ANAESTHESIOLOGY PAPER-IV

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

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.	Enumerate the causes, prevention and management of post extubation respiratory distress in ICU.		
2.	a) Trans-nasal Humidified Rapid-Insufflation Ventilatory Exchange [THRIVE].b) Oral Factor Xa inhibitors.	5+5	
3.	a) Neuraxial ultrasound.b) Opioid free anaesthesia.	5+5	
4.	a) Recruitment maneuvers.b) Delirium in ICU.	5+5	
5.	Discuss WHO ladder for chronic pain. What are its limitations?	10	

P.T.O

ANAESTHESIOLOGY PAPER-IV

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

6.	,	Role of video laryngoscope for intubation in Covid-19 patients. PPE for airway management during Covid-19 pandemic.	5+5
7.	,	Post-obstructive pulmonary oedema. Transfusion related lung injury.	5+5
8.	,	Temperature management following cardiac arrest from non- shockable rhythm. Xenon and its use in anesthesia.	5+5
9.	,	Angiotensin II agonist. Dexmedetomidine.	5+5
10.	,	Hyperchloremic metabolic acidosis. Heparin induced thrombocytopenia.	5+5
