

SAQ Mar 2012

General Advice from someone is yet to know whether they passed:

- They continue to repeat questions so do all the previous exams on EMREVISION
 - There are 2 books to read and memorise - Oxford Handbook of Emergency Medicine (4th ed) and Mastering Emergency Medicine- A practical guide by Trivedy, Hall and Parfitt
1. Anaphylaxis. Picture of a hand with some sort of 'barb' from a bee sting. First action? ? remove the barb. Questions about pathophysiology , adrenaline, other drugs
 2. Regional anaesthesia- nerves supplying the foot for ankle blocks
 3. 45 male with left loin pain and sob. Not sure and neither were colleagues at the pub after the exam. On reflection may be been hypercalcemia with 2ndry renal calculus
 4. Croup. Straight from oxfords. Rx, DDX, 5 marks for listing Westley criteria (didn't require scoring- in fact no questions on the paper required the scoring of tools)
 5. Upper GI bleed. Need to know SIGN guidelines pretty well. Rockall criteria, indications for PPI, treatments proven to work. DDx of non-traumatic upper GI bleeding (excluding varices)
 6. Inferior / RV infarct – Rx , Fluids, a pathophys question regarding chance of APO. I said patient needed fluids and APO more likely with LV dysfunction
 7. HIV / AIDS question. RML consolidation. Other GI conditions seen in HIV (but not AIDS definining). NICE guidelines about 'near patient testing of HIV'
 8. Limping child. DDX (NICE TODI ddx) . Problem was with foot. ? 2 small #s in the metatarsals. Required diagnosis and management. Not sure ? osteogenesis imperfecta. ???
 9. Calculate anion gap in a patient with metabolic acidosis. Don't think it was raised. Can't remember much else about the question
 10. Old lady with Hyponatremia. Patient had SIADH. Comment on the urine and serum sodium and osmolality. Causes of SIADH (lungs, brain, drugs). Treatment.

11. TCA overdose. The same questions repeated for the hundredth time. (The college really loves TCAs!!!). ECG changes, Treatment, how do you know treatment is working, other medications (benzos etc)
12. Facial droop. Which bug MAY cause this? I said *Borrelia burgdorferi* and had Ramsay Hunt as a differential (tossed up reversing this to Zoster as the bug and Lyme disease as the ddx. I believe both answers are right..... I hope). Stuff about eye protection and other treatments
13. Rash- HSP. DDX (meningococemia, ITP), Treatment. Questions about platelets. How much does 1 pack of platelets raise the platelet count. How low can an adult's platelets get before needing transfusion.
14. Some question about MMR. Need to know the vaccination schedule of measles in the UK (Why would any ED doc memorise this?????). list 6 other notifiable diseases. Some other ID questions.
15. Dermatology questions about female with red, excoriated hands. ? diagnosis. Didn't look like Nikolsky positive. I said Stevens Johnson, others at the pub Staph scaled skin syndrome. DDX of other derm conditions affecting hands and feet ? contact dermatitis.
16. Young male with right facial swelling. Presumed dx of mumps. What other things can be affected by mumps? DDX of facial swelling.
17. Trauma question. Patient had fallen from a height. ? abnormalities on xray- # ribs, right haemothorax / pulmonary contusions. Patient is intubated. What drugs for intubation? Patient remains hypoxic after successful intubation. Why? ? ARDS, barotrauma and tension pneumo. I think he had a priapism and there were questions about pathophysiology of this and spinal cord injuries.
18. Thyroid storm in a patient with hyperthyroidism. ? causes of the storm (surgery). Immediate management. Drugs to be used and mechanism. I said propranolol, PTU, Hydrocortisone. I talked about inhibiting T4 release from thyroid and conversion of T4 to T3 peripherally.
19. Old bloke with hand xray. Grossly deformed MCP joints. I assumed Rheumatoid Arthritis. Which tests confirm diagnosis. Treatment to be started in ED. ?? ED question. For LMO follow up and maybe commence medication in discussion with rheumatologist
20. Pregnant patient with Pre-eclampsia and HELLP (had to diagnose this) Name and drug and route to reduce BP. Strange question about what drugs would you give to prevent complications.

