

ANAESTHESIOLOGY
PAPER-IITIME: 3 HOURS
MAX. MARKS: 100

ANS/J/20/01/II

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

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

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| 6. | 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. | 5+5 |
| 7. | A 70-year-old frail female is posted for emergency neck femur. 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. | 4+6 |
| 8. | a) Massive blood transfusion protocol.
b) Chronological changes in stored blood. | 5+5 |
| 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. | 5+5 |
| 10. | Discuss the possible complications associated with prone positioning in a 40-year male undergoing lumbar discectomy. | 10 |
