



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 sevoflurane 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 D

- 3) In terms of airway management, the following statements are true:
 - A) Around 60% or major 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 C

- 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.

ANSWER D

5) Which of the following statements is false regarding the use of thromboelastography (TEG)?

- The enoxaparine activity may be evaluated with TEG.
- Patients receiving Isofluorane during anesthesia have a higher hypercoagulability index than those receiving TIVA anesthesia with propofol.
- TEG has been used to guide the administration of fibrinogen in postpartum hemorrhage.
- TEG allows for the detection of hypothermia-related coagulation disorders.

ANSWER B

6) In young adults, the apparent strong ion difference is:

- 40–42 mEq/L
- 27–40 mEq/L
- 12–24 mEq/L
- 8–12 mEq/L

ANSWER A

7) Lower glycemic levels and glycogen stores due to fasting result in all of the following, except for:

- Increased insulin secretion.
- Increased lipolysis.
- Fatty acids are oxidized in the liver and produce ketone bodies.
- Ketone bodies are converted into acetyl coenzyme A.

ANSWER A

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

- Hypercalcemia

- Hypomagnesemia
- Hyperphosphatemia
- Hypoglycemia

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:

- Axonal hypoxia.
- Vasoconstriction.
- Increased Endothelin-1 production.
- Decreased interleukines-6 (IL-6).

ANSWER D

10) The estimated incidence of difficult intubation in preschool age children is of approximately:

- 0.1%
- 1%
- 3%
- 7%

ANSWER A

Reference

Raffan F. Questions and answers, Rev Colomb Anestesiol 2014;42:October–December (4).