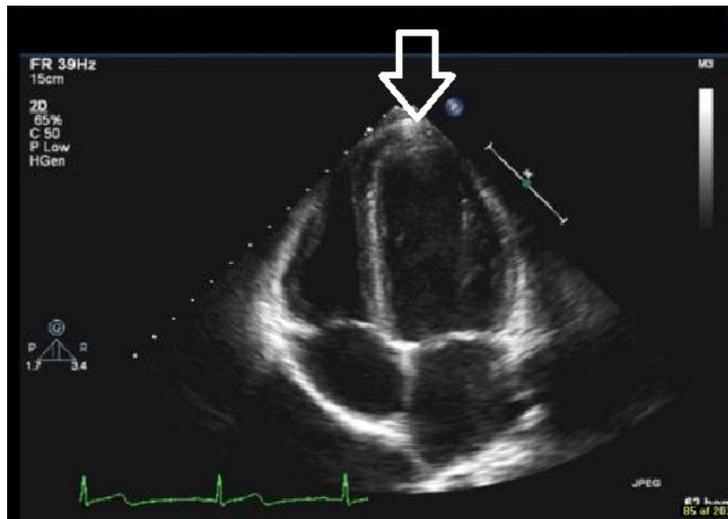


1. Least likely to be difficult intubation (REPEAT)
 - A. Downs syndrome
 - B. Aperts
 - C. Treacher-Collins
 - D. Beckwith Weidemann
 - E. Pierre Robin

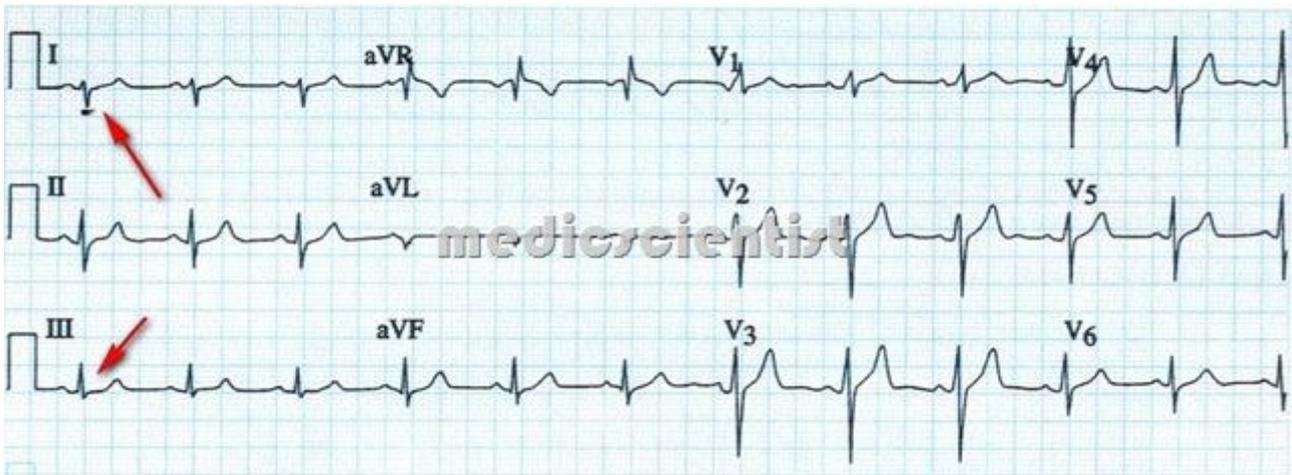
2. What is NOT an absolute contraindication to organ retrieval?
 - A. HIV
 - B. Adenovirus
 - C. Measles
 - D. Enterobacter sepsis
 - E. Herpes encephalopathy

3. What vessel supplies arrowed area?



- A. LAD
 - B. 1st marginal
 - C. LCx
 - D. PDA
 - E. RCA
-
4. Maximal daily rate of correction for hyponatraemia?
 - A. 5mmol
 - B. 8mmol
 - C. 12mmol
 - D. 15mmol
 - E. 18mmol

5. What is the axis of the pictured ECG?



- A. 30
- B. -30
- C. 60
- D. 90
- E. 150

6. Hyperalgesia caused by remifentanyl is reduced by all except

- A. clonidine
- B. ketamine
- C. pregabalin
- D. propofol
- E. magnesium

7. 75 year old female awaiting ORIF for # NOF. Upon entering the Anaesthetic bay HR 110 - 145 and BP 130/80 in rapid AF. Previous day electrolytes normal and ECG Sinus Rhythm. Options for treating Rapid AF

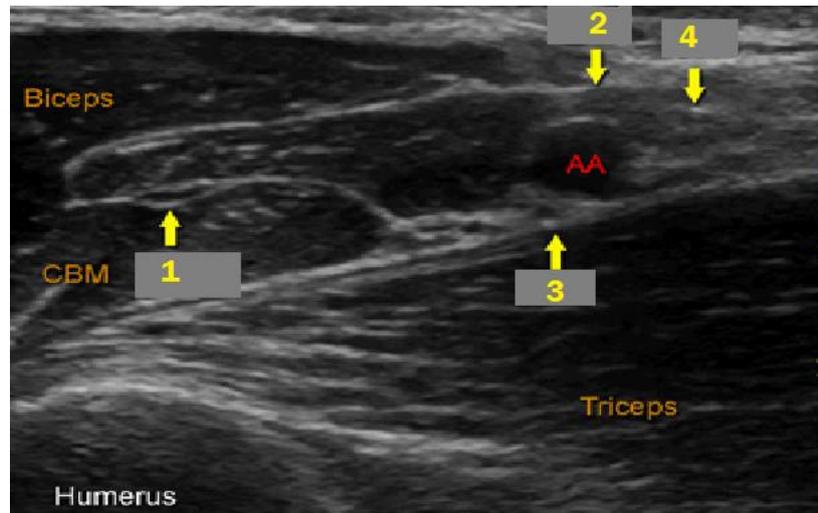
- A. amiodarone
- B. DC cardioversion post induction
- C. Digoxin
- D. Metoprolol
- E. Heparin

8. Preparing for a RIJ Central Line. Scanning neck in the short axis. On colour doppler what you will see.

- A. Blue colouration in systole and red in diastole
- B. Blue colouration in diastole and red in systole.
- C. Red colour in systole
- D. Blue throughout cardiac cycle
- E. Either blue or red depending on the axis of the ultrasound probe

9. Axillary brachial plexus block USS. Which nerves to block for index finger surgery. 4 nerves labelled with various combinations.

- A. 1 & 2
- B. 1 & 3
- C. 1 & 4
- D. 2 & 3
- E. 3 & 4



10. Max FiO2 with Venturi mask

- A. 25%
- B. 40%
- C. 60%
- D. 70%
- E. 90%

11. Patient in DKA with pH 7.12, ketones 15, BSL 24mmol/L. What do you use to monitor the severity of and resolution?

- A. Bicarbonate
- B. Urinary Ketone
- C. Blood ketones
- D. BSL
- E.

12. You are seeing a patient in pre-admission clinic with a fenestrated tracheostomy in situ. In order for him to talk to you, you would

- A. Deflate tracheostomy cuff, insert fenestrated piece, insert one-way valve.
- B. Deflate tracheostomy cuff, insert fenestrated piece, remove one-way valve.
- C. Deflate tracheostomy cuff, insert unfenestrated piece, remove one-way valve.
- D. Inflate tracheostomy cuff, insert unfenestrated piece, insert one-way valve.
- E. Inflate tracheostomy cuff, insert fenestrated piece, insert one-way valve.

13. What is the most common complication of extra-corporeal membrane oxygenation?

- A. Differential oxygenation
- B. Haemolysis
- C. Haemorrhage
- D. oxygenator failure
- E. Stroke

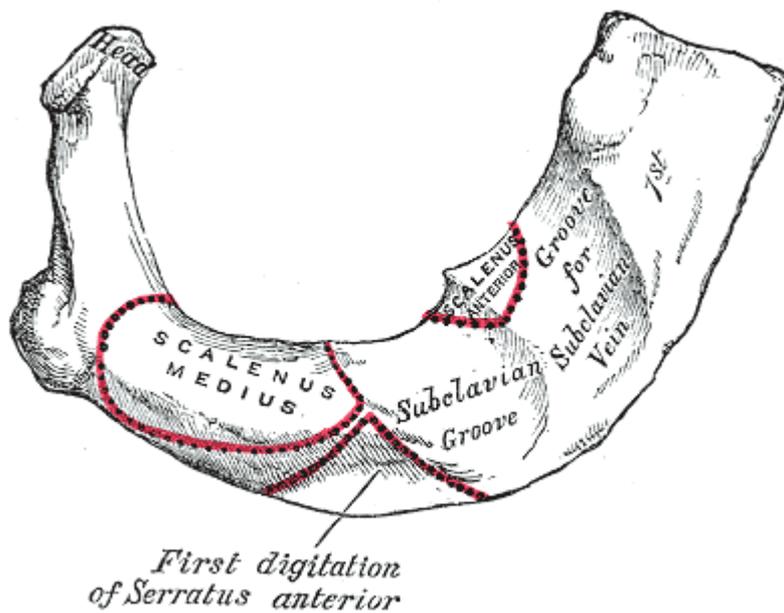
14. A 66 year old male patient has undergone a VAT-assisted upper lobectomy. He becomes dyspnoeic in Recovery. You perform a lung ultrasound and obtain the image below. What is the cause of his dyspnoea?



- A. Haemothorax
 - B. Pleural effusion
 - C. Pleural oedema
 - D. Pneumonia
 - E. Pneumothorax
15. Accidental needle stick injury with a hollow bore needle. Likelihood of Hepatitis C transmission? (REPEAT)
- A. 0.3%
 - B. 2%
 - C. 10%
 - D. 20%
 - E. 30%
16. Patient's core temperature drops 1 degree 20 minutes after induction of general anaesthesia. What is the most likely cause (REPEAT)
- A. Redistribution from core to peripheries
 - B. Radiation
 - C. Conduction from body to operating table/bed
 - D. Evaporation
17. Woman in her 30s. Has unpleasant spontaneous sensations in her arm. Are these:
- A. Dyesthesias
 - B. Allodynia
 - C. Hyperalgesia
 - D. Hyperesthesia
 - E. Paresthesia
18. Picture of 1st rib – what is the structure that attaches to the shaded area (Scalenus anterior):
- A Scalenus medius
 - B Saclenus anterior
 - C SCM

D Parietal pleura

E Articular surface with clavicle



19. What drug reverses the effect of salmon calcitonin:

- a. Magnesium
- b. SSRI
- c. Ondansetron
- d. Naloxone
- e. flumazinil

20. Which NSAID has the lowest VTE

- a. Parecoxib
- b. Celecoxib
- c. Naproxen
- d. Ibuprofen
- e. Diclofenac

21. What is most effective management - single dose post wisdom tooth removal.

- a. Ibuprofen 400mg
- b. Tramadol 100mg
- c. Paracetamol 1000mg
- d. Naproxen

22. Given TTE valves: TR jet 3, AR jet 4, CVP 5, EF 65%. What is the RVSP?

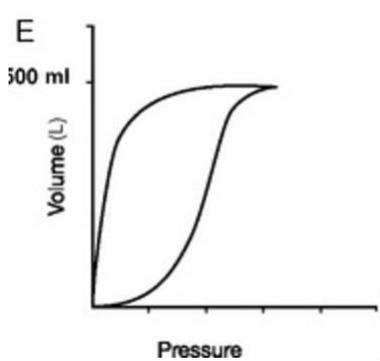
- a. 36
- b. 41
- c. 56
- d. 52
- e. 51

23. ECG of lead misplacement - Is this dextrocardia

24. ECG with widespread ST elevation
- Is this pericarditis
25. Picture of lateral chest xray - repeat
- R middle lobe
 - L lower lobe
 - Left Upper lobe
 - R lower lobe
26. What is not safe for someone on lithium? Least safe?
- Oxycodone
 - Ibuprofen
27. How much croprecipitate to give a 70kg man to raise fib by 1
- 50
 - 100
 - 150
 - 200
 - 250mls
28. When should you replace fibronigen in PPH?
- <1
 - <1.5
 - <2
 - <2.5
29. ATACAS trial - tranexamic acid was associated with
- seizure
 - Increased graft clotting
 - Renal failure
30. Increased splitting of the second heart sound on inspiration with
- AR
 - Pul stenosis
 - HOCM
31. Respiratory function test in 20 year old CF?
- Mixed
 - Obstructive
 - Restrictive
 - Restrictive + low DLCO
32. What is the name of the number of cases that would need to change to make a study not significant?
- Bonferri index
 - Yanna index
 - Fragility index
33. What is the mean duration of analgesia after ganglion ablation in trigeminal neuralgia
- 1 year

- b. 2 years
- c. 5 years
- d. 10 years
- e. 15 years

34. Image of dynamic pressure volume loop (not this exact image; the curve shape was the same; but the whole curve was shifted to the right a little bit).



- a. under-expansion
- b. optimal
- c. excessive PEEP
- d. inadequate PEEP
- e. over-expansion

<https://clinicalgate.com/invasive-respiratory-support/>

35. A patient is scheduled to have a video-assisted thoracoscopic lower lobe wedge resection. The risk of hypoxia on one-lung ventilation is increased with
- a. lateral as compared to supine positioning
 - b. left sided surgery
 - c. low A-a gradient when ventilating both lungs
 - d. right sided surgery
 - e. central rather than peripheral lesion.
36. A 79 year old patient with Parkinson's Disease takes donepezil. He presents for emergency laparoscopic appendicectomy. Regarding the donepezil:
- a. neostigmine reversal may not work
 - b. duration of action of rocuronium will be prolonged
 - c. a reduced dose of rocuronium is required
 - d. increased suxamethonium dose will be required
 - e. neostigmine dose should be decreased

37. Subarachnoid injection of plain vs heavy bupivacaine for obstetric procedures reduces:

- a. onset time
- b. time to offset for adequate analgesia
- c. combinations of above

38. Child on mapleson F circuit during transport, ETCO₂ starts to rise. Best management:

- a. Increase gas flows
- b. Decrease gas flow
- c. Increase respiratory rate
- d. Increase Tidal Volume

39. Least likely to be difficult intubation (REPEAT)

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- d. Beckwith Weidemann
- e. Pierre Robin

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- b. DC cardioversion post induction
- c. Digoxin
- d. Metoprolol
- e. Heparin

42. Preparing for a RIJ Central Line. Scanning neck in the short axis. On colour doppler what you will see.

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- c. Red colour in systole
- d. Blue throughout cardiac cycle
- e. Either blue or red depending on the axis of the ultrasound probe

43. What is the most common complication of extra-corporeal membrane oxygenation?

- a. differential oxygenation
- b. haemolysis
- c. haemorrhage
- d. oxygenator failure
- e. stroke

44. What is the shelf life of platelets

- a. 3-5 days at 20-40 degrees Celsius
- b. 14 days at 20-40 degrees Celsius
- c. 35 days at 2-6 degrees Celsius
- d. 42 days at 2-6 degrees Celsius
- e. 12 months at -20 degrees Celsius

45. In patients with refractory elevated ICP, bilateral decompression craniotomy is associated with reduction in ICP and:

- a. shortened period of mechanical ventilation
- b. no change to period of mechanical ventilation
- c. lower mortality
- d. worsened long term neurological outcome
- e. shortened hospital stay

46. Therapeutic privilege is defined as:

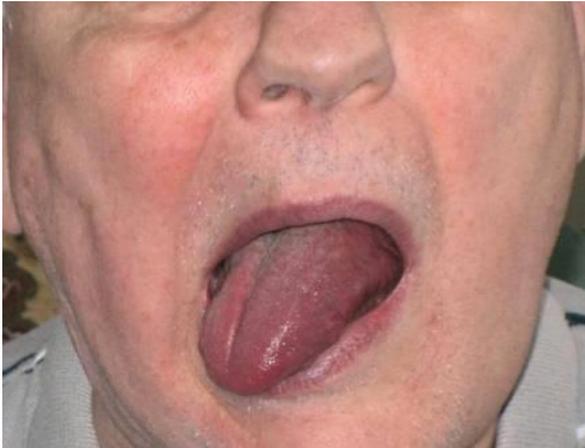
- A. withholding information to enable you to gain consent
- B. use of placebo medication with the knowledge of no specific clinical effect
- C. non-disclosure of risk to respect cultural beliefs and/or background
- D. benefit, monetary or otherwise from use or promotion of medicines
- E. ?

47. You preoxygenate a patient well with transnasal humidified high flow oxygenation (?exact term they used) at 70 L/min. You induce anaesthesia, paralyse the patient and maintain the airway with jaw thrust. The patient is saturating well, but is apnoeic for 10 minutes. The expected increase in the expired CO₂ is:

- A. 10
- B. 20
- C. 30
- D. 40
- E. 50

48. Following neck dissection 1 year ago, most likely explanation is injury to the right:

** note: (I guarantee it said right and the picture was as shown... I think it may have been this exact pic except in black and white)**



- A. chorda tympanae branch of facial nerve
- B. Glossopharyngeal nerve
- C. Hypoglossal nerve
- D. lingual nerve
- E. mandibular branch of trigeminal nerve

49. 3-bottle suction system- what happens when you remove suction from the 3rd bottle?

- A. Patient will get a pleural effusion
- B. Patient will get a pneumothorax
- C. Unable to apply suction to the system
- D. Contents will drain freely into the first bottle
- E. (Can't remember)

50. EVAR compared to open AAA repair:

- A. More mortality, less morbidity
- B. Less mortality, less morbidity
- C. Equal mortality and morbidity
- D. Less mortality, more morbidity
- E. More mortality, more morbidity

51. Patient for elective TKR. You do a spinal and an adductor canal block at the start. At the end, surgeon infiltrates local anaesthetic. Day 1 post-op, pt complains of leg weakness in operative leg. Which nerve is LEAST likely to be affected?

- A. Femoral nerve
- B. Sciatic nerve
- C. Saphenous nerve
- D. Peroneal nerve
- E. Obturator nerve

52. Statistically significant test ($p < 0.05$) The number of non-events required to be changed to events to make the test non-significant is known as

- A. Bonferroni scale

- B. Fragility index
- C. Jaccard index
- D. Propensity score
- E. Youden index

53. Ulnar nerve injury at the elbow will result in:

- A. Numbness of the posterior arm
- B. Arm held in supination
- C. Weakness of thumb abductors
- D. Weakness of finger adductors
- E. Wrist flexion

54. Highest risk of bacterial contamination:

- A. Cryoprecipitate
- B. Extended life plasma
- C. Leukodepleted red cells
- D. Pooled platelets
- E. Thawed fresh frozen plasma

55. Study testing pre op risk.

Early analysis finds both samples are not normal distribution. What test best to check for statistical significance?

- A. T test
- B. F test
- C. Bland Altman
- D. Mann-Whitney
- E. Analysis of variance

56. RFs for Bone cement implantation syndrome

all except:

- A. Male
- B. Diuretics
- C. Age
- D. CV disease
- E. Prev exposure

57. ASA 1 Gynae procedure. CO2 rise peaks at:

- A. <15
- B. 15-30
- C.
- D.
- E.

58. Pringle manoeuvre to decrease bleeding, is performed by occluding the

- A. HA and HV
- B. HA and PV
- C. HA and IV
- D. HV and PV
- E. IVC

59. THR, PE 3/7 after, on therapeutic? But definitely on some anticoagulation
80/40 SOB Hr120/min

Next step:

- A. IVC filter
- B. Supportive
- C. Embolectomy/Int rads
- D. Thrombolysis
- E. Warfarin

60. OLV least likely to cause desat (lay decubitus)

- A. Intra pleural shunt ? (I wrote IP, but now I have no idea what that means)
- B. Inc CO2
- C. Dec O2
- D. HPV
- E. VQ mismatch

61. 18month post after suspected drug ingestion. In VF appropriate joules

- A. 10
- B. 20
- C. 30
- D. 50
- E. 100

62. Women has a GA when do you recommend breastfeeding

- A. When alert and feeling well
- B. Discard first then ok
- C.
- D.
- E.

63. Post dental bleeding. Increased aptt, normal pt, normal platelets. Son bruises easily.

- A. Antithrombin 3 deficiency
- B. Haemophilia A
- C. Haemophilia B
- D. Factor v Leiden
- E. VWB

64. What does not degrade the endocalyx?

- A. Blood loss
- B. Hypervolaemia
- C. Hypoglycaemia
- D. Reperfusion injury
- E. Sepsis

65. The expected rise in PaCO2 (mmHg) for an apnoeic, paralysed patient with THRIVE after 10 mins is:

- A. 10
- B. 20
- C. 30
- D. 40
- E. 50

66. Male bilateral lower limb crush injury. Initial electrolyte disturbance:

- a. Hypocalcemia
- b. Hypophosphatemia
- c. Hyperuricemia
- d. Hyperkalemia
- e. Hyperammonemia

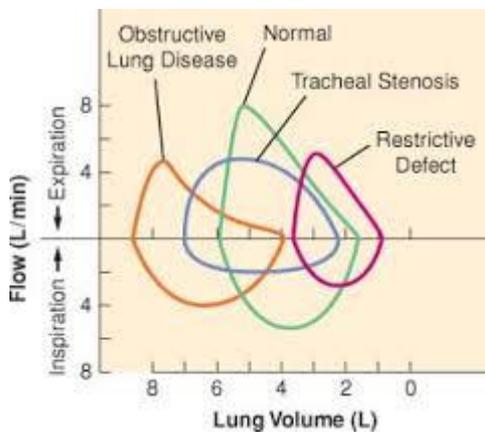
67. Which of the following will prevent the delivery of microshock?

- a. LIM
- b. RCD
- c. equipotential earthing
- d. Safety extra low voltage
- e. Floating circuit

68. what's the antagonist for Salmon calcitonin used as analgesic?

- a. Naloxone
- b. Ondansetron
- c. Magnesium
- d. Flumazenil

69. This flow volume flow would be in fitting with which pathology:



(looked like the restrictive defect loop on this picture)

- a) Lung transplant
- b) Asthma
- c) Tracheal stenosis
- d) Pulmonary fibrosis
- e) Vocal cord palsy

70. 6 week old baby for elective inguinal hernia repair, which fasting time is correct:
- 2 hours for breast milk
 - 4 hours for formula
 - 6 hours for solids
 - 8 hours for solids and 6 hours for liquid
 - some other combo and ended with 2 hours for liquid but the first part I am pretty sure was wrong
71. Hand hygiene product with the highest kill rate of bacteria at 30 seconds is:
- chlorhexidine 4%
 - ethanol solution 70%
 - ethanol gel 80%
 - isopropyl alcohol 70%
 - povidone iodine 7.5%
72. Periperitoneal pelvic packing and haemorrhage – what do you use it
- iliac artery puncture
 - open prostatectomy
 - pelvic ring fracture
 - ruptured ectopic
73. 34 year old male overdose of amitriptyline – decreased level of consciousness, BP 80/40, wide complex QRS consistent with TCA cardiac toxicity. What is the treatment?
- Adrenaline
 - Amiodarone
 - Calcium Gluconate
 - Physiostigmine
 - Na HCO₃
74. In OT with isolated electrical power supply, line isolation monitor. You touch wire from one side of isolated electrical power supply – receive no electric shock. Why?
- no circuit could be completed to earth
 - supply is connected to an equipotential earth
 - operating floor is non-conductive
 - circuit breaker ...?
75. Peribulbar block, which is most likely to be missed
- Inferior oblique
 - Superior Rectus
 - Superior oblique
 - Lateral Rectus

76. ICU pt with overwhelming sepsis, Hb 75, venous sats 71%, INR 1.5, what products do you give?
- Give no blood products
 - 1U prbc
 - 1u prbc + 2 FFP
 - Prothrombinex25microg/kg
 - 2 FFP
77. APGAR score of limp, pale, grimace to stimulation, gasping, pulse rate 90
- 3
 - 4
 - 5
 - 6
 - 7
78. 2x2 contingency table, calculate sensitivity
79. What does St John's wort reduce the effect of (REPEAT)
80. Maternal arrest, what supports amniotic fluid embolism (REPEAT) → C3/4 levels
81. For thyroidectomy which tests need to be normal prior operation (combinations of TSH, T3 & T4)
82. Pre-TKR with iron deficiency and HB 105g/L what should you do → IV iron infusion, PO iron, check Hb day of theatre, continue as planned
83. What is blood test is best indicator of iron deficiency → ferritin, transferrin sats, iron, something else
84. What hand wash kills the most bacteria in first 30 seconds (4% chlorhex, 70% isopropyl alcohol, 80% alcohol gel, some other options)
85. Maternal advice for breastfeeding after general anaesthesia → when awake and comfortable
86. IV adrenaline dose for paediatric grade 2 anaphylaxis (combinations of 0.1, 0.5, 1, 2, 5mcg/kg)
87. Persistent bleeding post dental extraction. Raised APTT, N PT. Son who bruises easily. What is diagnosis?
88. Highest bacterial infection risk → FFP, Plt, cryoetc
89. Gauge of Ezi-IO needles (REPEAT) → 15G
90. What are the 3 main factors in Australian Prothrombinex (various combinations of 2, 7, 9, 10 given)
91. What is NOT in cryo → Factor X
92. Complicated TKR with spinal, long tourniquet time and adductor canal block. Weakness D2 post-op, what is not a possible cause → Saphenous (pure sensory)
93. 28/40 pregnant trauma admit to HDU for monitoring. What mandates urgent intervention → PV bleeding, BP 95/60, baseline variability >30, +veKleinahier.
94. Child with recent URTI with SOB in recovery post squint surgery. Immediate management → CPAP
95. Minimise spasm risk for elective paediatric hernia repair → LMA
96. qSOFA score (but ?different obs to previously asked question)
97. Reversal for dabigatran
98. MOST likely to interfere with monitoring (?MEP) during scoliosis surgery → oxycodone, ketamine, desflurane, other options
99. ICC with 3 chamber underwater seal at -80cmH2O but no water in 3rd canister will result in what?
100. Volatile with longest environmental degradation time → Des
101. Clinical scenario matching MH, what do you do → run 15L flows of O2, change circuit, change machine, hand ventilate, run O2/air mixture

102. Neonate at 2 mins has sats 70%, has been warmed, stimulated and has an open airway. Next move → nothing, intubate, mask ventilate RA, mask ventilate 100%
103. 73 female with AF. Hx DM, CRF, HTN and recent episode of limb weakness. Calculate CHADS2 SCORE (not risk)
104. What is average length of globe AL on USS scan
105. A patient has an above the elbow ulnar nerve palsy following a procedure. They
- F. Reduced sensation of posterior arm
 - G. Arm held in persistent supination
 - H. Unable to flex wrist
 - I. Weakness of thumb abduction
 - J. Weakness of finger adduction
106. Why do we magnetise pacemakers during operations → to minimise inappropriate inhibition
107. Really bad USS image of adductor canal block with muscle outlined. Identify
108. What drug reduced the effect of methadone → think it was phenytoin
109. 18 month old accidental drug ingestion brought in VF arrest. Appropriate Joules for shock
110. Initial medical management of thyroid storm under GA. Beta blocker, deepen anaesthesia, PTU, something else
111. Non parametric data analysis of 250 patients following thoracic surgery, looking for association between biochemical markers and the development of APO. Which test to use?
112. Muscle least blocked with peri-bulbar
113. C5S ECG monitoring, what is picked up in lead 1
114. You review a patient 12 hours post right pneumonectomy on the ward. He is hypoxic, distressed with distended neck veins. What is the best IMMEDIATE management?
- K. Clamp chest tube to prevent more air leak
 - L. Place patient left lateral
 - M. Place another chest tube on the right side
 - N. Perform urgent pericardiocentesis
 - O. Urgently transfuse 2 units packed red blood cells
115. Earliest sign of high spinal in infant
116. The following have been found to decrease the incidence of spinal cord ischaemia EXCEPT
- a. CSF drainage
 - b. high dose IV methylprednisolone
 - c. maintaining MAP > 80
 - d. monitoring motor evoked potentials
 - e. preop identification of intercostal lumbar arteries supplying artery of Adamkiewicz
117. ATACAS showed TXA reduced bleeding but increased → seizure
118. Calculate the RVSP with a range of values given (e.g CVP, TR peak pressure and something else)
119. 56yo male with chronic T6 injury undergoes cystoscopy and TURBT under GA. In PACU, he is hypertensive, bradycardic has chest tightness and is sweating. Most likely cause:
- a. blocked catheter
 - b. fluid overload
 - c. myocardial ischaemia
 - d. perforated bladder
 - e. serotonin syndrome
120. Spirometry can measure
- a. TLV
 - b. RV

- c. FRC
 - d. TLC
 - e. VC
121. Pregnancy first diagnosis of hypertension, best initial treatment → atenolol, magnesium, hydralazine, enalapril or methyldopa (nifedipine/labetalol NOT options)
 122. Maximum time for propofol infusion before syringe must be changed
 123. Ruptured vessel in INR, you could do all of the following except what? → mannitol, thiopentone, moderate hyperventilation, vasopressor,
 124. Maximum warm ischaemic time for liver/pancreas
 125. Components of cryoprecipitate include all except?
 126. Morbidly obese lady with pneumonia becomes hypoxic with resp distress 8 hours after tracheostomy whilst being rolled for cares. You suspect dislodgement. Management
 127. ASA 1 gynae surgery with paralysis. What is not mandatory monitoring? → SpO₂, ECG, EtCO₂, gas analysis
 128. How are anaesthetic gases monitored
 129. Patient with respiratory failure, low PaO₂/FiO₂ ratio, cardiac index of 1.7, PCWP of 25. Which mode of ECMO would be most appropriate?
 - a. VA
 - b. VV
 - c. AV
 130. Electrolyte abnormality expected following massive crush injury → hypocalcaemia, hypokalaemia, hypophosphataemia, hypoglycaemia,
 131. Over the counter medication associated with increased risk of anaphylaxis to neuromuscular blockers
 132. When to cease active cooling in MH
 133. O₂ consumption equating to 4 METs
 134. First line of management for a patient 2 days post CEA complaining of throbbing unilateral headache
 135. Time to plateau CO₂ with pneumoperitoneum (REPEAT)
 136. High quad with autonomic dysreflexia post cystoscopy, likely cause? (REPEAT)
 137. In patients with refractory elevated ICP, bilateral decompressive craniotomy is associated with reduction in ICP and also results in (REPEAT)
 - A: Shortened hospital stay
 - B: Shortened period of mechanical ventilation
 - C: No change in neurological outcome
 - D: Improvement in neurological outcomes
 - E: Improved overall mortality
 138. Eyes open to pain, withdraws & incomprehensible. Calculate GCS
 139. Indication for antibiotics for dental procedure
 140. What is 'medical privilege'
 141. Known long QT goes into VT in recovery but is awake and borderline hypotensive. First treatment option?
 142. Woman nauseated in recovery but already received dex and ondansetron intra-op. Next drug to use? (REPEAT)
 143. Cause of coagulopathy after gunshot wound (REPEAT)
 144. CPP goal for young person with severe traumatic brain injury
 145. Timing for onset of delayed cerebral ischaemia post SAH?
 146. Difficult thyroidectomy with respiratory distress and stridor immediately on extubation, cause? → oedema, RLN palsies, bleeding, hypocalcaemia

147. Best single dose treatment for pain after wisdom tooth extraction → codeine, tramadol, celecoxib, ibuprofen, paracetamol
148. You are a consultant anaesthetist asked to help a junior registrar who is having difficulty siting a labour epidural. In assisting them site the epidural all you do is place on sterile gloves. This is known as a
- A. Slip
 - B. Lapse
 - C. Violation
 - D. Deviation
 - E. Mistake
149. A woman presents with left arm pain after an old injury. She describes intermittent sharp, shooting pains. Is this paraesthesia, dysaesthesia, allodynia, hyperalgesia, something else?
150. Picture of someone poking their tongue out with deviation to the right, cause??