

## قائمة الاسئلة 04:15 04-2025

## العناية المركزة 1 -الثالث -علوم تخدير - كلية الطب والعلوم الصحية -علوم تطبيقية -درجة الامتحان (35)

د/فتحی حاتم

- 1) A 56-year-old man smoker and hypercholesterolemia who has chest pain, retrosternal pressure sensation, not responding to an usual painkiller, associated with profuse sweating, Which the initial examination would you conduct?
  - 1) Chest XR
  - 2) + ECG
  - 3) Cardiac enzymes
  - 4) Echo
- 2) There are several mechanisms of organ hypoperfusion and shock. Which one of the following types of shock is due to vasodilation
  - 1) Obstructive shock
  - 2) Hypovolemic shock
  - 3) + Distributive shock
  - 4) Cardiogenic shock
- 3) CPR steps are:
  - 1) Airway, Breathing, defibrillation
  - 2) + Compressions, Airway, Breathing
  - 3) Airway, Breathing, Compressions
  - 4) Airway, Check pulse, Breathing
- 4) Afterload is the force needed to eject blood into circulation, depends on the following factors Except:
  - 1) Arterial BP
  - 2) Pulmonary artery pressure
  - 3) + Venous return
  - 4) Valvular disease
- 5) What is the proper depth of chest compressions for adults during CPR?
  - 1) a. 1 to 2 inches
  - 2) + b. 2 to 2.4 inches
  - 3) c. 4 to 5 inches
  - 4) d. More than 6 inches
- 6) Pulmonary Embolism Management in ICU include all the following except:
  - 1) + Fluid and vasoactive therapy of hypoxia
  - 2) Thrombolytic therapy
  - 3) Surgical/catheter thrombectomy
  - 4) IVC filter placement
- A 65 year-old patient a known case of DM, HTN and tobacco user, presented with a history of an acute shortness of breath, fatigue, tachycardia, increased urination at night and swelling in the legs, your provisional dianosis is:
  - 1) ACS
  - 2) Pulmonart embolism
  - 3) + Acute heart failure
  - 4) ARDS
- 8) A 33-year-old woman presents with a generalized rash, facial swelling, and hypotension approximately 10 minutes after being stung by a hornet(الدبور حشرة). Her BP is 50/30 mm Hg and her heart rate is 140 beats/min. In addition to high-flow oxygen, this patient is in MOST immediate need of:
  - 1) + Epinephrine
  - 2) Hydrocortisone

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- 3) An antihistamine
- 4) IV fluids
- 9) Which of the following is indicated in almost every type of shock?
  - 1) Place the patient in a supine position
  - 2) Fluid therapy
  - 3) + Administer high-flow oxygen
  - 4) Control bleeding
- An elderly male patient is a known case of DM type 2, presented with a history of excessive thirst, frequent urination, confusion and seizures, At ER the blood sugar is high and urine is negative for ketones. What is the next step to diagnose the main problem in this patient?
  - 1) Send for ABG
  - 2) + Send for plasma osmolarity
  - 3) Send for electrolytes
  - 4) Send for ketones in the blood
- As a patient with diabetic ketoacidosis receives insulin and fluids, the nurse knows careful assessment must be given to which of the following electrolytes?
  - 1) + Potassium
  - 2) Sodium
  - 3) Phosphorus
  - 4) Calcium
- 12) Most cases of hypoglycemia are caused by which of the following?
  - 1) Hereditary and endocrine disorders
  - 2) Excessive alcohol use
  - 3) Islet cell tumors
  - 4) + Drugs used to treat diabetes mellitus
- A 65-year-old male is on a short ladder changing a light and collapses. He is Unresponsive, What method should be used to open his airway?
  - 1) Chin-lift
  - 2) + Jaw thrust
  - 3) Head-tilt/chin-lift
  - 4) Head-tilt
- What is the term used to describe subendocardial infaraction?
  - 1) Angina
  - 2) Unstable angina
  - 3) + NSTEMI
  - 4) STEMI
- 15) Incidence of post paralytic syndrome due to using muscle relaxant agents in ICU patients, all true except
  - ) increases with renal failure
  - 2) increases with long duration using
  - 3) + Treated with high doses of steroids
  - 4) .Treated with mechanical ventilator
- 16) Comparing DKA with HHS, DKA manifested by:
  - 1) More body water dificit
  - 2) More anion gap
  - 3) More serum osolarity
  - 4) + More bicarbonate deficit
- 17) Unstable angina refers to
  - 1) The propensity for cardiac arrest
  - 2) The elevated troponin level in the serum

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- 3) + The fact that rest does not relieve symptoms
- 4) ST elevation in ECG
- 18) All the following are non-coronary causes of cardiogenic shock except
  - 1) Dysrhythmia
  - 2) Cardiac temponade
  - 3) + Myocardial infraction
  - 4) Cardiomyopathies
- 19) Regarding Septic shock, all the following are true Except:
  - 1) Type of circulatory shock
  - 2) Caused by endo-toxin
  - 3) + The most common type of shock
  - 4) The most common cause of death
- 20) The most frequent clinical presentation of acute heart failure is
  - 1) Cardiogenic shock
  - 2) Right heart failure
  - 3) Hypertensive HF
  - 4) + Decompensated chronic HF
- 21) Definition of ARDS depending on The BERLIN criteria, all true except
  - 1) Acute onset (within 1 week of clinical insult)
  - 2) + Bilateral cardiogenic pulmonary edema
  - 3) PaO2/FiO2 <200 (or <300 if PEEP>5 cmH2O)
  - 4) Bilateral opacities on CXR
- 22) ARDS is lung injury that leads to, all true except:
  - 1) Impaired gas exchange
  - 2) + Increased lung compliance
  - 3) Increased pulmonary arterial pressure
  - 4) Loss of surfactant
- 23) Regarding Lung protective strategy for ARDS patient management, all the following are true except
  - 1) + FIO2 more than 0.6 and O2 saturation more than 90%
  - 2) Limit tidal volume
  - 3) High PEEP
  - 4) Permissive hypercarbia
- 24) All the following are modifiable risk factors of acute coronary syndrome except
  - 1) Hypertension
  - 2) Obesity
  - 3) DM
  - 4) + Age
- A patient with diabetes in the critical care unit is at risk for developing diabetic ketoacidosis (DKA) secondary to
  - 1) Excess insulin administration
  - 2) Inadequate food intake
  - 3) + Physiologic and psychologic stress
  - 4) Increased release of antidiuretic hormone (ADH)
- 26) The hallmark of hyperglycemic hyperosmolar syndrome (HHS) is
  - 1) Sever hyperglycemia with low serum osmolality
  - 2) + Severe hyperglycemia with minimal or absent ketosis
  - 3) little or no ketosis in serum with rapidly increasing ketonuria
  - 4) Hyperglycemia, ketosis and high osmolality
- 27) Chronic respiratory failure, ALL TRUE EXCEPT



- 1) Develops over several days or longer
- 2) There is an increase in bicarbonate
- 3) + PH is usually only slightly increased
- 4) There is Polycethemia and cor pulmonale
- 28) ventilator associated lung injuries in ARDS include all the following except
  - 1) Barotrauma due to high pressure
  - 2) + Atelcet-truma due to over distension
  - 3) volutrauma due to high volume
  - 4) Biotrauma due to cytokine release
- 70-year-old male with a history of DVT presented to ER with acute onset of shortness of breathing, hypoxia, tachycardia and fever. Patient's left leg is swollen and red; no chest pain, which of the following is the preferred imaging technique for diagnosing this condition?
  - 1) CXR
  - 2) Duplex ultrasonography
  - 3) + CT angiography
  - 4) Echocardiography
- To help restore upper airway patency in an unconscious patient in an emergency setting, the head tilt-chin lift maneuver is used. Which of the following is a relative contraindication to performing this maneuver?
  - 1) Hypotensive patients
  - 2) Specific advance directive
  - 3) + suspected spinal injury
  - 4) There are no contraindications
- 31) Benzodiazepines uses in ICU for the following Except
  - 1) Provide amnesia
  - 2) + Provide analgesia
  - 3) For convulsion
  - 4) For anxiety
- 32) Norepineoherine, ALL false EXCEPT
  - 1) Potent and pure alpha agonist
  - 2) Can not spare the brain and the heart
  - 3) can causes reflex tachycardia
  - 4) + Good agent to increase BP by increasing SVR in high out put shock
- 33) All the following are pulmonary embolism risk factors Except
  - 1) Malignancy
  - 2) past history of DVT
  - 3) + mobilization
  - 4) autoimmune diseases
- 34) Ephedrine ,ALL TRUE EXCEPT
  - 1) + more potent than adrenalinee
  - 2) longer lasting than epinepherine
  - 3) has indirect acting by release tissue store of adrenaline
  - 4) used mostly by anesthesiologists
- 35) Regarding Hypoglycemia, all the following are true Except
  - 1) + .Emergracy treatment of conscious patient by giving the patient glucoagon i.m injection
  - 2) May causes autonomic, neuroglycopenic and non specific symptoms
  - 3) occurs if blood sugar less than 63mg\dl
  - 4) may causes irreversible brain damage