

Date:

ather anesthesia 2

written

1. Definition of general Anastasia
2. ECG : 2 degree AV block
3. part of laryngal mask LMA
4. flow rate and gauge of iv canula
pink , yellow , green



MSQ

1. level of lower end inferor margin of scapula ?

T7+T8

T4+T5

C7+T1

2. propofol dose :

1.5-2

3

1

0.2

3. giving 1.5% of halothan ?

mac .5

mac 1.5

mac 2

mac

Date: / /

4. 180 HR with hypotension and alert of conscious what next step ?

BB

conserve

fagal manuver

adenosin

syn cadversion

5. pain relife forward and increase with lying ?

pericarditis

6. least potent inhalation anasthesia ?

desflorvan

7. true for thiopental ?

decrease ICP and cerebral consumption

8. NG tube use with ?

small bowel obstruction

appendistis

liver cirrhosis

9. spinal cord end in adult and infant ?

adult L1, infant L3

10. autonomical dead space in man with weight 70?

150

Date: / /

11. IV anesthesia with highest post operative nausea and vomiting ?

Etomidate

ketamine

propofol

12. nail polish that give inaccurate oximeter result ?
blue

13. what drug reduce ketamin hallucination effect

midazolam

coffein

14. chest compression depth ?

4 - 5

5 - 6

15 - wrong about neurogenic shock ?

tachycardia

low urin output

hypotension

spinal injury

16. stab wound with bubbling air management?

3 side occlusive

chest tube

needle decompression

17. drug metabolized by pseudocholinesterase ?

mivacurium

Date: 18. main risk associated with prolong propofol ?
acidosis

19. type of shock hypotension with warm extremity and bradycardia ?
cardiac
obstructive
neurogenic

20. all true except about hemorrhagic shock III ?
urin output = 50ml
HR above 120
blood loss about 30-40 %
confusion

21. drug most metabolized in renal ?
pancurium

22. BMI ? 200 hight , 100 weight ?
(25)

23. special about rocurium ?
onset

24. which following preferable manuver in spinal neck injury ?
chin rotation
head tiltes chin left
jow thrust
recovery patient
neck extention

Date: / /

25. ASLS chronological order:

A B C

C A B

B C A

26. what is MOA NMDA blok ?

ketamine

27. false about critira for administration ICU?

nurse 1 to 1 patient

nurse charge evry 24h

residual doctor avaliabe 24h

consult doctor visit evry 1 hour

suport organ failures

28.

29.

30.



