

### Critical care stations

- 1) Burns – see example
- 2) Hypothermia – how categorise? why cold in theatre? Risks assoc with massive blood transfusion? Qs on blood products. Interpret blood results – clotting, Hb.
- 3) CVP – draw Starlings law, describe features on CXR (lines, ?ARDS features), Qs on fluid challenge and response of CVP. Risks of line insertion
- 4) Sepsis and Hypotension - Elderly lady with diverticular abscess has a systolic of 90mmHg what is your initial management? Definition of SIRS, shock etc. Broad principles of management of sepsis.
- 5) ECG/cardiac issues - Patient has had MI 6m ago, what is the risk of re-infarct if surgery done <3m post MI? Interpret ECG (ST elevation!) what does it show? How do you interpret an ECG? What to do with patient on clopidogrel post-stenting. What are alternatives to clopidogrel? Who would you discuss this patient with?
- 6) acute pancreatitis – asking various questions such as what scoring systems, ct scan image shown – asked what it showed, gave some ABG data and asked regarding interpretation of this.
- 7) Post-op hypotension - a scenario of patient coming back from theatre after THR, was hypotensive and hypothermic, asked various questions regarding fluid management, causes of hypotension, escalation of care to HDU. ETC.
- 8) Trauma - young man comes on following RTA. How will you institute initial management? (ABCDE etc.). He is hypotensive, tachycardic - what degree of shock is he in? You order a CXR - what does it show? (haemopneumothorax). how will you manage this? (chest drain). you then get a CT abdo pelvis. what does it show? (liver laceration). how can you manage this? (operative/conservative). in what setting should the patient be managed in? (ITU)