

SAQs October 2010

ONE

This 60yrs female presents to ED. She says she has been feeling increasing tired and generally unwell for the last 2 weeks, thinks she may have lost some weight. Over the last few days she noted that her skin became discoloured.



UEs Na 142
K 4.2
Urea 8.4
Creatinine 97

LFTS T Prot 46
Alb 41
Bilirubin 75
Alk Phos 470
ALT 150

Give most likely diagnosis and explain blood results

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List 5 questions in the history and how they would aid diagnosis

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List the 3 investigations you would arrange first

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TWO

20yrs male presents with right eye redness and pain and ?foreign body in his eye from work today

List 5 questions you would want to ask him in the history

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List 2 tests you will arrange

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List 3 treatments in ED

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THREE

22yrs male presents with penile discharge to ED, it's Friday afternoon and the GUM clinic will not open until Monday morning.

4 questions you would like to ask in the history

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List 2 investigations you will do in the ED

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Name 2 common bacterial STIs and their treatment

Bacteria	Treatment
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FOUR

STANDBY CALL mother en route 38wks pregnant, about to deliver baby

You have 5 minutes to prepare the resus area

List 4 extra pieces of equipment needed (not including resus drugs / fluids)

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The baby is born immediately in resus as the woman arrives

Describe how will you assess the neonate?

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Describe cardiac massage technique in a neonate and the compression/ventilation ratio

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List 2 drugs you might give in neonatal resus and doses

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FIVE

8 yrs male presents fall off push bike today and now has painful swollen left knee, unable to weight bear.



Describe this xray

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What other soft tissue injuries in the knee are commonly associated with this bony injury?

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What management steps are required?

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Describe how to perform a knee aspiration include landmarks

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SIX

You receive a standby call for an adult male patient, paramedics believe he is severely hypothermic, cardiac arrest has occurred in the ambulance en route to ED. ETA 8 minutes.

How will you prepare the resus area? – what extra equipment will you need?

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How will you alter your standard ALS protocol for resuscitation in hypothermia?

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SEVEN

18yrs African male with sickle cell disease presents with sustained painful erection

What is the immediate management required in ED?

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What is the most likely cause of this? describe the pathophysiology

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What other treatments are required ?

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List 3 alternative causes for priapism

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EIGHT

Your SHO asks for advice in resus. 21yrs female body builder brought from night club, paramedics report ?drug overdose of amphetamines and GHB. She has reduced GCS 6 and large pupils.
The patient's urine output is shown below.



What is the most likely cause for (a) the reduced GCS and (b) for the dark urine?

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What electrolyte would you like to check before commencing treatment and explain why?

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What will be your ongoing treatment plan in the resus area ?

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What will be the most likely clinical course in this overdose?

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NINE

A 25yrs male presents to ED with sharp retrosternal chest pains and mild pyrexia. ECG suggests pericarditis.

List 5 questions to include in your history

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What other tests will you do in the ED?

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List 3 viral causes of pericarditis.

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TEN

You get a standby call that a chemical spill of a ? unknown compound containing chlorine has occurred from a lorry on the local motorway.

Major incident is declared, you are to expect three P1 patients and two P2 patients.

At the scene how do you get more info about the chemical and its hazards?

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Working in ED, who do you contact first?

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What are your priorities in preparing the department?

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Casualties start to arrive. What does "P2" mean?

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What are the common clinical features of Chlorine poisoning?

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What is the management of Chlorine poisoning?

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ELEVEN

Your SHO asks for your help in assessing a 62yrs female who has apparently taken a large paracetamol overdose many hours ago. She appears confused now and is trying to leave the department.

Describe the intravenous drug treatment regime for paracetamol overdose including doses and timing.

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How would you assess her capacity?

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You believe that she does not have capacity, what will you do now?

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TWELVE

Your SHO asks for advice. A 50yrs female has presented following a ?collapse ?fall and in now increasingly confused . She has a minor abrasion to her forehead only.

You have the following blood/urine results thus far

Glucose 6.4

Na 115

K 4.2

Urea 7.8

Creatinine 102

Hb 13.1

WCC 12.2

Plt 175

Urine Osmolality 325

Urine Na 24

What are the potential causes for her confusion?

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What 3 further investigations will you arrange now in ED?

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List 4 intracranial causes for this blood picture?

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THIRTEEN

14yrs female presents with vomiting and abdominal pain and the following blood results

Na 133
K 5.0
Urea 13.3
Creatinine 150
Glucose 39.5
Chloride 93
Bicarb 9
Hb 14.0
WCC 10.0
Plts 175

What is the diagnosis?

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Calculate the anion gap (show your calculations)

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Give 4 non-drug related causes for this anion gap. (1/2 each)

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Write a fluid chart for the next 8 hours for this patient

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Name 2 complications of this clinical presentation.

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FOURTEEN



What is this device ?

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Describe 2 clinical situations when you might consider using this device in ED?

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How can you confirm the placement of this device?

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What are the limitations of this device?

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Describe clinical situations when this device would be inappropriate / contraindicated.

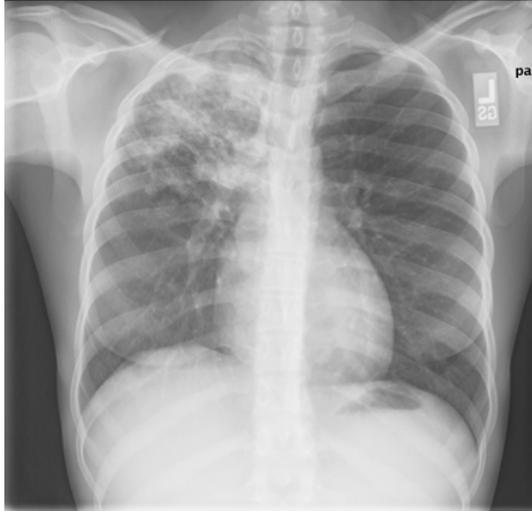
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FIFTEEN

A 32yrs homeless female presents with a dry cough and intermittent mild fever and one episode of fresh haemoptysis today.



Describe this CXR.

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List 4 potential causes for her presentation and CXR findings.

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List 4 investigations that you will arrange to confirm the diagnosis

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SIXTEEN

A 22yrs female medical student is brought in by ambulance following a prolonged seizure at home. She has recently returned from her elective in Malawi. Her student friends are unsure if she took any of her medications because they gave her nightmares. She is now drowsy and confused with a temperature of 38.9.

What is the most likely diagnosis?

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Name the most likely causative organism

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What diagnostic tests will you arrange immediately?

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List 4 differential diagnoses

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What would be your immediate treatment in the ED?

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SEVENTEEN

A 6yrs female has tripped on the street and knocked out one of her front teeth. She has been brought into ED by her mum.

Identify 6 points in the history you would elicit

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You discuss your management plan with mother

(a) What will you recommend if the tooth was deciduous ?

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(b) What will you recommend if the tooth was permanent?

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EIGHTEEN

A 30yrs female who is usually well presents with a rash on her forehead



What is the most likely diagnosis?

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Name the causative organism

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Outline the treatment of this condition (include drug doses)

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The patient tells you that she is 26 weeks pregnant, what will you ask /advise her?

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She also has a 2 week old niece. What will you advise her regards infectivity to this neonate?

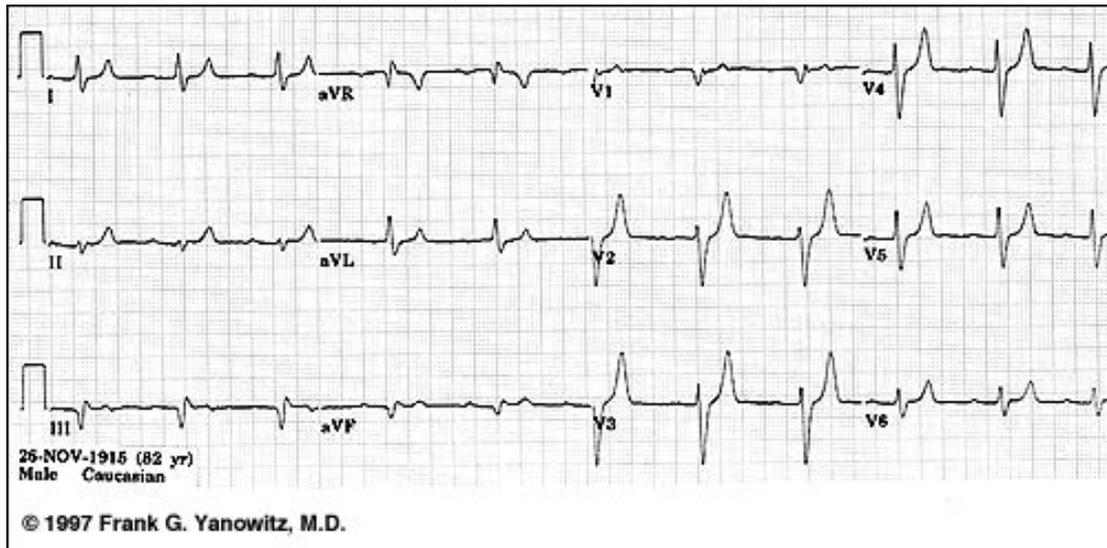
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NINETEEN

82yrs male renal dialysis patient presents with increasing lethargy and nausea.

Venous blood gas reveals serum potassium 6.7



Describe this ECG

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List 4 other ECG changes that can occur in hyperkalaemia

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Describe the emergency treatment of this patient (for drugs include doses)

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TWENTY

A 35yrs female presents to ED, she is pyrexial, tachycardic and hypotensive. She had her first dose of chemotherapy treatment for breast cancer 10 days ago.

Describe how you would take a venous blood culture

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Define septic shock

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What antibiotics will you use to treat her, give doses and explain your rationale.

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