Questions and answers

Preguntas y respuestas

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This section includes questions prepared on the basis of the contents of the articles published in volume 42, number 4 of the Colombian Journal of Anesthesiology. Accept this challenge to test your reading comprehension and knowledge.

1) With regard to the low fresh gas flow anesthetic technique, is it true that:
   A) Flows between 0.8 and 1.5 L/min are used.
   B) It is not recommended for procedures with sevofluorane lasting more than 3 h.
   C) Is contraindicated in patients with severe hemolysis or massive transfusion.
   D) There are sevofluorane TCI devices that have shown that the time to achieve the target concentration is significantly longer than with 2 L/min flows.

ANSWER C

2) According to the meta-analysis by González Cárdenas VH et al., when comparing remifentanil (R) against epidural anesthesia (EA) for pain management during labor, all of the following statements are true, except for:
   A) The correlation between the administration of (R) and good patient satisfaction is equivalent to the administration of (EA) and good satisfaction.
   B) The incidence of instrumented delivery is similar in both groups.
   C) The incidence of cesarean section is similar for both groups.
   D) The probability of complications is significantly higher with (R) than with (EA).

ANSWER C

3) In terms of airway management, the following statements are true:
   A) Around 60% or mayor complications occur during extubation or in the recovery room.
   B) Abnormal ventilation weaning rates are good predictors of extubation failure.
   C) There is evidence favoring the use of steroids 4 h prior to extubation in patients with suspicious upper airway edema.
   D) Difficult mask ventilation does not in itself predispose to a higher risk of difficult intubation.

ANSWER D

4) Which of the following statements about leakage tests prior to extubation of a patient is true:
   A) A tidal volume difference with the inflated vs. the deflated cuff of at least 40% is the cut point suggesting a low probability of laryngeal edema.
   B) The cut point is a difference of >80 cc in adult patients, suggestive of a low probability of laryngeal edema.
   C) The leakage test has a high predictive value for post-extubation laryngeal stridor and the need to reintubate.
   D) In the absence of a leak or with leaks less than 110 cc, consider placing an exchanger for controlled and assisted extubation.

Please cite this article as: Raffán Sanabria F. Preguntas y respuestas. Rev Colomb Anestesiol. 2015;43:111–112.
2256-2087
ANSWER D
5) Which of the following statements is false regarding the use of thromboelastography (TEG)?
A) The enoxaparine activity may be evaluated with TEG.
B) Patients receiving Isofluorane during anesthesia have a higher hypercoagulability index than those receiving TIVA anesthesia with propofol.
C) TEG has been used to guide the administration of fibrinogen in postpartum hemorrhage.
D) TEG allows for the detection of hypothermia-related coagulation disorders.

ANSWER B
6) In young adults, the apparent strong ion difference is:
A) 40–42 mEq/L
B) 27–40 mEq/L
C) 12–24 mEq/L
D) 8–12 mEq/L

ANSWER A
7) Lower glycemic levels and glycogen stores due to fasting result in all of the following, except for:
A) Increased insulin secretion.
B) Increased lipolysis.
C) Fatty acids are oxidized in the liver and produce ketone bodies.
D) Ketone bodies are converted into acetyl coenzyme A.

ANSWER A
8) Which of the following conditions relates to therapeutic hypothermia?
A) Hypercalcemia

ANSWER B
9) With regard to the peripheral mechanisms associated to the onset of the complex regional pain syndrome, all of the following are true, except for:
A) Axonal hypoxia.
B) Vasoconstriction.
C) Increased Endothelin-1 production.
D) Decreased interleukines-6 (IL-6).

ANSWER D
10) The estimated incidence of difficult intubation in preschool age children is of approximately:
A) 0.1%
B) 1%
C) 3%
D) 7%

ANSWER A

Reference