

ANAESTHESIOLOGY

PAPER – IV

Time : 3 Hours
Max. Marks : 100

ANS/D/17/01/IV

IMPORTANT INSTRUCTIONS

- This question paper consists of 10 questions divided into Part “A” and part ‘B’, each part containing 5 questions.
- Answers to question 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 questions of Part A attempted in answer sheet(s) of part B or Vice versa shall not be evaluated.
- Answer sheet(s) 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. a) What are the indications of percutaneous dilatational tracheostomy and what are its advantages over surgical tracheostomy? (4+2)+4
b) What is Trans-nasal Humidified Rapid Insufflation Ventilator Exchange (THRIVE)?
2. a) Enumerate the methods of labour analgesia. 4+3+(2+1)
b) What is the monitoring required during epidural labor analgesia?
c) Advantages & disadvantages of fentanyl in central neuraxial block for labour analgesia.
3. a) What is Beer-Lambert law? 2+4+4
b) Enumerate the limitations of pulse oxymetry.
c) What is arterial oxygen content (CaO₂)?
4. a) Pharmacodynamics of dexmedetomidine. 4+3+3
b) Role of dexmedetomidine in critically ill patients.
c) Compare dexmedetomidine with clonidine.
5. a) Define anion gap and enumerate the factors which increase the anion gap. (2+3)+5
b) Enumerate the 5 H's & 5 T's for differential diagnosis during resuscitation.

P.T.O