



قائمة الاسئلة

التخدير السريري 3 - (ساعتين ونصف)- المستوى الرابع -قسم التخدير - التخدير - كلية الطب والعلوم الصحية - الفترة الأولى- درجة الامتحال (200 د. عبداالله ابراهيم الابيض + د. رانيا جعشان

- 1) Why is maintaining normothermia especially important in Geriatric Patients undergoing surgery?
 - 1) To prevent hyperglycemia
 - 2) To reduce anesthetic requirements
 - 3) + To prevent coagulopathy and delayed recovery
 - 4) To promote blood pressure stability
- 2) Which postoperative monitoring is critical for Elderly Patients to detect early signs of delirium?
 - 1) Pain scale assessment
 - 2) Oxygen saturation monitoring
 - 3) + Cognitive function assessment
 - 4) Monitoring for bradycardia
- 3) Which intraoperative ventilation strategy is recommended for Elderly Patients to reduce the risk of postoperative pulmonary complications?
 - 1) High tidal volume with minimal PEEP
 - 2) + Low tidal volume with Rapid respiratory rate
 - 3) High PEEP with low tidal volume
 - 4) Rapid respiratory rate with low PEEP
- 4) In managing a Maxillofacial Surgery patient with limited mouth opening, what is the preferred intubation technique?
 - 1) Direct laryngoscopy
 - 2) Nasotracheal intubation
 - 3) + Awake fiberoptic intubation
 - 4) Use of a supraglottic airway device
- 5) For Elderly Patients undergoing hip surgery, which is the most suitable anesthetic technique to minimize postoperative delirium?
 - 1) General anesthesia with high-dose benzodiazepines
 - 2) + Spinal anesthesia with minimal sedation
 - 3) Deep sedation with high-dose opioids
 - 4) General anesthesia with nitrous oxide
- 6) What is the primary concern in the immediate postoperative period for OMFS patients?
 - 1) + Airway obstruction
 - 2) Hypothermia
 - 3) Deep vein thrombosis
 - 4) Hyperglycemia
- 7) For Bariatric Patients with obstructive sleep apnea, what is the most appropriate monitoring method in the PACU to detect respiratory complications?
 - 1) Blood pressure monitoring
 - 2) + Continuous pulse oximetry
 - 3) Frequent arterial blood gases
 - 4) Non-invasive ventilation assessment
- 8) In Trauma Patients requiring blood transfusion, why is it crucial to maintain a ratio of RBCs, FFP, and platelets close to 1:1:1?
 - 1) To prevent hyperkalemia
 - 2) To ensure hemodilution
 - 3) + To manage coagulopathy and improve clot formation
 - 4) To reduce the risk of immunologic reactions



- 9) Which of the following is the best choice for managing nausea and vomiting in Elderly Postoperative Patients, considering their risk profile?
 - 1) Metoclopramide
 - 2) + Ondansetron
 - 3) Haloperidol
 - 4) Scopolamine
- 10) In Trauma Patients with suspected cervical spine injury, why is manual in-line stabilization critical during intubation?
 - 1) To increase the view of the glottis
 - 2) To prevent airway obstruction
 - 3) + To minimize movement and prevent further spinal cord injury
 - 4) To reduce the risk of aspiration
- 11) In Bariatric Patients, which factor most complicates the pharmacokinetics of anesthetic agents?
 - 1) Increased plasma volume
 - 2) Enhanced liver metabolism
 - 3) + Distribution in adipose tissue
 - 4) Low cardiac output
- For Elderly Patients under anesthesia, what is a common postoperative complication that can delay discharge and how can it be prevented?
 - 1) Nausea and vomiting, prevented by antiemetics
 - 2) Hypotension, prevented by IV fluids
 - 3) + Delirium, prevented by minimizing sedatives and early mobilization
 - 4) Hypoglycemia, prevented by continuous glucose monitoring
- 13) In Trauma Surgery, why is ketamine preferred as an induction agent for a patient with hypovolemic shock?
 - 1) It reduces cerebral blood flow
 - 2) + It has strong sympathomimetic effects
 - 3) It increases cardiac output without affecting blood pressure
 - 4) It decreases myocardial oxygen consumption
- 14) In the intraoperative management of Geriatric Patients, what factor most significantly increases the risk of hypotension during anesthesia induction?
 - 1) Reduced renal function
 - 2) + Decreased elasticity of blood vessels
 - 3) High metabolic rate
 - 4) Increased body water content
- For Bariatric Patients undergoing anesthesia, what is the primary reason for using positive pressure ventilation during surgery?
 - 1) Reducing hypercapnia
 - 2) Increasing oxygen demand
 - 3) + Preventing atelectasis
 - 4) Minimizing surgical bleeding
- In postoperative management of Geriatric Patients, which strategy is essential for reducing the risk of deep vein thrombosis (DVT)?
 - 1) High-dose opioids for pain control
 - 2) + Early ambulation and physical therapy
 - 3) Fluid restriction
 - 4) Supplemental oxygen
- During anesthesia for Oral and Maxillofacial Surgery, which complication should be most closely monitored in the immediate postoperative period?
 - 1) + Hemorrhage

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- 2) Arrhythmias
- 3) Pneumonia
- 4) Hyperthermia
- 18) For a Geriatric Patient with chronic obstructive pulmonary disease (COPD) undergoing surgery, which of the following is the most appropriate anesthetic approach?
 - 1) General anesthesia with high tidal volumes
 - 2) + General anesthesia with lung-protective ventilation
 - 3) Regional anesthesia without sedatives
 - 4) Sedation with no anesthetic intervention
- 19) What is a common cause of postoperative airway obstruction in OMFS patients?
 - 1) + Swelling or hematoma formation
 - 2) Excessive saliva production
 - 3) Hypotension
 - 4) Pain
- During anesthesia management for Elderly Patients, which of the following physiological changes is least likely to contribute to hypotension?
 - 1) Decreased baroreceptor sensitivity
 - 2) Reduced total body water
 - 3) + Increased elasticity of arteries
 - 4) Lower cardiac output
- In managing a Bariatric Patient undergoing sleeve gastrectomy, what preoperative airway assessment would most likely predict a difficult intubation?
 - 1) Thyromental distance of more than 6 cm
 - 2) Mallampati Class I
 - 3) + Presence of obstructive sleep apnea
 - 4) Ability to open the mouth more than 4 cm
- Which of the following is a recommended strategy for managing ventilation in Bariatric Patient?
 - 1) Decreasing the use of positive pressure ventilation
 - 2) Using higher tidal volumes
 - 3) + Applying PEEP (Positive End-Expiratory Pressure)
 - 4) Reducing oxygen supplementation
- 23) Which of the following is a potential complication of bariatric surgery?
 - 1) Severe allergic reactions
 - 2) + Pulmonary embolism
 - 3) Dehydration
 - 4) Allergic dermatitis
- What is the main reason for adjusting the dose of opioids in geriatric patients?
 - 1) To increase the risk of postoperative delirium
 - 2) + To prevent respiratory depression and excessive sedation
 - 3) To enhance the analgesic effect
 - 4) To shorten the duration of anesthesia
- 25) What is the purpose of using a throat pack during OMFS?
 - 1) + To prevent aspiration of blood and debris
 - 2) To secure the airway
 - 3) To reduce bleeding
 - 4) To immobilize the tongue
- 26) The MOST sensitive early sign of malignant hyperthermia during general anesthesia is:
 - 1) Tachycardia
 - 2) Hypertension

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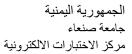
- 3) Fever
- 4) + Increased end-expiratory CO2 tension (Peco2)
- 27) MH is believed to involve a generalized disorder of membrane permeability to :
 - 1) Sodium
 - 2) Potassium
 - 3) + Calcium
 - 4) Magnesium
- 28) MH and neuroleptic malignant syndrome share each of the following characteristics EXCEPT:
 - 1) Generalized muscular rigidity
 - 2) Hyperthermia
 - 3) Effectively treated with dantrolene
 - 4) + Flaccid paralysis after administration of vecuronium
- 29) Techniques to minimize intraoperative blood loss in case of sinus and nasal surgery are:
 - 1) Supplementation with lidocaine or an epinephrine-containing local anesthetic
 - 2) Maintaining a slightly up-down position
 - 3) Providing a mild degree of controlled hypotension
 - 4) + All of the above
- 30) Causes of sickling in patients with sickle cell anemia include all of the following EXCEPT
 - 1) + O2
 - 2) Dehydration
 - 3) Metabolic acidosis
 - 4) Hypothermia
- 31) The most common surgical complications of TURP are EXECPT:
 - 1) Clot retention
 - 2) Uncontrolled hematuria
 - 3) Chronic hematuria
 - 4) + Pulmonary edema
- 32) Hypothermia:-
 - 1) Reduces metabolic oxygen requirements
 - 2) Cause cardiac arrhythmia
 - 3) Cause Reversible coagulopathy
 - 4) + All of the above
- 33) Regarding Anesthetic agents effects on body temperature regulation :
 - 1) + Inhibit central thermoregulation
 - 2) Stimulate central thermoregulation
 - 3) All of the above
 - 4) None of the above
- 34) Intense shivering may cause the following except
 - 1) Increase oxygen consumption
 - 2) Increase carbon dioxide (CO2) production
 - 3) Increase cardiac output.
 - 4) + Decrease cardiac output
- 35) Absorption of TURP irrigation fluid is dependent on
 - 1) The duration of the resection
 - 2) The type of the irrigation fluid.
 - 3) The age of the patient
 - 4) + All of the above
- 36) To achieve sensory block for TURP surgery, you should reach to:
 - 1) T 12

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- 2) + T 10
- 3) T8
- 4) L1
- 37) Treatment of Malignant hyperthermia include:
 - 1) The patient should be hyperventilated with 100% oxygen
 - 2) Cooling the Patient
 - 3) Dantrolene Therapy
 - 4) + All of the above
- 38) Emergence of Tonsillectomy pediatric patient including
 - 1) Full awake
 - 2) Lateral position
 - 3) Gentle suctioning
 - 4) + All of the above
- 39) The nonhemolytic reaction to transfusion of blood products is the following except
 - 1) Allergic
 - 2) Febrile
 - 3) Anaphylactoid
 - 4) + Hemolysis
- 40) In a 70-kg patient, 1 unit of platelet concentrate should increase the platelet count by :
 - 1) 2000 to 5000/mm3
 - 2) + 5000 to 10,000/mm³
 - 3) 15,000 to 20,000/mm3
 - 4) 20,000 to 25,000/mm³
- 41) The most common cause of mortality associated with administration of blood is
 - 1) + TRALI
 - 2) Non-ABO hemolytic transfusion reaction
 - 3) Microbial infection
 - 4) Anaphylactic reaction
- 42) Blood loss during prostatectomy depens on the following except:
 - 1) Prostate size
 - 2) Duration of operation
 - 3) The skill and experience of the surgeon
 - 4) + Type of anesthesia
- 43) TURP Syndrome presents as the following except :
 - 1) Headache
 - 2) Restlessness
 - 3) Dyspnea
 - 4) + Hypertension
- 44) Hypothermia:
 - 1) Reduces metabolic oxygen requirements
 - 2) Cause cardiac arrhythmia
 - 3) Reversible coagulopathy
 - 4) + All of the above
- 45) In anesthetized patients, an acute hemolytic reaction may be
 - 1) Decrease in temperature
 - 2) Bradycardia
 - 3) hypertension
 - 4) + hemoglobinuria
- The estimated maintenance fluid requirement for a 9-year-old, 35-kg patient is

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- 1) 50 mL/h
- 2) + 75 mL/h
- 3) 100 mL/h
- 4) 20 mL/h
- 47) Signs of of hypervolemia include the following except :
 - 1) + Bradycardia
 - 2) lung crackles
 - 3) Tachypnea
 - 4) Elevated jugular pulse pressure
- 48) The best airway management during endoscopy for upper airwy is:
 - 1) Standard endotracheal tube
 - 2) Laryngeal mask
 - 3) + Mallinckrodt
 - 4) All of the above
- 49) Regarding Normal saline
 - 1) When given in large volumes Produces hyperchloremic metabolic acidosis
 - 2) Contribute to perioperative acute kidney injury
 - 3) Is the preferred solution to correct hypochloremic metabolic alkalosis
 - 4) + All of the above
- 50) Should be avoided as premedications inwith threatening airway obstructions :
 - 1) + Sedations
 - 2) Antiemetic
 - 3) Analgesics
 - 4) Antacids