



MODULE I

- 1- Dantrolene is;
 - a. Lipid Soluble
 - b. Dissociation of excitation-contraction coupling
 - c. $T_{1/2} = 9$ hours
 - d. It decreases Intracellular Ca^{++}
 - e. All of the above

- 2- Occulo-Cardiac Reflex Treatment;
 - a. Atropine
 - b. Adrenaline
 - c. Ephedrine
 - d. Ask Surgeon to stop maneuver****

- 3- Occulo-Cardiac Reflex causes all except;
 - a. Bradycardia
 - b. Bradyarrhythmias
 - c. Tachycardia***

- 4- Autonomic Nervous System..... All are true except;
 - a. Conserve body energy
 - b. Involuntary System
 - c. Mainly organized by Hypothalamus
 - d. Cortex participate in the control*****

- 5- Which of the following $\uparrow\uparrow\uparrow$ FRC;
 - a. Abdominal Distension
 - b. Bronchodilatation***
 - c. Supine Position
 - d. Cephalad Elevation of Diaphragm

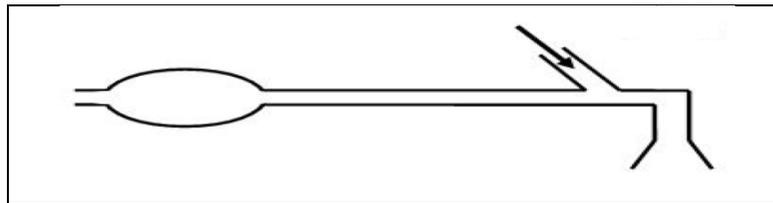
- 6- Which of the following is true about Atropine;
.....



- 7- Local Anesthetic in Epidural Anesthesia is acting on which Structure;
- a. Cortex
 - b. Dorsal Horn Cell
 - c. Spinal Nerve Roots***
 - d. Substantia Gelatinosa

- 8- MAC of Desflurane;
- a. 0.1%
 - b. 0.12%
 - c. 0.96%
 - d. 7.1%***

9- This Circuit is;



Mapelson AB.....C.....D.....F***

- 10- Muscle Relaxant used in Pheochromocytoma;
- a. Pancronium ###
 - b. Atracurium###
 - c. Gallamine
 - d. Vecuronium***
 - e. Curare

- 11- Difficult intubation;
- a. In sitting position
 - b. Protruding Tongue
 - c. Phantom Airway
 - d. All of the above***

- 12- Pressure Ventilation;
.....↑↑↑FRC



- 13- Most Nerve is liable to injury during GA;
.....Ulnar Nerve
- 14- Comatosed Patient with no Verbal nor Motor and no eye-opening...so
GCS is;
- a. 0
 - b. 1
 - c. 3***
 - d. 2
 - e. 4
- 15- You have done cardioversion of patient He developed VF ...
First step to be done;
- a. IV Lidocaine
 - b. Synchronized Defibrillation shock
 - c. Closed cardiac compression
 - d. Un-synchronized DC shock***
 - e. IV Adrenaline
- 16- Mivacurium;
- a. The same duration as Atracurium
 - b. Metabolized by Pseudocholinesterase***
 - c. No Histamine Release.
 - d. Its action is not reversed by Anticholinesterase
 - e. Its action is not affected by liver or kidney diseases.
- 17- Succinyl-Choline in Myotonia causes;
- a. Relaxation with prolonged duration
 - b. Contracture for more than 3-5 minutes***
 - c. ↑↑ AcetylCholine in plasma
 - d. Hypotension
- 18- All these regarding Anesthesia induced arrhythmias are true except;
- a. Cocaine [↑↑Epinephrine release]****
 - b. Halogenated Anesthetics [Re-Entrant Arrhythmias]
 - c. Ketamine [Hypertension +↑sensitize myocardium to circulating CAs]



- d. Halothane [$\uparrow\uparrow$ sensitize myocardium to circulating CAs]
- e. Isoflurane [direct irritability of myocardium]

- 19- What is the involved main mechanism in Halothane metabolism;
- a. Reduction
 - b. Oxidation***
 - c. Desulfuration
 - d. Deflurination
 - e. Methylation

- 20- Pregnant woman with Ante-partum Hge is going to do emergency CS, after laryngoscopy ...Epiglottis can't be seen + failed intubation;
- a. Surgeon should proceed while patient is still on the effect of induction agent.
 - b. Anesthetist should awake her
 - c. Surgeon should do tracheostomy
 - d. Anesthetist should check ventilation possibility using face mask.***

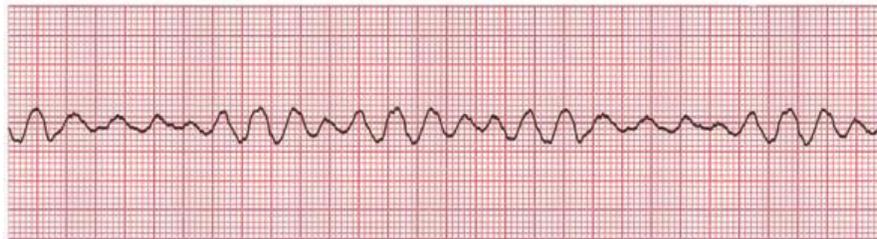
- 21- Emergency Patient with Blood group B^{-ve} will receive uncrossed matched blood, what group you will give to him;
- a. B^{-ve}
 - b. O^{-ve} !!!!!!!!!!!!! Its use restricted if no B^{-ve} Group available
 - c. All of the above

- 22- All can occur with Pheochromocytoma except;
..... Addison's Disease

- 23- Causes of Hypothermia during General Anesthesia;
..... Circulation Redistribution and Vasodilatation

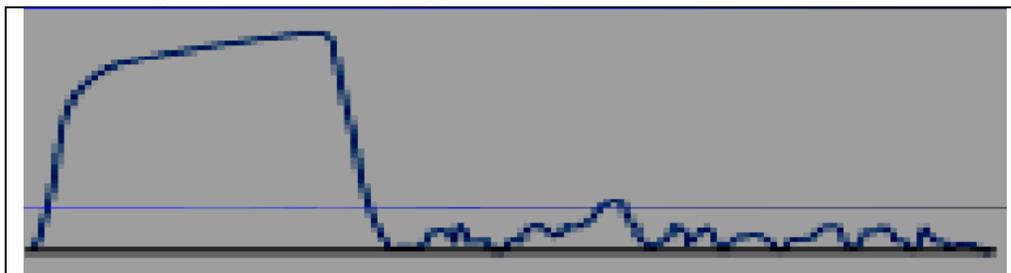


- 24- Which of the following is cause of $\uparrow\uparrow\uparrow$ CVP;
- a. Using saline on the manometer.
 - b. **PPV**
 - c. Elevating the transducer.
 - d. Elevating patient's head.
- 25- In the recovery room, the nurse found patient isn't responsive, no breathing, no blood pressure; ECG shows....



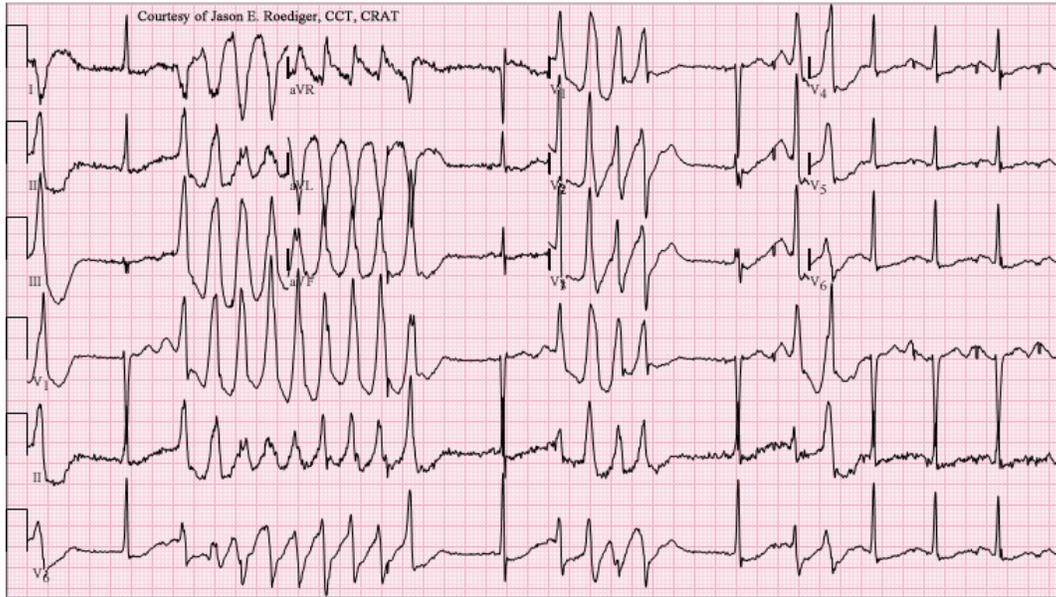
So, the first action is;

- a. **Call cardiac arrest team**
 - b. Recheck ECG
 - c. Auscultate for Heart Beats
 - d. Intubate and ventilate the patients.
- 26- Most sensitive finding in Malignant Hyperthermia;
..... \uparrow End-Tidal CO_2
- 27- Most suggestive in patient with history for Malignant Hyperthermia;
..... Full History
- 28- Capnogram $\rightarrow\rightarrow$ Tapering Trace

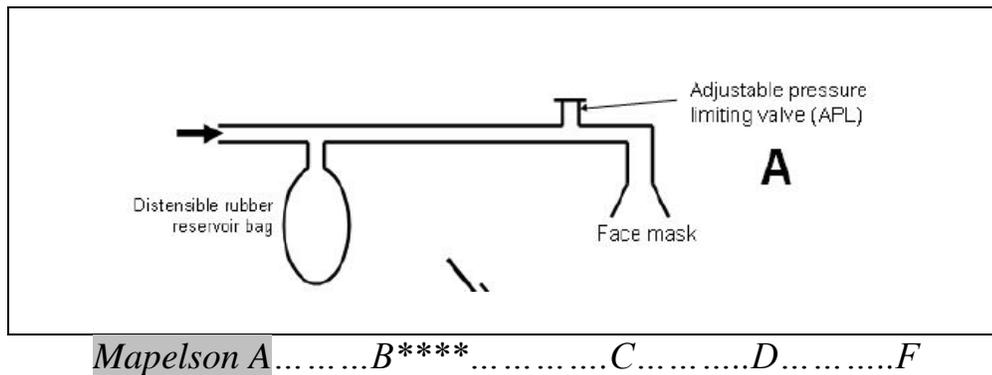


..... Kinked Tube

- 29- 12 Leads ECG;
- Atrial Flutter
 - Torsade de pointes**
 - Paroxysmal Ventricular Tachycardia
 - Nodal Arrhythmia



30- This circuit is;



- 31- Patient with hypertension reacts to ETT by;
- MI
 - Tachycardia
 - Arrhythmias
 - All of the above*****



- 32- Factor is not affecting reversal of Muscle Relaxants except;
..... Hypothermia
- 33- Local anesthetic toxicity
..... First CNS symptoms Second CVS symptoms
- 34- Morphine in Cancer Patients
..... ↑↑↑ Dose indicator of Tolerance
- 35- DM all is important except
..... Hyperhydrosis
- 36- Glasgow Coma Scale = 3
..... Not responsive to pain
- 37- After patient recovered from neuroleptic analgesia. In PACU he became apneic 5-10 minutes later... the most common cause;
- Anesthetic Drug Hang over
 - Extra cranial Hematoma
 - Opioid Overdose*****
- 38- Which is true about continuous epidural infusion of Opioids;
- It allows using of naturally occurring Opioids
 - It ensures rapid onset.
 - It minimizes side effects
 - It gives better control of Pain**
 - It causes Hypotension.
- 39- What is true about IV regional anesthesia;
- It can't be used for lower limb.
 - Toxicity of LAs; occurs if inadequate cuff inflation*****
 - It is limited to only 45 minutes to avoid limb ischemia.
 - Opioids increase its efficacy.
- 40- Most common causes of hospitalization after GA is;
- Nausea and vomiting**
 - Hypotension
 - Pain
 - Electrolyte Disturbance
- 41- Common cause of hypoxia in postoperative;

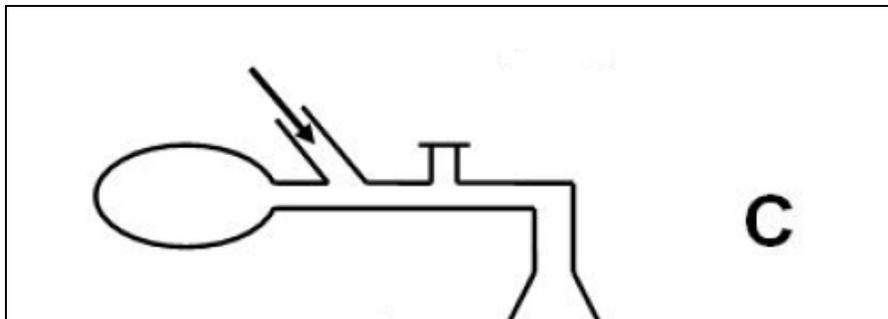


..... Hypoventilation.

- 42- One of the following is wrong for pulse-oximetry;
..... don't be affected by outside light.
- 43- Airway Management in impending Cx fracture;
a. Oral or nasal intubation with cervical fixation.
b. Using fiberoptic bronchoscope
c. All of the above.
- 44- Bradycardia in oculocardiac reflex can be managed and treated firstly by;
1. Release of stimulant and the cause.
2. IV Atropine [during the procedure].
- 45- Dangerous of Hypokalemia → ↑↑↑ instability of myocardium cause arrhythmias.
- 46- Commonest cause of Hyponatremia in head injury;
a. Mannitol
b. Diuretics
c. Restriction of salt and water
d. Overhydration***

MODULE II

1- Mapelson's



- 1- Criteria of weaning from mechanical ventilation, All true except;
 - a. $V_t > 5 \text{ mL/Kg}$
 - b. $VC > 15 \text{ mL/Kg}$
 - c. $\text{pH} > 7.3$
 - d. $\text{PaO}_2 > 60 \text{ mmHg}$
 - e. Respiratory rate $< 50/\text{min}^{***}$
- 2- Choices of connecting patient to mechanical ventilator;
 - a. MI
 - b. Drug overdose "Narcotics"***
 - c. Cerebrovascular stroke
- 3- Normal K plasma level; 3.5-5.5 mEq/L
- 4- Patient with severe chest pain ... BP=70/50....HR=40/min..... Treatment;
 - a. Atropine
 - b. Lasix
 - c. Morphine***
 - d. Adrenaline
- 5- Drugs that increase ventilation;
 - a. Thyroxine
 - b. Lasix
 - c. Aminophylline
 - d. ACEIs



- 6- O₂ Delivery for tissue controlled by;
- O₂ Content
 - COP
 - Hb%
 - All of the above
- 7- ARDS Oxygenation and ↑↑ CO₂ can be ignored.
[Permissive Hypercarbia]
- 8- Reversal of Ms Relaxant is more affected by;
- Hypothermia***
 - COP
 - Enzyme inhibitor drugs
- 9- In clinical features of Sickle cell anemia include except;
- ARDS
 - Cardiomegally
 - Convulsions
 - Salmonella Infections
 - Paraplegia***
- 10- The following reduce MAC of volatile anesthetic agents;
- Acidosis
 - Glutamate
 - NMDA
 - Dextrometomidine***
 - MAOIs
- 11- **Drugs that may precipitate acute attack of Porphyria;**
- Thiopental
 - Phenytoin
 - Chloramphenicol
 - Sulphonamides
 - Chlordiazoxide
 - All of the above



- 12- Hypokalemia occurs in except;
- a. Cushing's \$
 - b. Conn's \$
 - c. Addison's Disease***
 - d. Renal Tubular Acidosis
 - e. Laxative administration
- 13- Dantrolene;
- a. At dose of 10 mg/Kg paralysis occurs.
 - b. May be dissolved in 5% Dextrose
 - c. It requires Saline to dissolve***
 - d. It should be given prophylactic in Malignant Hyperthermia susceptible patients
 - e. It increase Ca reuptake by Sarcoplasmic Reticulum
- 14- Renin Secretion increased by;
- a. Angiotensin***
 - b. Diuretics
 - c. Antihypertensive Drugs
- 15- Side effects of Intra-Thecal Morphine;
- a. Vomiting
 - b. Itching***
 - c. Respiratory Depression
 - d. Urinary Retention
 - e. All of the Above
- 16- Thyro-mental Space 6 cm
- 17- Gastric Emptying ,,.,.,.,, ↓↓ by Pregnancy..... ↑↑ by Metoclopramide
- 18- Coumadin Antidote....
- a. Vit K***
 - b. FFP
- 19- Anesthesia and Liver;
- a. Regional anesthesia maintains liver blood flow
 - b. IPPV reduces liver blood flow**
 - c. Volatile anesthetics increase liver blood flow
 - d. Halothane is metabolize 10% in liver
 - e. Reductive Halothane metabolites can cause Halothane hepatitis



20- The following drugs are safe to use in patients with malignant hyperpyrexia;

- a. Sevoflurane
- b. Propofol**
- c. Nitrous Oxide**
- d. Sux
- e. Fentanyl**

21- The following drugs are safe to use in patients with Porphyria;

- a. Neostigmine***
- b. Pentazocine
- c. Etomidate
- d. Griseofulvin
- e. Droperidol***

22- As regards Neonatal airway;

- a. The larynx lies opposite C4-C5
- b. The trachea is 3-4 cm long.
- c. Tracheal rings are fully developed
- d. Nasal passages account for up to 40% of total airway resistance
- e. Cricoid cartilage is the narrowest part of the airway.

23- The following increases the risk of spinal hematoma;

- a. AgeOld
- b. SexFemale
- c. Presence of epidural catheter
- d. Spinal Abnormalities
- e. Technically difficult placed Needle

24- Occulo-Cardiac Reflex;

It is associated with retrobulbar block.

It is associated with retrobulbar hemorrhage.

The afferent limb is parasympathetic fibres accompanying Occulomotor Nerve.

25- Malignant Hyperthermia susceptible Individuals;

- a. There is increased risk of sudden death.**
- b. Triggering agents may not precipitate it.**



- c. Inheritance is Autosomal Recessive.
 - d. Ryanodine receptors abnormalities may be present.**
 - e. Elevated Creatinine Kinase is uncommon.
- 26- Alfentanyl;
- a. $pK_a = 8.0$
 - b. It has larger $>$ Volume of distribution than Fentanyl
 - c. It is more protein binding $>$ Fentanyl***
 - d. It is more lipid soluble $>$ Fentanyl
 - e. It is metabolized in Liver.***
- 27- Adult Trachea;
- a. It is 12 cm long
 - b. Carina opposite C6
 - c. Thyroid Isthmus lies in front of 3rd -6th tracheal rings.
- 28- Pressure controlled ventilation is better than Volume controlled $\downarrow\downarrow\downarrow$
incidence of Barotrauma.
- 29- Heparin isAntithrombin III
- 30- All events occur in Pre-eclampsia except;
- a. Hypovolemia
 - b. Hypervolemia
 - c. Proteinuria
 - d. Hypertension
- 31- Mechanical Ventilation..... $\downarrow\downarrow$ ICP by; $\downarrow\downarrow$ CSF????
- 32- Mg SO_4 Cross BBB causing Neonatal Depression
Its Therapeutic Level = 4-6 mg/dL
- 33- Morbid Obesity ,,, which is wrong sentence;
Decreased Risk of DVT
- 34- $\uparrow\uparrow\uparrow$ Thrombosis in arterial cannula may be due to..... Multiple punctures.



- 35- Which of following liable to occur in burn patient;
- a. CO poisoning
 - b. Airway edema
 - c. All of the above
- 36- The most common side effect of Terbutaline used in Ob/Gyn;
- a. Sleep disturbance
 - b. Headache
 - c. Hypertension
 - d. Pulmonary Edema
 - e. All of the above
- 37- Ketamine structure;
- R' Isomer
- 38- Instability of atracurium serum level inside the body;
- Temperature and Ph
- 39- Brachial Plexus Block..... The nerve escaped from the block;
- a. Axillary approach.....Musculocutaneous Nerve
 - b. Interscalene approach Inferior trunk / Ulnar nerve may escape
 - c. Supraclavicular approach Risk of Pneumothorax
- 40- 12 years old child Underwent surgical correction for congenital diaphragmatic hernia postoperatively he developed cyanosis and cough He received O₂ ... What will you want to give;
- Nitric Oxide
- 41- 65 years old Patient, smoker is presented by productive cough, dyspnea and cyanosis;
- a. Lobular Emphysema
 - b. Chronic Bronchitis



- 42- Axillary approach of Brachial plexus block;
- Pneumothorax is a common complication
 - Mediastinal Hge
 - Lack of anesthesia by this approach
 - Produce good anesthesia control for shoulder surgery
 - Musculocutaneous nerve is readily blocked by this approach
 - Radial nerve parathesia is elicited deep to axillary artery
- 43- Pre-eclampsia findings are all except;
- Hypertension
 - Hypervolemia***
 - Hypovolemia
 - Proteinuria
- 44- Malignant Hyperpyrexia;;; First signs;
- \downarrow PaO₂ [Hypoxia]
 - Fever
 - Tachycardia
 - $\uparrow\uparrow$ Et-CO₂
 - Myoglobinuria
- 45- Awake intubations can be done for all except;
- Lidocaine spray in mouth and oropharynx
 - Bilateral stellate ganglion block
 - Superior Laryngeal Nerve Block
 - Heavy sedation***
 - Transtracheal LAs.
- 46- Early postoperative complications in PACU;
- Hypoventilation***
 - Pain