

Candidate number _____

**PRACTICE SAQ PAPER 2017.2
DECEMBER 2017**

BOOK TWO

QUESTION 10 DOUBLE QUESTION (20 marks)

A 62 year old man is brought to ED having been found asleep in the garden in the sun. He is agitated, combative, with no focal neurology or signs of trauma.

Vital signs Temp 41 deg Celsius
 P 118 bpm
 BP 90/40 mmHg
 RR 20 bpm
 SaO2 98% RA
 GCS 14 (E4V4M6)

- i. List 4 possible diagnoses starting with the most likely (4 marks)

- ii. List 3 separate heat related illnesses and their diagnostic criteria/main clinical findings (6 marks)

iii. List 3 potential ways of cooling this patient and 1 pro and con of each (6 marks)

iv. List 4 potential complications of this condition from separate organ systems (4 marks)

QUESTION 11 (14 marks)

You are interested in establishing an in-situ simulation program in your tertiary Emergency Department.

- i. List 3 components of your pre-brief (i.e. before participants enter the scenario) that create a “safe learning environment” for participants in in-situ simulation. (3 marks)

- ii. Outline 3 key components of your framework for debriefing a simulation scenario (3 marks)

- iii. Identify 4 potential barriers or risks to running in-situ simulation and a mitigating solution for each barrier (8 marks)

Potential Barrier/Risk	Solution

QUESTION 12 (16 marks)

A 25 year old man presents 6 hours after a SCUBA dive with a possible decompression sickness (DCS)

- i. List 6 questions specific to diving that you should ask in your history (6 marks)

- ii. Complete the table listing 3 symptoms or signs of DCS in each category (6 marks)

Category	Symptom/Sign
Neurological	
Other	

iii. Complete the table contrasting DCS and Arterial Gas Embolism (AGE) (4 marks)

	DCS	AGE
Pathophysiology		
Time of onset		

QUESTION 13 (16 marks)

A 42 year old man has developed a febrile illness one week after returning from a business trip to Papua New Guinea.

- i. What questions specific to this case should form part of the history that you will obtain? (6 marks)

- ii. Describe how the diagnosis of malaria can be established (3 marks)

- iii. Plasmodium falciparum has several characteristics that are markedly different to the other Plasmodia species. Briefly describe 3 differences (3 marks)

- iv. List 4 complications that occur in severe P falciparum infection (4 marks)

QUESTION 14 (16 Marks)

A 62 year-old man is brought to your ED after an assault during a home invasion. He has been stabbed in the anterior right side of neck and was pushed down a steep flight of stairs with possible head and neck injuries due to the fall.

Initial assessment:

GCS	10; combative
HR	125 per minute
BP	105/65 mmHg
Head:	Right parietal large boggy swelling
Neck:	Wound at right side of anterior neck, extends from medial aspect of clavicle to level of cricoid, extensive haemorrhage

- i. List 5 immediate management priorities? (5 marks)

- ii. List 3 potential harmful effects of hard collar use in this patient (3 marks)

- iii. List 4 clinical features which would suggest this patient has a critical vascular injury (4 marks)

- iv. Given his mechanism of injury you are concerned he may have sustained an acute cord injury. List 2 possible acute spinal cord syndromes in this case and identify 2 associated clinical findings (4 marks)

Acute Cord Syndrome	Clinical Finding

QUESTION 15 (15 marks)

An elderly lady is brought to your ED by ambulance. She was found by a neighbour in her back yard.

Vital signs: GCS 9 (E3V3M3)
BP 90/50 mmHg
HR 45 bpm
SaO2 90% (8L/min Hudson)
Temp 27 deg celsius (oral and rectal)

- i. List possible complications of her hypothermia on four organ systems (4 marks)

- ii. After one hour, the patient remains GCS 9 and temp 29 degrees despite initial treatment. You decide to perform a CT brain. List 3 pros and 3 cons of intubating prior to CT (6 marks)

- iii. The patient develops ventricular fibrillation. List five ways in which your approach to this resuscitation differs from standard ALS principles (5 marks)

QUESTION 16 (16 marks)

A 29 year old male is brought in by ambulance after a collapse at work. He is a machine operator at a nearby 24 hour factory. Colleagues report he collapsed to the ground whilst working. He was unresponsive and jerking all limbs for a brief period. His level of consciousness has improved on transport to ED.

Vital signs GCS 15
 HR 90 bpm
 BP 126/84 mmHg
 Temp 37.5 deg C
 SaO2 100% (6L/min Hudson)

- i. List four possible causes for his collapse (4 marks)

- ii. List four features on history and examination that may suggest that this is a seizure rather than another cause for collapse (4 marks)

iii. List four reasons why you would order an urgent CT brain (4 marks)

iv. Describe four considerations in determining that this man is fit for discharge home (4 marks)

QUESTION 17 (15 marks)

Pre-hospital bypass of smaller centres directly to designated trauma centres is routine practice in many metropolitan environments

- i. List the criteria used by paramedics to determine which trauma patients should bypass smaller centres (6 marks)

- ii. Describe the main difficulty arising from the inclusion of mechanism of injury as part of a triage tool (2 marks)

- iii. List 2 advantages and 2 disadvantages of trauma bypass (4 marks)

- iv. A long distance to reach a major trauma service requires paramedics to manage patients en route. In what circumstances does the evidence support “permissive hypotension” in the pre-hospital setting? (3 marks)

QUESTION 18 (16 marks)

A 17 year old male is brought your district ED by his nurse mother after feeling dizzy and unwell and appearing 'pale' on the football field. He was reluctant to attend as he felt 'fine'. Presenting blood pressure 115/60. Saturations 99% on room air. RR 14. Afebrile. Triage ECG performed.

- i. Describe and interpret his ECG (5 marks) **SEE PROPS BOOKLET – IMAGE G**

- ii. List up to 5 questions you would like to ask on history, regarding symptoms (5 marks)

- iii. List and justify up to 3 initial investigations you would like to perform (3 marks)

- iv. Prior to any further investigation, he tells you he wants to discharge against your advice. List your management priorities now (3 marks)
