## ANAESTHESIOLOGY PAPER-II

TIME: 3 HOURS ANS/J/20/01/II

# MAX. MARKS: 100

### **IMPORTANT INSTRUCTIONS**

- This question paper consists of 10 questions divided into Part "A" and part "B", each part containing 5 questions.
- Answers to questions of part A and part B are to be strictly attempted in separate answer sheet(s) and the main + supplementary answer sheet(s) used for each part must be tagged separately.
- Answers to question(s) of Part A attempted in answer sheet(s) of part B or Vice versa shall not be evaluated.
- Answer sheets of Part A and Part B are not to be tagged together.
- Part A and Part B should be mentioned only on the covering page of the respective answer sheets.
- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

#### Write short notes on:

#### **PART A**

1.	Discuss the recognition and management of intraoperative anaphylaxis.	4+6
2.	How do you predict postoperative pulmonary complications? Discuss the preoperative optimization and postoperative care in a patient with moderate chronic obstructive lung disease posted for elective laparoscopic cholecystectomy.	4+6
3.	Define difficult airway. Discuss the risk stratification and management of extubation in a patient with difficult airway.	2+(3+5)
4.	What is surgical stress response, methods to attenuate it and its benefit when controlled?	2+3+5
5.	Discuss ERAS protocol for ambulatory surgery.	10

P.T.O

6.

5+5

## ANAESTHESIOLOGY PAPER-II

## Please read carefully the important instructions mentioned on Page '1'

- Answers to questions of Part A and part B are to be strictly attempted in separate answer sheets and the main + supplementary answer sheets used for each part must be tagged separately.
- Answers to question(s) of Part A attempted in answer sheets of Part B or vice versa shall not be evaluated.

### PART B

Enumerate the perioperative anesthetic concerns in a 50-year-

- old male with truncal obesity and BMI of 40, scheduled for epigastric hernia repair. Discuss briefly preoperative assessment and anesthetic induction issues.

  7. A 70-year-old frail female is posted for emergency neck femur.

  She was diagnosed to be diabetic and hypertensive when she
- She was diagnosed to be diabetic and hypertensive when she had primary coronary stenting for anterior wall myocardial infarction and is on NPH for last 2 years. Her recent transthoracic echocardiography showed EF of 50% with diastolic dysfunction. She does not have any other comorbidity. Stratify the cardiac risk, and discuss perioperative cardiac and metabolic concerns briefly including commonly used medications.
- 8. a) Massive blood transfusion protocol. 5+5 b) Chronological changes in stored blood.
- 9. A 20-year-old biker is brought to emergency after a head on collision with a car. Cervical collar and venturi mask are in situ. His GCS is 10 and he has mandible fracture on X ray. He is posted for emergency laparotomy for air under diaphragm. Discuss briefly airway concerns and induction of anesthesia.
- 10. Discuss the possible complications associated with prone 10 positioning in a 40-year male undergoing lumbar discectomy.

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