Questions and answers

Preguntas y respuestas

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1. Regarding the nuclear magnetic resonance risk areas, it is true that:
   a) There are 5 clearly defined zones.
   b) Zone 1 is the transition zone where the clinical record is usually filled out, doubts are resolved and patients are under constant observation.
   c) Zone 3 is a restricted circulation area for untrained staff and ferromagnetic objects.
   d) The resuscitation area is located in zone 1 and it is equipped with advanced cardiopulmonary resuscitation devices.

2. Postoperative residual relaxation is currently defined as:
   a) The presence of a T4/T1 ratio < 0.9 versus the T34 stimulation < 0.9.
   b) A T4/T1 ratio < 0.7.
   c) A T4/T1 ratio < 0.6.
   d) A T4/T1 ratio < 0.5.

3. With respect to observational scientific research, all of the following are true except:
   a) Describe and analyze the facts without intervening.
   b) Establish definitive causal relationships.
   c) Provides scientific basis relating to the health-disease process.
   d) Can guide future research.

4. Which of the following parameters is not part of the four universal categories in resuscitation of the patient with thoracoabdominal penetrating trauma?
   a) Intraoperative monitoring of serum fibrinogen.

   b) Central temperature greater than 35°C at the end of surgery.
   c) Serum fibrinogen levels greater than 150 mg/dl and a platelet count greater than 50000/mm\(^3\).
   d) Base deficit less than −8 and hemoglobin levels greater than 8.5.

5. The center that regulates body temperature and truly acts as a thermostat is:
   a) In transient potential receptors
   b) In the thalamus.
   c) In the hypothalamus.
   d) In the locus coeruleus.

6. Which of the following is not part of the mechanisms for regulating body temperature?
   a) Transient potential receptors are widely distributed in sensory neurons.
   b) Central thermoreceptors are located in the spinal cord, heart, and lungs.
   c) The cold signal activates neurons of the lateral parabrachial nucleus.
   d) Body temperature is exclusively regulated by negative feedback nerve mechanisms.

7. Hypothermia may alter coagulation for all of the following except:
   a) Transient thrombocytopenia.
   b) Decreased synthesis of thromboxane B2.
   c) Increased blood viscosity.
   d) Shortening of prothrombin time values.

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8. The standard definition of hypothermia is classified as moderate:
   a) From 28 to 31.9 °C.
   b) From 32 to 34 °C.
   c) From 33 to 34.5 °C.
   d) None of the above.

9. In neonatal patients receiving general anesthesia, intrahospital monitoring between 12 and 24 hours is recommended when the postconceptional age is less than:
   a) 60 weeks.
   b) 56 weeks.
   c) 50 weeks.
   d) 44 weeks.

10. From the pharmacological point of view, it is true in the pediatric patient that:
    a) Hepatobiliary clearance through the p450 isoenzymes is diminished until 6 months of age, at which point it reaches 50% of adult levels.
    b) Binding to proteins and acid alpha1-glycoprotein is normal at birth.
    c) The glomerular filtration rate reaches 90% of the adult value at approximately 3 years of age.
    d) The minimum alveolar concentration of inhaled anesthetics is greater between 1 and 6 months of age than in adults.

11. Regarding the heart of the newborn compared to the adult heart, which of the following characteristics is false:
    a) Contains more non-contractil elements.
    b) Is more elongated.
    c) Has a greater dependence on intracellular Ca for contraction.
    d) It is less compatible with early diastolic filling.

12. Which of the following variables is a major source of the pharmacokinetic variability seen in neonates:
    a) Size
    b) Age.
    c) Organic function (Liver–Kidney.)
    d) All of the above.

13. Which of the following statements regarding obstructive sleep apnea is correct:
    a) Hypopnea is defined as the decrease in airflow > or equal to .40% for 15 seconds with arterial desaturation > or equal to 6% of baseline.
    b) Severity is determined through measurement of arterial saturation during one hour of sleep.
    c) During sleep, increased PCO2 and ventilatory effort cause the active reticular system to be inhibited.
    d) The mechanical basis that explains the influence of the volume of lungs ver the size of the upper airway is located in the longitudinal traction of the trachea.

14. In clinical practice, slow metabolizing patients compared to fast metabolizing patients when they receive a therapeutic dose of codeine:
    e) Have an increased risk of respiratory depression.
    f) Have greater analgesic effect.
    g) Easter African patients have a higher incidence of slow metabolism of codeine than Caucasians.
    h) A and C are true.

Reference

Answers
1. c.
2. a.
3. b.
4. d.
5. c.
6. b.
7. d.
8. a.
9. b.
10. d.
11. b.
12. d.
13. d.
14. c.