

الطب الجراحة
لجنة



ANESTHESIA + ARCHIVE



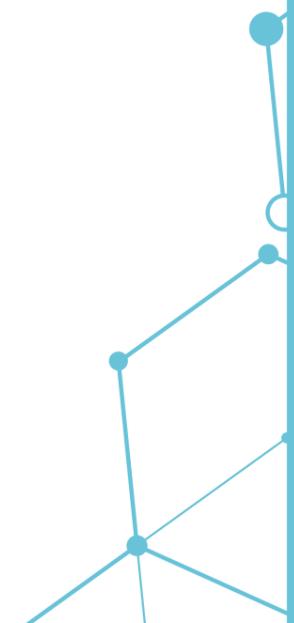
SYLLABUS

1. INTRO TO ANESTHESIA
2. ELECTROLYTES & I.V FLUID
3. AIRWAY ANATOMY ASSESSMENT
4. ANESTHESIA MACHINE
5. MUSCLE RELAXANT
6. O₂ THERAPY
7. SHOCK
8. LOCAL ANESTHESIA
9. REGIONAL ANESTHESIA
10. IV ANESTHESIA.
11. CPR
12. BRAIN DEATH.
13. BLOOD TRANSFUSION.
14. HEAD INJURY.
15. INTRO TO ICU.
16. INHALATIONAL ANESTHESIA
17. OPIOIDS
18. COMPLICATIONS OF ANESTHESIA.
19. ECG



الطبيب والجراسه

لبحسن



INTRODUCTION

1) what is the required fasting duration before the last oral intake?(السؤال غير واضح)

- a. 2 hours
- b. 4 hs
- c. 6hs
- d. 8hs

Answer:a

2)False about stages of anesthesia?

- A. Stage I: amnesia and analgesia
- B. Cease of eyeballs movement occur in stage 2
- C. Stage 3 doesn't cause respiratory depression



Answer:b

3)55 year old man with end stage renal failure with hernia repair:

- A. ASA I
- B. ASA II
- C. ASA III
- D. ASA IV
- E. ASA V

Answer:d

4)True about anesthesia stages?

Pupils dilation in stage 2

5)Anesthetic plan should include the following except one:

Select one:

- a. Patient premedication
- b. Perioperative monitoring
- c. Anesthetic procedure
- d. Preoperative fluid and blood therapy are a surgeon responsibility
- e. Postoperative pain control

Answer: d

6)Which of the following patients is at increased risk of aspiration during surgery?

- a. Patient with abdominal obstruction
- b. Patient on opioid analgesia
- c. Pregnant woman
- d. Patient with altered level of consciousness
- e. All of the above

answer:e

7)Which of the following is not a recognized risk factor for increased morbidity and mortality in anesthesia?

- a. Age > 70 years
- b. History of smoking
- c. Hemoglobin > 10 g/dL
- d. Recent myocardial infarction (<6 months)
- e. Weight loss > 10% within the last month

answer:c

بسم الله نستعد للبصمة



INTRODUCTION

8) Which of the following best describes the induction phase of general anesthesia?

- a. Maintaining depth of anesthesia, ventilation, and fluid balance
- b. Waking the patient up and resumption of CNS function
- c. Putting the patient to sleep and entering surgical anesthesia
- d. Removal of the endotracheal tube

Answer:c

9) Which of the following statements best describes extubation in general anesthesia?

- a. The process of inducing unconsciousness before surgery
- b. The phase of maintaining anesthesia depth and physiological stability
- c. The full return of central nervous system function
- d. The removal of the endotracheal tube after recovery of airway reflexes



Answer:d

PREMEDICATION

1) Which is true about Ondansetron: → Anbiemtir

- a. can't prolong the QT interval in ECG
- b. No extrapyramidal sign
- c. no respiratory side effect
- d. causes sedation

Answer:d

2) The relationship between the dose given, tissue concentration of drug, and elapsing time is related to:

Pharmacokinetics

3) Best drug for postoperative nausea and vomiting : Antiseritonin

5-HT₃ antagonists (Antiserotonin drugs) example: معلومة

Ondansetron

Granisetron

Palonosetron

4) The following may contradict premedications except:

Select one:

- a. Lengthy surgery
- b. Severe lung diseases
- c. Severe hypovolemia
- d. High ICP intracranial
- e. Depressed mental status

Answer:a

5) The followings are aims of premedications except one:

Select one:

- a. Minimizing anxiety
- b. Preoperative pain relief
- c. To prevent allergic reactions under anesthesia
- d. Reduces aspiration pneumonitis
- e. Valium as preemptive analgesic

Answer: c??

6) First selective cox2 inhibitor in market ? paracetamol

7) Which is wrong about Metoclopramide:

- a. It increases lower esophageal sphincter tone
- b. The adult dosage is 30 mg x (10–20 mg)
- c. It prevents nausea and vomiting
- d. Causes rapid gastric emptying
- e. Is contraindicated in people with intestinal obstruction

Answer:b

ELECTROLYTES & IV FLUID

23) Maintenance for 80kg pt (421)?

-120

7) what is the fluid used with administration of blood products?

Select one?

- a. N/S
- b. R/L
- c. D5W
- d. HES
- e. A and B



Ans:A

32) administration of a large volume of normal saline(0.9) is likely to produce:

Select one:?

- a. No change in acid base status
- b. Hyperchloremic metabolic acidosis
- c. Hypochloremic metabolic acidosis
- d. Hyperchloremic metabolic alkalosis
- e. Hypochloremic metabolic alkalosis

Ans:b

9- Which is incorrect with regards to hypocalcemia :

- a. it causes QT prolongation
- b. treatment with calcium may not work if magnesium is not given as well
- c. iv administration of cadum requires cardiac monitoring
- d. it is seen in pancreatitis
- e. hyperventilation produces tetany by causes a id in the total body calcium

Ans:e

10. What is not a cause of hypercalcemia?

Select one:

- a. post prandial measurement
- b. tuberculosis
- c. lung Ca
- d. hypomagnasemia
- e. renal failure

Ans:d

38. what is gauge of this cannula?

Select one:

- a. 24
- b. 22
- c. 20
- d. 18
- e. 16



Ans:d

ELECTROLYTES & IV FLUID

Q21- A patient with cerebral edema would most likely be order what type of solution?

- a. 0.45% Normal Saline
- b. 0.9% Normal Saline
- c. Lactated Ringer's
- d. 0.225% Normal Saline
- e. 3% Saline

Ans:e

18- Wrong regarding components of ringer lactate :

2 mEq/L of magnesium

33- Wrong regarding albumin colloid solution :

it is synthetic Albumin



Q14:A 65-YEAR-OLD PATIENT WITH A HISTORY OF HEART FAILURE IS BEING TREATED FOR HYPONATREMIA. THE MEDICAL TEAM AIMS TO MAINTAIN SERUM SODIUM LEVELS AT 80 MG/DL. WHICH OF THE FOLLOWING SODIUM LEVELS IS CONSIDERED ACCEPTABLE FOR MAINTAINING THIS TARGET?

- A.80 MG/DL
- B.120 MG/DL
- C.180 MG/DL
- D.240 MG/DL

Ans:d

Q15:NORMAL SALINE OSMOLARITY:

- A.154 MOSM/L
- B.280 MOSM/L
- C.285 MOSM/L
- D.295 MOSM/L
- E.308 MOSM/L

Ans:E

13- True about cannula?

Blue 22, 36%

22- isotonic solution?

- A. Na is 150
- B. CL is 150
- C. Ph less than 7 but higher than 4.5
- D. Kmorethan 5
- E. All are true

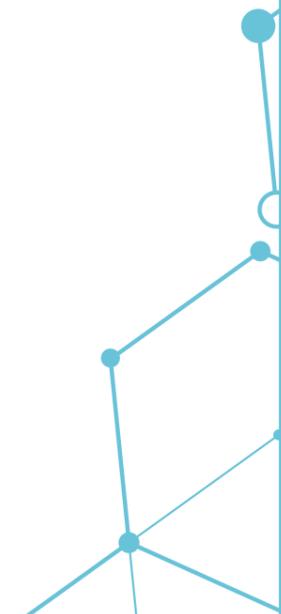
Ans:C (الجواب مش أكيد لانه ما بنعرف إذا الدكتور بده الصح و لا الخطأ)

23- isotonic false?

NACL 1.8%~7.6%

41, wrong?

Isotonic › normal saline 7.4



AIRWAY ANATOMY ASSESSMENT

10) Larynx?

C3-C6

26) all of the following are true about complete airway obstruction except ?

Coughing

27) child's upper airway

Select one:

- a. tongue is larger
- b. pharynx is smaller
- c. epiglottis is larger
- d. narrowest part thyroid cartilage
- e. larynx is more anterior



Ans:e (if except the answer is d)

29) What structure is located more superior in the larynx ?

a. the epiglottis

11- What from the following predict difficult intubation in bariatric surgery?

- a. BMI > 40
- b. snoring
- c. increased neck circumference only
- d. increased neck circumference + mallpatite 3

Ans:d

12- Hypoxemia is:

- a. low oxygen levels in your blood
- b. low levels of oxygen in the tissues of your body and low oxygen levels in your blood
- c. low levels of oxygen in the tissues of your body

Ans:a

7. Preoperative physical examination:

Select one:

- a. mouth opening at least 2 fingers
- b. malampati score 2, 3 difficult intubation
- c. thyromental distance 5 cm at least
- d. atlanto-occipital joint extension should be approximately 35 degree
- e. Cormack score 4 only epiglottis visible

Ans:d

13. Regarding middle airway anatomy "(larynx), the largest cartilage;

Select one:

- a. thyroid cartilage
- b. cricoid cartilage
- c. tracheal cartilage
- d. corniculate cartilage
- e. arytenoid cartilage

Ans:a

AIRWAY ANATOMY ASSESSMENT

Q13- Which of the following are not considered as predictors of difficult intubation in pre-anaesthetic examination?

- a. Mallampati test
- b. Thyromental distance
- c. Protrusion of mandible
- d. Cormack-Lehane grade
- e. Trachea centralization

Ans:c

Q17- all of the following are true about nasal airway except?

- a. May cause bleeding
- b. Does not protect from aspiration
- c. May precipitate laryngospasm and vomiting
- d. Contraindicated in head injuries and awake patient
- e. Easier to insert than oral airway



Ans:d

Q4: CARINA END AT LEVEL OF:

- A.C4
- B.C7
- C.T2
- D.T4
- E.T12

Ans:d

Q3: WHICH OF THE FOLLOWING STATEMENTS ABOUT THE ADULT AIRWAY IS FALSE?

- A.IT EXTENDS FROM C3 TO C6.
- B.THE TRACHEA HAS 15-20 C-SHAPED CARTILAGES.
- C.THE SUPERIOR LARYNGEAL NERVE SUPPLIES THE CRICOTHYROID MUSCLE.
- D.THE SUPERIOR VOCAL CORDS ARE KNOWN AS TRUE VOCAL CORDS AND SERVE A PROTECTIVE FUNCTION.

Ans :d

7- Tracheostomy puncture should be done at?

Between the second and third tracheal ring

17-Coremark grade 3?

Only we can see the epiglottis

18-Mallampati score, class 3?

Base of uvula and soft palate

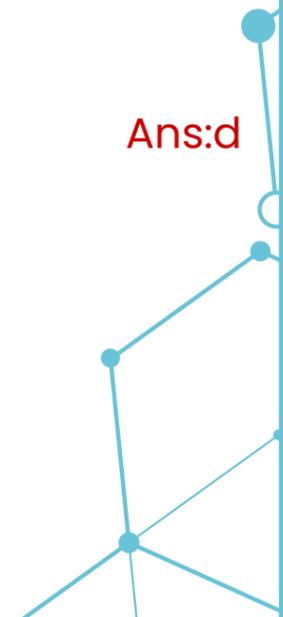
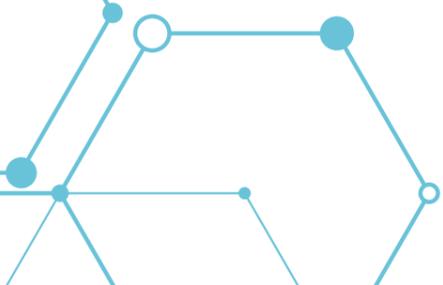
30- the false statement?

- A. Trachia: 15-20 ring
- B. 6 cartilage
- c. C3 to c 6
- D. Upper folds is true focal cord

Ans:d

-According to mallapalti score

Class I : Uvula ,fauces,soft palate, pillars visible



ANASTHESIA MACHINE

1) Inaccuracy in flowmeter may occur due to all except:"

- a. Float stick to tube
- b. Electrical activity
- c. Tube not vertical
- d. Back pressure
- e. Static chemically

Answer: e

2) Inaccuracy in flow meters are all except :

- a. The tube not being vertical.
- b. Back-pressure, from for example, a ventilator.
- c. Static electricity causing the float to stick to the tube.
- d. Dirt causing the float to stick to the tube
- e. fresh gas rate



Answer: e

3) About anesthesia machine, which one is true?

- a. Flowmeter are gas specific and flow rate depend on viscosity or density.
- b. Increase temperature and hydration are disadvantages of humidification system .
- c. O₂ cylinders colors maybe green or white and black in different countries color coding systems.
- d. Inhalational agent itself is not a factor in affecting vaporizer output
- e. Pressure in oxygen cylinder H type 6000-8000 psi and come in form of gas

Answer: a

4) What mixture of gases are used in anesthesia?

- a. O₂ and N₂O
- b. O₂ and CO₂
- c. CO₂ and N₂O
- d. O₂, CO₂ and N₂O
- e. O₂ and He

Answer: a

5) The followings are color coding of anesthetic gases except one

Select one:

- a. White for O₂
- b. Blue. Nitrous oxide
- c. Grey for CO₂
- d. Yellow for air
- e. Black for nitrogen

Answer: d

6) what type of maplesone circuit is an Ayre's T piece?

- 1. D
- 2. B
- 3. A
- 4. E
- 5. F



Answer: 4

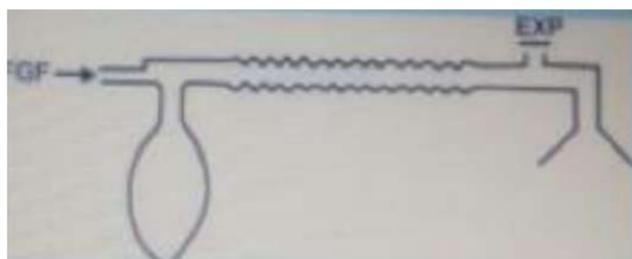
7) The best mapleson type for controlled breathing is?

- a. Type A
- b. Type B
- c. Type C
- d. Type D

Answer: d

8) what is the name of this device?

- 1. Mapleson A
- 2. Mapleson C
- 3. Mapleson D
- 4. Mapleson E
- 5. Mapleson F



Answer: 1

MUSCLE RELAXANT

Wrong about atracurium?

Dose 0.1-0.15

anticholinergic HAS the following effects except

- a. No sedative effect
- b. Parkinson
- c. effect Muscarinic receptors
- d. mydriasis
- e. inhibit secretions



Ans:a

Which of the following is H2 histamine blocker :

- a. cimetidine
- b. levocetirizine
- c. Diphenhydramine

Ans:a

about malignant hyperthermia, which one is true?

- a. Mostly autosomal recessive
- b. The earliest sign is hypercarbia—masseter rigidity
- c. More common in adults than pediatric
- d. Triggering agent include halothane, nitrous oxide and sevoflurane
- e. Hyperthermia usually occur early in the event of malignant hyperthermia

Ans:b

succinylcholine is contraindicated in a patient with?

- a. Chronic renal failure
- b. Duchene muscular dystrophy
- c. Myasthenia gravis
- d. Patient with full stomach
- e. Patient with potassium 5.0 mEq/L

(اعتقد المرجحة اكثر b) Ans:a+b

about malignant hyperthermia, which one is true?

- a. First step of treatment is giving dantrolene
- b. It is acquired hypermetabolic muscle disease
- c. The severe hyperthermia is usually the cause of death
- d. Prophylactic dantrolene is mandatory in diagnosed cases before induction of general anesthesia
- e. Dantrolene should be given for at least 24 hours after the event

Ans:e

all the following is steroidal non depolarizing muscle relaxant except :

doxacorium

wrong regarding succinylcholine :

metabolized by acetyl cholinesterase

MUSCLE RELAXANT

20- unable to breath after one hour of giving succinylcholine?

- A. Pseudocholinesterase mutation
- B. Homogenous atypical

على الاغلب B

26- false about depolarized muscle relaxant?

- A. Bradycardia
- B. Hypotension
- C. Intraocular pressure drop
- D. Hypokalemia
- E. Muscle pain



Ans:d

28- Indication for succinylcholine?

Transient hypokalemia

Q19:ROCURONIUM IS CHARACTERIZED FROM OTHER MUSCLE RELAXANTS BY :

- A. RAPID ONSET
- B. SHORT DURATION
- C. NO NEED FOR REVERSAL
- D. METABOLIZED BY PSEUDOCHOLINESTERASE

Ans:A

Q20: STEROIDAL MUSCLE RELAXANT :

- A. MIVACURIUM
- B. ATRACURIUM
- C. ROCURONIUM
- D. CISATRCURIUM
- E. DOXACURIUM

ANS:C

Q21: REGARDING SUXAMETHONIUM ONE IS CORRECT:

- A. INTRAOCULAR PRESSURE IS INCREASED
- B. PROLONGED ACTION IN 10% OF THE POPULATION
- C. PHASE II BLOCK MORE COMMON IN NEONATES
- D. CAUSE HYPOKALEMIA

ANS:A



02 THERAPY

1) WHAT IS THE APPROXIMATE CONCENTRATION OF OXYGEN DELIVERED BY A NASAL CANNULA?

- A. 0.35%
- B. 0.45%
- C. 0.50%
- D. 0.90%

ANS: B

2) A CIGARETTE VENDOR WAS BROUGHT TO THE EMERGENCY DEPARTMENT HOSPITAL AFTER SHE FELL INTO THE GROUND AND HURT HER LEFT LEG. SHE IS NOTED TO BE TACHYCARDIC AND TACHYPNEIC. PAINKILLERS WERE CARRIED OUT TO LESSEN HER SUDDENLY, SHE STARTED COMPLAINING THAT SHE IS STILL IN PAIN AND NOW EXPERIEN MUSCLE CRAMPS, TINGLING, AND PARAESTHESIA. MEASUREMENT OF ARTERIAL BLOOD REVEALS PH 7.6, PAO₂ 120 MM HG, PACO₂ 31 MM HG, AND HCO₃ 25 MMOL/L. WHAT THIS MEAN? SELECT ONE:

"مكرر نبض ووريد وسير وتونين وميني روح"

- A. RESPIRATORY ALKALOSIS, UNCOMPENSATED
- B. RESPIRATORY ACIDOSIS, PARTIALLY COMPENSATED
- C. METABOLIC ALKALOSIS, UNCOMPENSATED
- D. METABOLIC ALKALOSIS, PARTIALLY COMPENSATED
- E. RESPIRATORY ALKALOSIS, COMPENSATED

ANS: A

3) Venturi adaptor, O₂ flow rate ?

- A. 4-6
- B. 6-10
- C. 10-15
- D. Variable

ANS: D

4) The wavelength of the infrared led in pulse oximetry :

- a. 905
- B. 950

ANS: B

5) Predictor of difficulty encountering ventilation mask, Except :

- A. Bearded
- B. Hyomental distance 2 finger
- C. Large neck
- D. Advanced age
- E. Snorer

ANS: B

6) Pt. under GA, decrease ventilation and O₂ sat, next step:

ANS: Head up, O₂, lavage

7) What is the minimum O₂ pressure in emergency stores:

- A. 500 psi
- B. 1000 psi
- C. 1500
- D. 2000
- E. 2500

ANS: D

8) The wavelength of the infrared led in pulse oximetry:

- A. 660
- B. 1000
- C. 940

ANS: C

02 THERAPY

9) Nasal cannula 2L/MIN F_{IO2} is:

- A. 24%-25%
- B. 32%-33%
- C. 28%-29%
- D. 36%-37%
- E. 40%

ANS: C

10) If you want to give a patient O₂ with a flow of 40% which of the following to use:

- A. simple mask
- B. Venturi
- C. non rebreather mask
- D. nasal cannula
- E. rebreather mask



ANS: A

11) COPD patient what will you use to give O₂ therapy:

- A. nasal cannula
- B. simple mask
- C. non rebreather mask
- D. Venturi
- E. rebreather mask

ANS: D

12) One of the following device provides fixed performance oxygen therapy?

"مكرر سيروتونين ووطن"

Select one:

- A. Nasal cannula
- B. Simple mask
- C. Partial rebreather mask
- D. Venturi mask
- E. O₂ by T-piece

ANS: D

13) What is the oxygen flow rate of this device (simple mask)?

Select one:

- A. 24-44 ml per min
- B. 30-40 ml per min
- C. 35-60 ml per min
- D. 60-80 ml per min
- E. 80-100 ml per min

ANS: C

14) Minute ventilation is equal to?

- A. F_{IO2} X PEEP
- B. F_{IO2}/PEEP
- C. Tidal Volume X Respiratory Rate
- D. Tidal Volume/Respiratory Rate
- E. F_{IO2} X PaO₂

ANS: C

15) What mixture of gases are used in anesthesia?

- A. O₂ and N₂O
- B. O₂ and CO₂
- C. CO₂ and N₂O
- D. O₂, CO₂ and N₂O
- E. O₂ and He

ANS: A

02 THERAPY

16) All the following regarding PEEP are true except:

ANS: Functional residual volume is decreased

17) Wrong regarding oxygen therapy devices :

ANS: Normal inspiratory flow is 40-50 L/min

18) Ambu bag with reservoir how much O₂ saturation :

ANS: 90-100%

19) Pressure at full O₂ cylinder :

ANS: 1800-2200

20) FiO₂ is affected by one of the following:

ANS: Fresh gas flow

21) Not a change that occur during 100% oxygenation for 48 hours:

ANS: bleeding tendency due to coagulation defects



الطبيب والجراحة

لبحنة



SHOCK

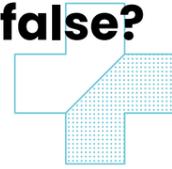
1) Which of the following is NOT a recognized type of shock?

- A. Distributive
- B. Hypovolemic
- C. Obstructive
- D. Cardiogenic
- E. Neurogenic

Answer:e

2) which of the following statements about neurogenic shock is false?

- a. warm skin
- b. increased systemic vascular resistance (svr)
- c. bradycardia
- d. normal urine output
- e. peripheral vasodilation



Answer:B

3) Treatment of Anaphylactic shock?

- Adrenaline

4) Pt 68 yo m with HTN and DM presents to the ER with abrupt onset of diffuse abdominal pain with radiation to his low back. The pt is hypotensive, tachycardic, with cool but dry skin. What type of shock is this?

Select one:

- a. Obstructive
- b. Hypovolemic
- c. Cardiogenic
- d. Septic
- e. Anaphylactic

Answer:b

5) According to SIRS criteria, one is not correct:

Select one:

- a. Temperature more than 38°C or less than 36°C
- b. Heart rate more than 90 beats/minute
- c. Respiratory rate more than 20 breaths/minute
- d. Systolic blood pressure less than 90 mmHg
- e. WBC more than 12,000 cells/mm³ or less than 4,000

Answer: d

6) Pt 55 yo m with hx of HTN, DM presents crushing substernal cp, diaphoresis, hypotension, tachycardia and cool, clammy extremities. What type of shock is this?

- a. Obstructive
- b. Hypovolemic
- c. Cardiogenic
- d. Septic
- e. Anaphylactic

Answer:c

SHOCK

7) Which of the following is a non-hemorrhagic cause of hypovolemic shock?

- a. Gastrointestinal bleeding
- b. Post-partum hemorrhage
- c. Aortic aneurysm rupture
- d. Severe diarrhea
- e. Massive hemoptysis

Answer:d

8) All of the following are causes of hemorrhagic hypovolemic shock except:

- a. Gastrointestinal bleeding
- b. Ruptured aortic aneurysm
- c. Vomiting
- d. Post-partum hemorrhage
- e. Massive hemoptysis



Answer:c

9) A patient with an estimated blood loss of 1800 mL is most likely in which class of hypovolemic shock?

- a. Class I
- b. Class II
- c. Class III
- d. Class IV

Answer:c

10) Which of the following best defines cardiogenic shock?

- a. A condition of circulatory failure resulting from severe blood loss
- b. A condition where the heart is unable to maintain adequate cardiac output
- c. Shock caused by infection leading to systemic vasodilation
- d. A state of low blood volume due to dehydration

Answer:b

11) Which of the following best defines shock?

- a. A condition of high blood pressure causing organ damage
- b. Life-threatening circulatory failure leading to inadequate tissue perfusion and oxygen delivery
- c. An infection causing fever and inflammation
- d. A temporary increase in cardiac output during exercise

Answer:b

12) Septic shock is best described as:

- a. Low blood pressure due to severe bleeding
- b. Persistent low blood pressure caused by infection that does not respond to fluid treatment
- c. Shock caused by allergic reaction leading to airway swelling
- d. Temporary drop in blood pressure during anesthesia induction

Answer: b

LOCAL ANASTHESIA

1) What is the correct order for absorption of local anesthesia according to the site of injection?

- a. Brachial>sciatic>subcutaneous>epidural
- b. Tracheal>paracervical>intercostal>brachial
- c. Epidural>brachial>intercostals>paracervical
- d. Tracheal>paracervical>brachial>subcutaneous
- e. Intravenous>intercostals>brachial>epidural

Answer :d

? ,,, pt after local anesthesia suffer from tinnitus, numbness,dizziness

CNS toxicity



3) wrong about local anesthesia?

Hyperkalemia and Hypercalcemia antagonist block

4) About function of the nerve fibers, which one is true?

- a. A alpha > proprioception, pressure
- b. A delta >temperature, pain, pressure
- c. TypeC > pain, preganglionic sympathetic, reflexes
- d.type B > preganglionic, sympathetic

Answer : d

Wrong regarding LA:

"Sensory is more sensitive than autonomic"

Question for 70 kg , 63 old male what is the maximum dose for lidocaine sedation with epinephrine that can be infiltrate

- A)300
- b)400
- c)500
- d)600
- e)700



Agent	Max Dose w/o Epi	Max Dose w/ Epi	Duration of Action	Notes
Lidocaine	5mg/kg	7mg/kg	30 - 90 min	I.V. = 10mg/mL Z.I. = 20mg/mL
Bupivacaine	2.5mg/kg	3mg/kg	6 - 8 hrs	0.5% = 5mg/mL
Mepivacaine	7mg/kg	8mg/kg	---	---
Ropivacaine	3mg/kg	---	---	---

Answer : c

? All are early systemic toxicity for LA except

- A)blurred vision
- B)tongue heaviness
- C)tinnitus
- D)respiratory muscle weakness
- E)all of the above

Answer : d

Which one of the following not amide:

- a) Procaine
- b) Bupivacain
- c) Lidocaine

Answer : a

REGIONAL ANASTHESIA

11) Female come for CS give hyperbaric then suffer from numbness in thumb what the next management?

- A. Head up
- B. Head down
- C. O₂
- D. Head up with O₂
- E. Head down with O₂

ans:d

27- The important anatomical hall mark for intrathecal anesthesia in children :

- a. Spinal cord to L3
- b. the dural sac extends to the 3rd sacral in infants



Ans: b

2. The epidural space is located between the

Select one:

- a. arachnoid and pia mater.
- b. dura and arachnoid mater.
- c. dura mater and the ligamentum flavum.
- d. arachnoid mater and the vertebral muscle layer.
- e. arachnoid and the ligamentum flavum

Ans:c

19. All of the followings are contraindications for epidural analgesia, EXCEPT:

Select one:

- a. Systemic infection
- b. Abnormal hemostasis
- c. Increased intracranial pressure
- d. History of laminectomy 15 years ago
- e. Patient refuse

Ans:d

25. at anatomical level is T10?

Select one:

- a. Level of the umbilicus
- b. Level of inferior angle of scapula
- c. Level of the nipple
- d. Level of the iliac crest
- e. Level of PSIS

Ans:a

The umbilicus lies at the vertebral level between the L3 and L4 vertebrae. However, the skin around the umbilicus is supplied by the thoracic spinal nerve T10 (T10 dermatome) A helpful mnemonic is "T10 for belly but-ten".

 <https://accessanesthesiology.mhmedical.com>

REGIONAL ANASTHE SIA

Q33- you are performing epidural injection on awake 40 years old patient who is healthy with no significant medical history. Soon after injecting 20ml of 0.25% bupivacaine the patient become agitated, has a seizure and loses consciousness. your first step in management is?

- a. Administer lipid
- b. Administer midazolam or propofol to control seizure
- c. Establish airway and give 100% oxygen via face mask
- d. Administer epinephrine
- e. Administer amiodarone to prevent arrhythmias



Ans:c

Q13:WHAT IS A POTENTIAL COMPLICATION ASSOCIATED WITH POST-DURAL PUNCTURE HEMATOMA?

- A.CEREBRAL EDEMA
- B.MYOCARDIAL INFARCTION
- C.PULMONARY EMBOLISM
- D.DEEP VEIN THROMBOSIS
- E.ACUTE KIDNEY INJURY

ANS:A

19- All of the following are true about opioid with regional anesthesia except?
promote sensory block spring a n d faster recovery

32- About spinal ancesesthesia, except?

- A. No decrease in expiratory reserve volume
- B. Hyperperistalsis

Ans:A



IV ANAESTHESIA.

Propofol all true except:

- a) Myoclonic movement
- b) Carcinogenic effects

Ans:b

Wrong regarding ketamine :

it is NMDA receptor agonist (actually it is antagonist)

NMDA:antagonist:N2O+ketamine

GABA:agonist :الباقي

The followings are related to benzodiazepine use in anesthesia except one .

:Select one

- a. Increases hallucinations after ketamine
- b. As premedicant
- c. As IV. Inductive agent
- d. As Anticonvulsant
- e. Sympatholytic agent

Ans:a

- all of the following have an antiemetic action except:

- a. Promethazine
- b. Propofol
- c. Etomidate
- d. Haloperidol
- e. Sevoflurane

Ans:c

-All the following will increase susceptibility of laryngospasm except :

Propofol

-Decrease dose of propofol at elderly due to :

Brain atrophy

wrong regarding thiopental :

-it is oxybarbiturate & other choice

Q22:WHAT IS THE MAIN RISK ASSOCIATED WITH THE PROLONGED ADMINISTRATION OF PROPOFOL IN ICU PATIENTS?

- A.RESPIRATORY DEPRESSION
- B.ACIDOSIS
- C.HYPOTENSION
- D.CARDIAC ARRHYTHMIAS
- E.SEPSIS

ANS:B

Q23:WHICH OF THE FOLLOWING DRUGS WORKS BY BLOCKING NMDA RECEPTORS?

- A.KETAMINE
- B.PROPOFOL
- C.BENZODIAZEPINES
- D.ETOMIDATE

ANS:A

15-Ketamine, except?

Bronchoconstrictio

CPR

The followings are blood richly supplied organs except:

Select one:

- a. Brain
- b. Fatty tissues
- c. Kidneys
- d. Liver.
- e. heart and lungs

Ans:b

15. What's the first thing you should do before beginning CPR if you see an adult collapse and the person is unresponsive?

Select one:

- a. Remove the victim's belt
- b. Check the victim's mouth
- c. Call 911
- d. Call the victim's doctor
- e. Chest compression



Ans:c

21- CPR check breath?

Not more than 10 sec

WHICH OF THE FOLLOWING RHYTHMS IS COMMONLY ASSOCIATED WITH THE NEED FOR IMMEDIATE CPR?

- A. ATRIAL FIBRILLATION
- B. VENTRICULAR FIBRILLATION
- C. NORMAL SINUS RHYTHM
- D. BRADYCARDIA
- E. TACHYCARDIA

Ans:B



الطلاب: شو كل هاذ يا لجنة
اللجنة: معلش آخر امتحان

BRAIN DEATH

1) A man is found on the ground outside a homeless shelter. When you give him a sternal rub, he opens his eyes, tells you to go away, and pushes your hand away. What is his Glasgow Coma score

Select one: "مكرر سيروتونين، وتين"

- A. 8
- B. 9
- C. 10
- D. 11
- E. 12

ANS: E

2) A 22 year old male presents following a motor vehicle accident he withdraws to pain, opens his eyes only to pain and uses Inappropriate words. What IS his GCS:?

"مكرر نبض، ورید، وتين"

- A. 8
- B. 9
- C. 10
- D. 11
- E. 12

ANS: B

3) severe neurotrauma is not associated with:

- A. Focal neurological deficit
- B. Post traumatic seizure
- C. Palpable depressed fracture
- D. GCS of 14
- E. None of the above

ANS: D

4) in order for a brain death not to be considered valid, the following criteria must be met:

- A. Date, time and signature
- B. Patient's name, diagnosis and events surrounding admission
- C. Date and time
- D. Date, time, diagnosis and time
- E. None of the above

ANS: E

5) which of the following is not apart of the clinical brain death exam?

- A. Facial reflex
- B. Doll's eyes
- C. Cold calorics
- D. Trigeminal reflex
- E. None of the above

ANS: E

6) Wrong regarding apnea test at brain death criteria :

ANS: one doctor should perform this test

7) One of the following is an indication for ICU admission :

ANS: GCS less than 12

HEAD INJURY

Regarding early complications of head injury except one:

- a. Cerebral edema
- b. Herniation
- c. Hydrocephalus
- d. Meningitis
- e. Epilepsy

Ans:c

Wrong regarding basal skull fracture :

There is frontal bone fracture ???!!!! (not sure)



Pt. with a head injury is being monitored increased intracranial pressure(ICP)his blood pressure is 90/60mmhg ,heart rate 110 beat/minute ,ICP is 20,CVP is 10;therefoe his cerebral perfusion pressure(CPP)is:

- a. 70mmhg
- b. 80mmhg
- c. 85mmhg
- d. 90mmhg

$$\begin{aligned} \text{CPP} &= \text{MAP} - (\text{ICP or CVP}) \\ &= \frac{90+5}{3} - 20 \\ &= 70 - 20 = 50 \end{aligned}$$

ans:b

Severe neurotrauma is not associated with:

- a. Focal neurological deficit
- b. Post traumatic seizure
- c. Palpable depressed fracture
- d. GCS of 14
- e. None of the above

Ans:d (13-15 mild, 9< severe)

Pt with a head injury is being monitored increased ICP his blood prusser 100/70 ,HR 110,icp 30, CVP 10 , therefore his ccp is ?

50mmhg

Wrong regarding management of High intracranial pressure :

head should be downward. (elevation up to 30)

One of the following is an indication for ICU admission :

GCS less than 12

هانت هانت



INTRO TO ICU

1) WHAT IS THE MAIN RISK ASSOCIATED WITH THE PROLONGED ADMINISTRATION OF PROPOFOL IN ICU PATIENTS?

- A. RESPIRATORY DEPRESSION
- B. ACIDOSIS
- C. HYPOTENSION
- D. CARDIAC ARRHYTHMIAS
- E. SEPSIS

Answer: a

Q2: ALL OF THE FOLLOWING ARE INDICATIONS OF CENTRAL VENOUS CATHETER EXCEPT :

- A. BLOOD SAMPLING
- B. ABGS MEASURE
- C. MEDICATION
- D. FLUID ADMINISTRATION
- E. FOR CENTRAL VENOUS PRESSURE.



ANS: B

Q3: CAPNOMETRY LEAST EFFECTIVE IN :

- A. ENDOBRONCHIAL INTUBATION
- B. ESOPHAGEAL INTUBATION
- C. COMPLETED OBSTRUCTION
- D. MALIGNANT HYPERTHERMIA

ANS: C

What does not cause impaired accuracy of the pulse swimmer :

- a. ambient light
- b. carboxyhaemoglobin
- c. methaemoglobin
- d. hypothermia
- e. xray beams

ANS: E

A central line can be used for all of the following EXCEPT which one :

- a. Administer fluids
- b. Administer medications
- c. Obtain blood for labs
- d. Obtain blood for ABGs
- e. CVP monitoring

ANS: D

The followings are body core temperature monitoring sites except

Select one:

- a. Tympanic membrane
- b. Nasopharynx
- c. Carotid artery site
- d. oesophagus
- e. Sigmoid

ANS: E

INTRO TO ICU

Which is the most important physiological parameter monitored in the intensive care unit?

- a. Temperature
- b. Heart rate
- c. Blood pressure
- d. Skin color
- e. Urine output

ANS: B

Which one is true?

- a. Moderate hypothermia is characterized by pale skin and temperature between 28-32
- b. Anuria defined as urine output less than 150ml/day
- c. Normally urine is slightly acidic and with pale color
- d. Increase in urine specific gravity is due to high water intake, absence of ADH and acute nephritis
- e. slurred speech occurs in severe hypothermia

ANS: A

- according to hypoxia classification a correct example of histo-toxic hypoxia is:

- a. Status asthmaticus
- b. Thyrotoxicosis
- c. Heart failure
- d. Cyanide poisoning
- e. Seizure

ANS: D

all of the following are signs of dehydration except?

- a. Progressive metabolic acidosis
- b. Urine specific gravity > 1.010
- c. Urine osmolality < 300 mOsm/kg
- d. Urine sodium < 10mEq/l
- e. Normal heart rate

ANS: c

according to criteria of admission to intensive care unit one correct:

- a. Patient needs FIO₂ less than 60%
- b. Pao₂ less than 70mmhg
- c. PaCo₂ more than 55mmhg
- d. GCS less than 14 score
- e. PH is 7.4

ANS: C

absolute contraindications of arterial line insertion, all are true except one:

- a. Atherosclerosis
- b. Raynaud syndrome
- c. Full thickness burns over the cannulation site
- d. Absent pulse
- e. Thromboangitis obliterans

ANS: A

INTRO TO ICU

the most common complication of inserting a central venous catheter is?

- a. Carotid artery puncture
- b. Thrombosis
- c. Cardiac arrhythmias
- d. Air embolism
- e. Infection

ANS: C

Wrong regarding changes that occurs at core temperture of 30 c :
vasodilation



Not used for obtaining of CVP :
external jagular

An example of hypoxic hypoxia :
Status asthmaticus

Not a part of classical managment of ICU Patient (FAST HUG):
empirical antibiotic in every patient

Wrong regarding arterial line :
ABG can't be obtained from arterial line ... مش اكد

All the following are indicatons for central venous catheter, except?

- A. Blood transfusion
- B. Medication
- C. Chemotherapy
- D. Coagulopathy

ANS: D



INHALATIONAL ANAESTHESIA

Which of the following is Wrong about desflurane:

- a. closely related to isoflurane
- b. uses special electronic vaporizer
- c. can produce compound A
- d. highly fluorinated agent
- e. has B:G CO of 2.6

Ans:c+e

Which of the following is wrong about Isoflurane:

- a. causes muscle relaxation
- b. decreases liver and renal blood flow
- c. metabolized by trifluoroacetic acid
- d. used for maintenance of anesthesia



**Ans:b

بأرشف تاني كلهم صح

What's mac for isoflurane in awake patient :

- a. 1.2
- b. 0.3
- c. 2.4
- d. 0.6

Ans:b

What mixture of gases are used in anesthesia?

- a. O₂ and N₂O
- b. O₂ and CO₂
- c. CO₂ and N₂O
- d. O₂, CO₂ and N₂O
- e. O₂ and He

Ans:A

Wrong about benzodiazepines ?



(المفروض تكون العبارة صح، لانه هو بقلل ال MAC) decrease the mac

31- Wrong about dysflurane ?

Mac1.2

Halothane effects in CNS except one. Select one:

- a. Increases cerebral blood flow
- b. Maintain organ stores lation
- c. Decreases cerebral O₂ consumption
- d. Decreases cerebral metabolism
- e. Increases ICP



كله تحت السيطرة؟

.....

Ans:b

INHALATIONAL ANESTHESIA

Which of the following is known as laughing gas?

- a. CO₂
- b. N₂O
- c. NO₂
- d. B₂O
- e. He

Ans:b

the main reason Desflurane is not used for inhalational induction in clinical practice is because of?

- a. Its low blood/gas partition coefficient
- b. Its propensity to produce hypertension in high concentration
- c. Its propensity to produce airway irritability
- d. Its propensity to produce tachyarrhythmias
- e. Its lipid solubility

Ans:C

What mixture of gases are used in anesthesia?

- a. O₂ and N₂O
- b. O₂ and CO₂
- c. CO₂ and N₂O
- d. O₂, CO₂ and N₂O
- e. O₂ and He

Ans: a

all of the following increase MAC except :

hypernatremia ! (it could be HTN also !!)

Not a side effect of nitrous oxide :

hepatitis

The Mac of drug=x 1.15, y is considered as the best inhalational agent for induction, and a required the use of electrically heated ?

X: isoflurane, y: sevoflurane, z: desflurane

Coronary steal?

Isoflurane

N₂O contraindication except?

- A.laproscopy
- B. Corneal surgery

Ans:B

INHALATIONAL ANAESTHESIA

37-all of the following decrease the mac, except?

- A. Hyponatremia
- B. Hypothermia
- C. Hyperthermia
- D. Elderly patient
- E. PaO₂ < 42

Ans:A

24- All effect the rate of Inhalational agent induction, except ??

- a. History of malignant hyperthermia
- b. Tension gas composition
- c. Pulmonary ventilation



Ans:A

Malignant hyperthermia?

Increase tidal volume Co₂

الطبيب والجراحة
لجنة



OPIOIDS

1) All of the following are effects of Mu receptor stimulation, except?

- A. Miosis
- B. Constipation
- C. Respiratory depression
- D. Sedation

Answer: d

2. Which of the following statements about opioids is not true?

- A. They can cause respiratory depression .
- B. They can cause histamine release .
- C. Naloxone is an antidote for pruritis caused by OPIOIDS.
- D. They can decrease antidiuretic hormone (ADH) levels .



Answer: d

3. One is false about Morphine?

- A. Morphine more potent than Morphine 3 glucuronide
- B. Adults more sensitive than neonate
- C. remifentanyl safe in renal failure
- D. morphine is contraindicated in renal failure

Answer: A

4. All of the following opioid are pure agonist and partial agonists except?

- A. Sufentanil
- B. Buprenorphine
- C. Nalbuphine
- D. Remifentanyl
- E. Morphine

Answer: C

5. All of the following are true about opioid with regional anesthesia except?

- A. promote sensory block spring and faster recovery
- B. They enhance analgesia when combined with local anesthetics.
- C. They prolong the duration of sensory block (not shorten it).

Answer: A

6. All of the following are side effects of morphine, except:

- A. Constipation
- B. Nausea and vomiting
- C. Respiratory depression
- D. Increased peristaltic movement

Answer: D

7. Adverse effects of opioids:

It is a mini osce question but it can be a mcq

OPIOIDS

8. which of the following is wrong regarding morphine side effects?

- A. nausea and vomiting
- B. constipation
- C. respiratory stimulation
- D. Histamine release

Answer:c

9. All of the following are synthetic opioid except?

- A. Pentazocine
- B. remifentanil
- C. Methadone
- D. Pethidine
- E. Levorphanol



Answer: mostly a

10. Effects of activating Mu opioid receptors except:

- A. Supraspinal analgesia
- B. Dependence
- C. Respiratory depression
- D. miosis
- E. Spinal analgesia

Answer:e

11. which of the following are advantages of using opioids with spinal and epidural anesthesia?

- A. exert direct analgesic effect
- B. prolong the duration of sensory and motor blockade
- C. increase the mean spread of the blockade
- D. allow for reduction in the required dose of local anesthetic
- E. all of the above

Answer:e



COMPLICATIONS OF ANESTHESIA

The followings predispose to delay recovery from general anesthesia except Select one:

- a. Chronic hypertension
- b. Hepatic insufficiency
- c. Hyperthyroidism
- d. Renal insufficiency
- e. Hyper or hypoglycemia.

Certain underlying metabolic disorders such as hypoglycemia, severe hyperglycemia, and electrolyte imbalance, especially hypernatremia, hypoxia, hypercapnia, central anticholinergic syndrome, chronic hypertension, liver disease, hypoalbuminemia, uremia, and severe hypothyroidism may also be responsible for delayed

ANSWER: C

The followings increases susceptibility to scoline induced hyperkalemia except. Select one:

- a. Spinal cord transection
- b. Severe burn
- c. Severe sepsis
- d. Severe metabolic alkalosis
- e. Near drowning syndrome

TABLE 11-5 Conditions causing susceptibility to succinylcholine-induced hyperkalemia.

Burn injury
Massive trauma
Severe intraabdominal infection
Spinal cord injury
Encephalitis
Stroke
Guillain-Barré syndrome
Severe Parkinson's disease
Tetanus
Prolonged total body immobilization
Ruptured cerebral aneurysm
Polyneuropathy
Closed head injury
Hemorrhagic shock with metabolic acidosis
Myopathies (eg, Duchenne's dystrophy)

ANSWER: D

In capnograph monitoring s all are true except one Select one:

- a. To confirm adequate ventilation
- b. Ventilatory control in high intracranial pressure
- c. Air embolism
- d. Major complication after neurosurgery
- e. Severe anemia

ANSWER: E

Ketamine except?

Bronchoconstriction

What is the drug that causes of delirium and hallucination as side effect ??

- Lidocaine
- Midazolam
- Propofol
- Ketamine

ANSWER:
KETAMINE

Whic is the following cause lactic acidosis:

- Ketamine
- Propofol
- Thiopental
- etomidate

ANSWER: B

ECG

2) In ECG the leads v1 v2 represent :

- a. Septal
- b. anterior wall
- c. lateral wall
- d. inferior wall

ans:a

4) Which of the following isn't represented in the ECG

- A. atrial depolarization
- b. ventricular repolarization
- c. atrial repolarization
- d. hyperkalemia



ans:c

11. Which is not a possibility in the ECG of a pt with hypokalemia?

Select one:

- a. prolong PR interval
- b. prominent U waves
- c. T wave flattening
- d. Prolonged QT interval
- e. T wave inversion in praecordial leads

ans:d

22. What is seen earliest in an ECG of hyperkalemia?

Select one:

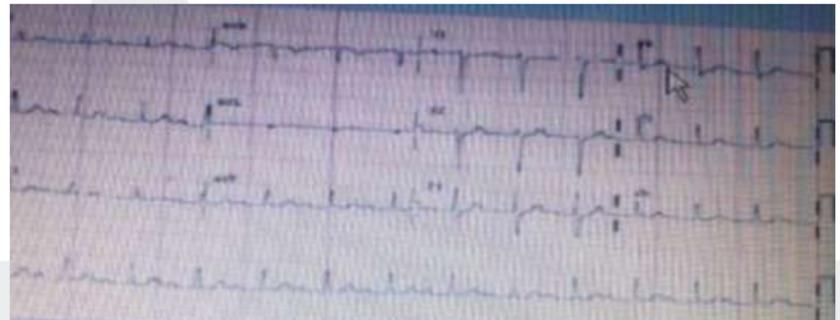
- a. Sine wave
- b. Peak T wave
- c. Flattened p wave
- d. QRS widening
- e. AV dissociation

Ans:b

What is the diagnosis?

Select one:

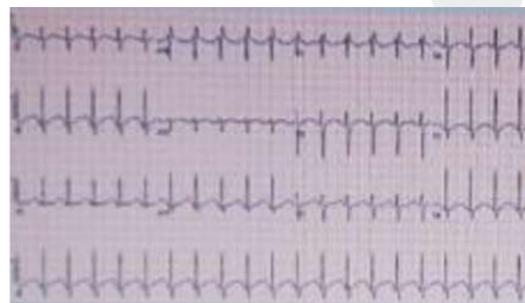
- a. atrial fibrillation
- b. First degree heart block
- c. Mobitz I
- d. anterolateral myocardial infarction
- e. Normal sinus rhythm



Ans:b

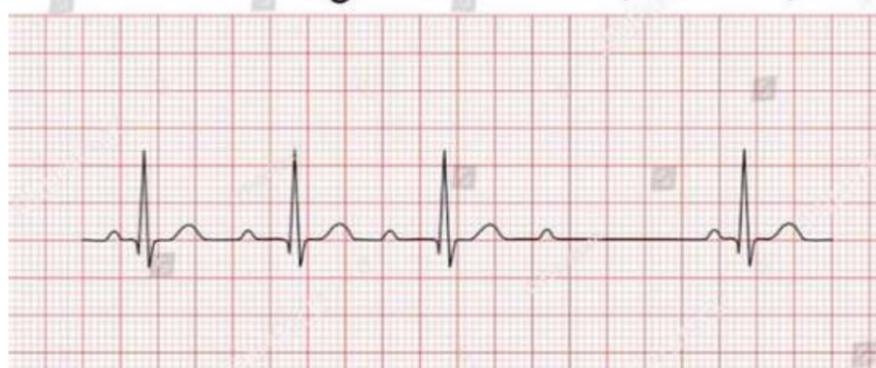
What is the diagnosis? Select one:

- a. atrial fibrillation
- b. lateral myocardial infarction
- c. anterior myocardial infarction
- d. anterolateral myocardial infarction
- e. Supraventricular tachycardia



Ans:e

Second degree AV block (Mobitz I)



BLOOD TRANSFUSION

Whole blood doesn't contain :

- a. Blood 350 ml
- b. anticoagulant 50 ml
- c. hematocrit 35-45 %
- d. HB 8g/do
- e. (RBC , platelet, WBC) 45%

Ans:d

cryoprecipitate contain the following factors expect :

- a. IX



what is the fluid used with administration of blood products ?

- a. N/S
- b. R/L
- c. D5W
- d. HES
- e. A and B

Ans:a(because it is isotonic and does not cause hemolysis or clotting.)

The normal blood volume of a 70kg adult male :

- a. 7% of body weight
- b. 10% of body weight
- c. 5% of body weight
- d. 12% of body weight

Ans:a

31 - ABO?

Incompatibility cause lysis

One thing we should consider in FFP transfusion :

Blood matching

- ABO compatibility is required for FFP transfusion.
- Rh matching is not required, since FFP does not contain RBCs.)



اجتهد بما تستطيع، واعلم أن الله لا يطالبك بالكمال، بل ببذل الجهد ضمن طاقتك، والسعي والاختيار هما دورك، والنتائج بيد الله، فسلم للقدر بعد أن تبذل وسعك، لا تجعل تأنيب النفس يستهلك طاقتك؛ بل استغفر الله عن أي تقصير، واستمر في طريقك، واستعن بحسن الظن بالله تعالى، وأكثر من الدعاء والتضرع إلى الله أن يشرح صدرك، ويذهب عنك العجز ومكائد الشيطان.

سبحانك اللهم وبحمدك نشهد أن لا إله إلا أنت نستغفرك ونتوب إليك
نحمد لله على تمام أراشيف سنة رابعة

وفقكم الله وأتمها على خير
لا تنسوا الفريق من دعائكم
يوم السبت ١٤-٦-٢٠٢٥