

قائمة الاسئلة 2025-05-14 04:32

التخدير السريري2-الثالث-التخدير -برامج العلوم الصحية- درجة الامتحان (140)

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- 1) All of the following cranial nerves contain parasympathetic efferent fibers EXCEPT the
 - 1) Oculomotor nerve (III)
 - 2) + Trigeminal nerve (V)
 - 3) Facial nerve (VII)
 - 4) Glossopharyngeal nerve (IX)
- 2) Calculate cerebral perfusion pressure from the following data: Blood pressure (BP) 100/70, heart rate (HR) 65 beats/min, and ICP 15 mm Hg.
 - 1) 60 mm Hg
 - 2) + 65 mm Hg
 - 3) 70 mm Hg
 - 4) 75 mm Hg
- 3) A 62-year-old patient is scheduled to undergo resection of a frontal lobe intracranial tumor under general anesthesia. Preoperatively, the patient is alert and oriented, and has no focal neurologic deficits. Within what range should Paco2 be maintained during surgery?
 - 1) 15 and 20 mm Hg
 - 2) 20 and 25 mm Hg
 - 3) + 30 and 35 mm Hg
 - 4) 40 and 45 mm Hg
- 4) A 2-year-old child is anesthetized for resection of a posterior fossa tumor. Preoperatively, the patient is lethargic and disoriented. Which of the following is MOST likely to adversely alter ICP?
 - 1) + 5% Dextrose solution
 - 2) Normal saline
 - 3) Lactated Ringer solution
 - 4) 6% HES
- 5) All of the following induction agents decrease cerebral blood flow (CBF), except
 - 1) Etomidate
 - 2) Propofol
 - 3) Thiopental
 - 4) + Ketamine
- 6) All the following are indications of post-operative ventilator support, except patient with,
 - GCS =6
 - 2) + Mild cerebral edema
 - 3) ICP = 25
 - 4) SAH grade 4
- 7) Signs and symptoms of raised intracranial hypertension include all the following, except
 - 1) Hypertension
 - 2) + Tachycardia
 - 3) Bradycardia
 - 4) Irregular respiration
- 8) Therapy that is useful in the treatment of cerebral vasospasm includes all of the following EXCEPT
 - 1) Blood pressure elevation
 - 2) Hemodilution
 - 3) + Diuretics
 - 4) Calcium channel blockers
- 9) The most common physical sign of unruptured cerebral Aneurysms is

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- 1) Visual field defects
- 2) Trigeminal nerve dysfunction
- 3) Headache
- 4) + A third-nerve palsy
- 10) The most suitable muscle-relaxing agent in SAH surgery is
 - 1) + Vecuronium
 - 2) Atracurium
 - 3) Pancuronium
 - 4) Suxamethanium
- A 24-year-old woman was a pedestrian struck by a car while crossing the street. On arrival in the emergency department, she opens her eyes to verbal stimuli, her speech is incoherent متر ابط غير and she withdraws from painful stimuli. Which of the following is the patient's Glasgow Coma Scale (GCS) score?
 - 1) 7
 - 2) + 10
 - 3) 12
 - 4) 14
- 12) To avoid the further brain ischemia in TBI, all the following are False Except
 - 1) Maintain MAP more than 160 mmHg
 - 2) Maintain CPP between 60 and 160 mmHg
 - 3) + Maintain SBP more than 90 mmHg
 - 4) Maintain ICP more than 20 mmHg
- 13) In TBI, all the following are recommended to decrease ICP Except
 - 1) Head up position
 - 2) CSF drainage
 - 3) + Excessive hyperventilation
 - 4) Hypertonic saline
- 14) A 55-year female Patients, presented with a sudden severe headache without focal neurological deficits associated with nausea and vomiting. Brain CT scan is done and revealed that SAH.
 - 1) + The patient mostly has ruptured aneurysms
 - 2) The patient mostly has unruptured aneurysms
 - 3) The patient at risk of rebleeding at end of first month of SAH
 - 4) The patient at risk of vasospasm especially after 2 weeks of SAH
- 15) Patients with type 1 diabetes mellitus may be difficult to intubate because of
 - 1) Increased supraglottic soft tissue due to chronic hyperglycemia
 - 2) An association between type 1 diabetes and an anterior larynx deformity
 - 3) + Limited joint mobility
 - 4) An increased incidence of obesity in patients with type 1 diabetes
- 16) Laboratory findings in primary hypothyroidism are
 - 1) Low TSH, elevated T3, elevated T4
 - 2) Low TSH, low T3, low T4
 - 3) Normal TSH, low T3, low T4
 - 4) + Elevated TSH, low T3, low T4
- Which of the following is the most significant concern regarding anesthetic management in a patient with diabetic autonomic neuropathy?
 - 1) Increased risk of postoperative nausea and vomiting.
 - 2) + Increased risk of cardiovascular instability.
 - 3) Delayed wound healing.
 - 4) Increased risk of respiratory depression.
- During the perioperative period, what is the target blood glucose range generally recommended for diabetic

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patients?

- 50-70 mg/dL. 1)
- 2) 120-180 mg/dL.
- 200-300 mg/dL. 3)
- >300 mg/dL.
- 19) A diabetic patient with a history of gastroparesis is scheduled for an elective abdominal surgery. Which of the following is the most important consideration regarding their anesthetic plan?
 - Aggressive fluid resuscitation. 1)
 - 2) Increased risk of aspiration.
 - Prolonged neuromuscular blockade. 3)
 - Increased sensitivity to opioids
- A patient with known hypothyroidism is undergoing general anesthesia. Which of the following is a potential 20) complication during the postoperative period?
 - Thyroid storm 1)
 - Increased pain tolerance. 2)
 - Delayed recovery. 3)
 - Decreased risk of infection
- A patient with a history of hyperthyroidism presents for elective surgery. Which of the following pre-21) operative findings would be most concerning?
 - Mild bradycardia.
 - Controlled hypertension. 2)
 - 3) Exophthalmos.
 - + Tachycardia and fever.
- 22) A 40-year-old woman with a history of Graves disease is in the recovery room after undergoing a CT scan under general anesthesia. While in the recovery room, her blood pressure drops to 80/55 mm Hg, her heart rate increases to 140 bpm, and she becomes agitated and complains of difficulty breathing and feeling hot. The most likely diagnosis for these signs is

 - Thyroid storm
 - Myxedema coma 2)
 - Malignant hyperthermia 3)
 - Pheochromocytoma
- The classic triad of symptoms associated with pheochromocytoma includes: 23)
 - Hypertension, hyperglycemia, and hyperkalemia
 - 2) Hypotension, hypoglycemia, and Perspiration
 - Headache, sweating, and palpitations 3)
 - Hypertension, Bradycardia, and Headache
- What is the primary reason for using alpha-blockers before beta-blockers in the preoperative management of 24) pheochromocytoma?
 - To avoid the possibility of unopposed β -mediated vasoconstriction 1)
 - 2) To avoid paradoxical hypertension
 - Allows resensitization of adrenergic receptors 3)
 - To enhance the effect of beta-blockers
- 25) Which of the following is a potential complication of untreated pheochromocytoma?
 - Hypothyroidism 1)
 - Myocardial infarction 2)
 - 3) Ischemic stroke
 - Hypoglycemia
- In patients with renal failure, which of the following muscle relaxants has the most prolonged elimination half-26) life?

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- 1) Atracurium
- 2) + Pancuronium
- 3) Succinylcholine
- 4) Vecuronium
- Which of the following mechanisms ensures that renal blood flow (RBF) remains constant despite changes in blood pressure?
 - 1) Sympathetic nervous input
 - 2) + Renal autoregulation
 - 3) Hormonal regulation
 - 4) Tubuloglomerular feedback
- 28) Which anesthetic agent produces Compound A, which may be nephrotoxic?
 - 1) Isoflurane
 - 2) + Sevoflurane
 - 3) Desflurane
 - 4) Propofol
- Patient with chronic renal failure is scheduled for an operation to create an arteriovenous fistula. Laboratory studies include: Hemoglobin 6.5 g/dl, Blood gases (breathing air): PaO2 97 mmHg, PaCO2 29 mmHg, pH 7.30, Sodium 129 mEq/L Potassium 5.5 mEq/L Chloride 101 mEq/L Bicarbonate 15 mEq/L. Before inducing general anesthesia, which of the following abnormalities should be corrected?
 - 1) Anemia
 - 2) Potassium concentration
 - 3) All of above
 - 4) + None of the above
- 30) In TURP surgery, what is a major risk factor for the development of TURP syndrome?
 - 1) The use of local anesthesia
 - 2) + Prolonged resection with hypotonic irrigants
 - 3) Early postoperative mobilization
 - 4) Application of heat pads during surgery
- 31) In laparoscopic radical prostatectomy, the Trendelenburg position is associated with:
 - 1) + Increased intracranial pressure (ICP)
 - 2) Increased venous return and cardiac output
 - 3) Decreased airway pressures
 - 4) Hypotension
- 32) What would you expect to find in the ABG of a patient with Metabolic acidosis?
 - 1) pH > 7.45
 - 2) + Decreased bicarbonate (HCO3) level
 - 3) Increased PaCO2
 - 4) Increased bicarbonate (HCO3) levels
- Why should blood pressure cuffs be avoided on the arms of patients with AV fistulas?
 - 1) It may increase the risk of infection
 - 2) + It may cause clotting of the fistula
 - 3) It may lead to hypotension
 - 4) It may cause fluid overload
- 34) In Functional Endoscopic Sinus Surgery (FESS), which anesthetic consideration is essential?
 - 1) + Avoidance of nitrous oxide
 - 2) Use of muscle relaxants
 - 3) Routine premedication with opioids
 - 4) Hyperoxia with FiO₂ of 100%
- 35) Which of the following is NOT a consideration in ear surgery?

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- 1) Facial nerve monitoring
- 2) Need for a bloodless field
- 3) Risk of bradycardia due to vagal reflex
- 4) + Routine use of high-dose opioids
- What is the initial step in managing a patient with suspected post-tonsillectomy hemorrhage?
 - 1) Immediate surgical intervention
 - 2) + ABC assessment, IV access, and oxygen administration
 - 3) Administering oral fluids
 - 4) Giving sedative medication to control agitation
- Why might a smaller endotracheal tube (ETT) be required during intubation in post-tonsillectomy bleeding?
 - 1) + Due to airway swelling and blood clots
 - 2) To facilitate easy extubation
 - 3) To reduce the risk of aspiration
 - 4) To allow space for surgical instruments
- 38) What is a key challenge in ENT anesthesia?
 - 1) Maintaining spontaneous ventilation at all times
 - 2) + Establishing, maintaining, and protecting the airway in the face of abnormal anatomy
 - 3) Using only local anesthesia for all ENT surgeries
 - 4) Avoiding any airway interventions
- 39) Why is a narrow-bore MLT preferred for panendoscopy?
 - 1) + It provides a superior glottic view for the surgeon
 - 2) It prevents hypoxia during the procedure
 - 3) It is the only airway technique that can be used
 - 4) It minimizes the risk of airway fire
- What is the main concern during laryngoscopy and intubation in a patient with a peritonsillar or retropharyngeal abscess?
 - 1) Risk of airway fire
 - 2) Aspiration of stomach contents
 - 3) + Rupture of the abscess leading to tracheal spillage
 - 4) Displacement of the endotracheal tube
- 41) Preoperative assessment for tonsillectomy should include:
 - 1) Coagulation evaluation
 - 2) History of sleep apnea
 - 3) Assessment for rheumatic disease
 - 4) + All of the above
- 42) Which of the measures below does not reduce the incidence of transfusion related acute lung injury (TRALI)?
 - 1) Exclusion of female donors
 - 2) Use of autologous blood
 - 3) + Leukocyte reduction
 - 4) Use of blood less than 14 days old
- What is the normal lifespan of a red blood cell?
 - 1) 10 days
 - 2) 30 days
 - 3) + 120 days
 - 4) 365 days
- 44) Frozen erythrocytes can be stored for
 - 1) 1 year
 - 2) 3 year
 - 3) 5 year

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- 4) + 10 year
- 45) Which of the following clotting factors has the shortest half-life?
 - 1) Factor II
 - 2) Factor V
 - 3) + Factor VII
 - 4) Factor IX
- 46) In a70-kg patient, one 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
- Which of the following is the most appropriate blood type for further intraoperative transfusions?
 - 1) Type A, Rh-positive whole blood
 - 2) + Type O, Rh-negative RBCs
 - 3) Type A, Rh-positive RBCs
 - 4) Type O, Rh-negative whole blood
- 48) which vitamin is essential for normal blood clotting?
 - 1) Vitamin A
 - 2) Vitamin C
 - 3) Vitamin D
 - 4) + Vitamin K
- 49) Which of the following cells is responsible for oxygen transport in the blood?
 - 1) Leukocyte
 - 2) Thrombocyte
 - 3) + Erythrocyte
 - 4) Lymphocyte
- 50) The respiratory centers in the brain are located in which one of the following?
 - 1) Cerebrum
 - 2) cerebellum
 - 3) + Brainstem
 - 4) Spinal cord
- 51) What is the primary muscle responsible for inspiration during quite breathing?
 - 1) + Diaphragm
 - 2) Rectus abdominis
 - 3) internal intercostals
 - 4) Latissimus dorsi
- 52) Which part of brain regulates the respiratory rhythm?
 - 1) Cerebellum
 - 2) Hypothalamus
 - 3) + Medulla oblongata
 - 4) Thalamus
- 53) What is the normal tidal volume in a healthy adult?
 - 1) 150 mL
 - 2) 300 mL
 - 3) + 500 mL
 - 4) 1000 mL
- What is the main site of gas exchange in the lunges?
 - 1) Bronchi
 - 2) Bronchioles

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- Alveoli +
- 4) Trachea
- Which gas is the primary driver of respiratory rate? 55)
 - 1) Oxygen
 - Carbon dioxide 2)
 - 3) Nitrogen
 - Hydrogen 4)
- Which type of alveolar cells produces surfactant? 56)
 - Type I 1)
 - 2) Type II
 - Type III Type IV 3)
 - 4)

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