

Government Medical College and Hospital Sector 32, Chandigarh

Post: Senior Resident Anesthesiology and Resident Anaesthetist

QUESTION BOOKLET

Time: 120 Minutes

Number of Question: 100

Maximum Marks: 100

Name of Candidate

Roll Number: In figure

In Words

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Signature of the Candidate: _____

DO NOT OPEN THE SEAL ON THE BOOKLET UNTIL ASKED TO DO SO

INSTRUCTIONS:-

1. Write your Roll Number on the Question Booklet and also on the OMR Sheet in the space provided. You will be required to give your thumb impression on the OMR sheet in the space provided.
2. This question booklet contains 100 MCQ's. Once you are permitted to open the Question Booklet, please check for any missing question / misprint etc. and in case of any discrepancy, inform the Assistant Superintendent / Invigilator within 10 minutes of the start of the test.
3. Each question has four alternative answer (A, B, C, D) out of which only one is correct. For each question, **darken only one bubble (A or B or C or D)**, whichever you think is the correct answer, on the OMR Answer sheet **with Black or Blue Ball Pen only**. Do not use any other Pen / Gel pen / Pencil etc. **Do not Tick \checkmark or \times on the OMR Sheet**. Darken the bubbles in the OMR Answer Sheet according to the Serial No. of the Questions given in the Question Booklet.
4. Each MCQ is of One (01) mark. There is no negative marking.
5. If you do not want to answer a question, leave all the bubbles corresponding to that question blank in the OMR Answer sheet.
6. The OMR Answer sheet is designed for computer evaluation. Therefore, if you do not follow the instructions given, it may make evaluation by the computer difficult. Any resultant loss to the candidates on the above account, i.e. not following instructions completely and properly, shall be the responsibility of the candidates only.
7. After the test, handover the Question Booklet and OMR sheet to the Invigilator on duty.
8. A Candidate who creates disturbance of any kind or changes his/her seat or is found in possession of any paper or the any assistance or found giving or receiving assistance or found using any other unfair means during the examination will be expelled from the examination by the Centre superintendent/Observer whose decision shall be final.
9. Telecommunication equipment such as pager, cellular phone, wireless, scanner, smart watch/ watch etc. is not permitted inside the examination hall. Use of calculators is not allowed.
10. Candidate should ensure accuracy of their personal details on the OMR Sheet i.e. Name and Roll No. as well as thumb impression. The personal details are to be filled in by the candidates with his/her own hand writing.

1. All of the following are the cause of different dose in regional anaesthesia in children EXCEPT
 - A. Immaturity of enzyme
 - B. Increase in body surface area
 - C. Increased CSF volume around spinal cord
 - D. Delayed ossification of bones
2. The dose for defibrillation in ventricular fibrillation is
 - A. 1J/kg
 - B. 2J/kg
 - C. 3J/kg
 - D. 5J/kg
3. What is the appropriate test dose for epidural in a 20 kg child?
 - A. 5 mcg epinephrine
 - B. 10 mcg epinephrine
 - C. 15 mcg epinephrine
 - D. 20 mcg epinephrine
4. The portion of the infant airway with the smallest cross-sectional area occurs at the level of the
 - A. Cricoid cartilage
 - B. False vocal cords
 - C. True vocal cords
 - D. Thoracic inlet
5. Compared with adults, neonates are more likely to become hypoxemic following anesthesia and extubation because of a relatively
 - A. Higher rate of oxygen consumption
 - B. Greater sensitivity to neuromuscular blockade
 - C. Larger Vd / Vt ratio
 - D. Smaller functional residual capacity
6. Which of the following results in the greatest increase in right-to-left shunting in an infant with cyanotic heart disease?
 - A. Decreased pulmonary vascular resistance
 - B. Decreased systemic vascular resistance
 - C. Hemo-dilution
 - D. Increased heart rate
7. What is the dose of oral midazolam for premedication?
 - A. 0.2mg/kg
 - B. 0.5mg/kg
 - C. 1 mg/kg
 - D. 5 mg/kg
8. Which of the following inducing drugs will you avoid in a child of hydrocephalus who is drowsy with irregular breathing?
 - A. Fentanyl
 - B. Propofol
 - C. Thiopentone
 - D. Ketamine
9. Age adjusted MAC is highest in sevoflurane for which age group?
 - A. Neonate
 - B. Infant
 - C. Toddler
 - D. Teenager
10. Which of the following scales is used for assessing emergence delirium?
 - A. FLACC
 - B. Wong Baker
 - C. PAEDS
 - D. RASS
11. Which of the following is considered chronic pain-choose correct answer
 - A. Pain \geq 3 months
 - B. Pain between 6-9 months
 - C. Pain More than a year.
 - D. Pain between 1-3 months
12. The biopsychosocial model - choose the correct answer.
 - A. Cannot be applicable for chronic pain patients
 - B. Used for psychiatric patients only
 - C. Useful in acute pain patients only
 - D. None of the above

13. The prevalence of chronic pain amongst US populations is- **choose correct answer**

- A. 10%
- B. 30%
- C. 21%
- D. 46 %

14. In chronic pain- **choose incorrect statement**

- A. Neuroplastic changes in brain can enhance survival of patient
- B. Cognitive behavioral therapy is one of its managements
- C. WHO 3 step ladder is useful for cancer pain
- D. Multidisciplinary management is least advisable

15. Allodynia is: **Choose incorrect answer.**

- A. When non painful stimulus starts causing pain
- B. When a painful stimulus causes more pain
- C. When non painful stimulus produces paresthesia's
- D. Hall mark for neuropathic pain

16. Use of fluoroscope during intervention-**choose incorrect answer.**

- A. Provide surrogate markers for chronic pain intervention targets.
- B. Bony landmarks are poorly visible with fluoroscopes during interventional pain management.
- C. Ionizing radiations are problem.
- D. Can be helpful sometimes when used in combo with ultrasound techniques

17. Advantages of ultrasound guidance (USG) for intervention in chronic pain include- **choose incorrect answer**

- A. Real time assessment of tissue
- B. Less dose of local anesthetic required for nerve blocks.
- C. USG can identify abnormal anatomy.
- D. Nerve tissue appear hyperechoic and easily identified

18. Management of chronic pain involves- **choose correct answer**

- A. Exercise and non-Pharmacological interventions
- B. Pharmacological interventions
- C. Interventional therapy
- D. All the above

19. Central sensitization pain- **choose incorrect answer.**

- A. Is seen in acute pain patients only.
- B. Is due to enhancement in nociception neuronal circuit functions.
- C. Responsible for pain hypersensitivity
- D. Can be decreased with pain management

20. Character of neuropathic pain include all the followings EXCEPT- **choose incorrect answer**

- A. Burning
- B. Aching
- C. Shooting
- D. Allodynia

21. Which of the following fibers carry pain sensation?

- A. A-alpha and C fibers
- B. A-Beta and C fibers
- C. A-delta and C fibers
- D. A-gamma and C fibers

22. The nerve supply during first stage of labour is

- A. T 9- L3
- B. T 10- L1
- C. T 10- L2
- D. T 9- L3

23. Which of the following statements **does not include** aims of Palliative care?

- A. Improves quality of life
- B. Hastens death
- C. Relief of symptoms
- D. Impeccable assessment

24. The updated WHO analgesic ladder includes which parameter

- A. Unidirectional
- B. Only treats acute pain
- C. For acute pain the strongest analgesic is the initial therapy and later toned down
- D. Has three steps of pain with analgesics

25. Pain is initiated when specialized nerves called _____ are activated in response to adverse chemical, thermal, or mechanical stimulus. **Choose the best answer**

- A. C fibers
- B. Alpha fibers
- C. Large nerves
- D. Nociceptors

26. Oral morphine tablet in cancer pain gets absorbed in

- A. Stomach and Duodenum
- B. Small intestine
- C. Large intestine
- D. Colon

27. Active form of morphine is

- A. Morphine -3- glucuronide
- B. Morphine -6- glucuronide
- C. Morphine – glucuronide
- D. None of the above

28. Which of the following is not a preferred choice for managing dyspnea in palliative care

- A. Prop up position and calm surroundings
- B. Fan towards the patient
- C. Slow breathing with oxygen
- D. Invasive ventilation

29. The number needed to treat for oral Diclofenac 100 mg is

- A. 1.6-2.2
- B. 2.4-3.3
- C. 2.6-4.9
- D. 3.2-5.6

30. Which is the following being the most appropriate level of epidural insertion site for postoperative analgesia in patient undergoing thoracotomy

- A. T4-T8
- B. T6-T8
- C. T7-T10
- D. T8-T11

31. Regarding medical ultrasound, which is **not true**:

- A. ultrasound is a form of pressure wave
- B. the frequency of ultrasound is between 20 Hz and 20,000 Hz
- C. the speed of ultrasound is 1540 m/s
- D. the Doppler shift is a change in wavelength when either the source of the ultrasound or the detector is moving

32. Likely causes of severely damped radial artery blood pressure trace include all EXCEPT :

- A. Malfunctioning of the continuous flushing system
- B. A bubble in the connecting tubing
- C. More than one stopcock included in the connecting tubing
- D. The use of a 20-gauge arterial cannula

33. The functions of Phosphodiesterase inhibitors are all EXCEPT

- A. Prevent breakdown of cAMP to 5'AMP
- B. Reduce afterload
- C. Increase myocardial contractility
- D. Significantly increase survival in ischaemic heart disease

34. A 64-year-old patient with an axial flow left ventricular assist device is scheduled for laparoscopic cholecystectomy under general anesthesia. Monitoring of which of the following is likely to be difficult in this patient?

- A. Blood pressure with blood pressure cuff
- B. Blood pressure with arterial line
- C. PA pressure with PA catheter
- D. Temperature with oesophageal temperature probe

35. Cardiac tamponade is associated with :

- A. Pulsus alternans
- B. Pulsus tardus
- C. Pulsus parvus
- D. Pulsus paradoxus

36. By what percentage is tissue metabolic rate reduced during cardiopulmonary bypass at 30° C?

- A. 10%
- B. 25%
- C. 50%
- D. 75%

37. In the Fetal circulation the

- A. Blood can flow from the inferior vena cava to the aorta without passing through the left atrium or left ventricle
- B. Ductus arteriosus carries blood with a higher oxygenation saturation than the ductus venosus
- C. Blood in the descending aorta is better oxygenated than blood in the arch of aorta
- D. Closure of the ductus arteriosus is due to increased pulmonary artery pressure at birth

38. Errors in measuring cardiac output by thermal dilution may occur

- A. If the injectate is delivered steadily into right atrium
- B. If the injectate is at room temperature
- C. If the injection is repeated at different phases of the ventilation cycle
- D. In the presence of atrial fibrillation

39. Useful therapy for hypercyanotic spell in patients with tetralogy of Fallot might include any of the following EXCEPT

- A. Esmolol
- B. Morphine
- C. Phenylephrine
- D. Isoproterenol

40. The effects of a arteriovenous fistula on inhalation induction of anaesthesia is to

- A. Speed up induction
- B. Slow down induction
- C. Slow down induction only if an intra-cardiac right to left shunt also exists
- D. Speed up inhalation induction only if an intracardiac right to left shunt also exists.

41. A 32-year-old patient is anesthetized for resection of a supratentorial tumour. Preoperatively, the patient is lethargic and disoriented. Which of the following is MOST likely to adversely alter ICP?

- A. 5% Dextrose in water
- B. Normal saline
- C. Lactated Ringer solution
- D. 5% Albumin

42. NIV is indicated in

- A. Asthma
- B. Do not resuscitate
- C. Hypoxemia
- D. All of the Above

43. Typical heparin induced thrombocytopenia (HIT) occurs after following days of starting heparin

- A. 1-2
- B. 4-10
- C. 21-28
- D. >28file used to describe acutely decompensated heart failure

44. All of the following are clinical criteria consistent with a diagnosis of brain death in a patient EXCEPT

- A. Persistent apnoea for 10 minutes
- B. Absence of pupillary light reflex
- C. Persistent spinal reflexes
- D. Decorticate posturing

45. Sudden fall in respiratory compliance seen with all EXCEPT

- A. Lung collapse
- B. Bronchospasm
- C. Pneumothorax
- D. Pleural effusion

46. Perioperative atelectasis can be made out in ICU with help of following EXCEPT

- A. Plain radiograph
- B. HRCT
- C. Lung ultrasound
- D. Pulmonary function test

47. Which of the following intervention/drug has proven benefit in management of traumatic brain injury

- A. Therapeutic hypothermia
- B. ICP monitoring and its treatment
- C. Magnesium sulphate
- D. Erythropoietin

48. Which of the following is Gold standard for caloric assessment

- A. Indirect calorimetry
- B. Harris Benedict formula
- C. Calculation of BMI
- D. Ideal body weight

49. Type of anaemia in CKD patients

- A. Normocytic normochromia
- B. Microcytic hypochromic
- C. Macrocytic
- D. Haemolytic

50. Aminoglycoside with least toxicity is

- A. Gentamicin
- B. Streptomycin
- C. Netilmycin
- D. Tobramycin

51. Which of these regarding The Magill (Mapleson A) breathing system is false:

- A. Is the most efficient system for spontaneously breathing patients
- B. Will work with minimal rebreathing at a fresh gas flow of 70% of minute volume
- C. Co-axial version is the lack system
- D. Is also efficient during controlled ventilation

52. Regarding acid-base balance false statement is

- A. Chronic obstructive airways disease patients have high serum bicarbonate levels
- B. The normal anion gap is 20-25 mmol/l
- C. Mixed venous pH is always lower than arterial ph
- D. The pKa for bicarbonate buffer is 6.1

53. Morphine related false statement is

- A. 10-30% of oral morphine reaches the systemic circulation
- B. Has a terminal half-life of approximately 3 hours
- C. Has morphine-3-glucuronide as principal metabolite
- D. Morphine-6-glucuronide has no analgesic effect

54. Regarding the pharmacokinetics of volatile agents **false statement** is:

- A. Blood/gas partition coefficient of desflurane is 0.69
- B. Sevoflurane can be used for inhalational induction in adults
- C. Inspired concentration influences the rate at which alveolar concentration is attained
- D. Alveolar concentration during recovery decreases more slowly after prolonged anaesthesia

55. O₂ requirement for a 70-kg adult is

- A. 150 mL/min
- B. 250 mL/min
- C. 350 mL/min
- D. 450 mL/min

56. In the diagnosis of brain death **true statement** is:

- A. Lack of EEG activity is essential
- B. Caloric tests must be performed bilaterally
- C. The admitting consultant must certify death
- D. Lack of stretch reflexes in all limbs is essential

57. Hyperventilation throughout general anaesthesia results in:

- A. Increased anaesthetic requirements
- B. Shift of the oxygen dissociation curve to the right
- C. Increased arterial to venous pO₂ difference
- D. Reduced renal blood flow

58. In patients with haemorrhagic shock **false statement** is:

- A. Renal blood flow is decreased
- B. Antidiuretic hormone secretion is increased
- C. The oxygen dissociation curve is shifted to the left
- D. O₂ delivery is decreased

59. The recurrent laryngeal nerve supplies:

- A. Sensation below the cords
- B. The intrinsic muscles of the pharynx
- C. The cricothyroid muscle
- D. The inferior constrictor muscle

60. Concerning local anaesthetics:

- A. They are absorbed more rapidly after intercostal block than after caudal administration
- B. In the foetus they are able to cross the placenta as readily as from the mother
- C. Those which are esters are rapidly metabolised by liver enzymes
- D. pK_a is the pH at which more than half of a local anaesthetic exists in non-ionised form

61. Catheter incision – congruent analgesia results in:

- A. Increased pain
- B. Early removal of the epidural catheter
- C. Inferior analgesia and side effects
- D. Superior analgesia and less side effects

62. An oral surgeon is about to perform a full mouth extraction on a 70-kg, 63-year-old man under conscious sedation. What is the maximum dose of lidocaine with epinephrine that he can safely infiltrate?

- A. 200 mg
- B. 300 mg
- C. 400 mg
- D. 500 mg

63. When preparing to place a thoracic epidural, you palpate the inferior border of the scapula. This landmark corresponds to which level of the vertebral column?

- A. C7-T1
- B. T4-T6
- C. T10-T11
- D. T7-T8

64. A 65-year-old male with a history of mitral valve replacement 2 years back presents for a knee replacement. He is on warfarin since the time of valve replacement. As per ASRA guidelines, the ideal time to stop his warfarin prior to surgery would be

- A. 12 hours
- B. 3 days
- C. 5 days
- D. 10 days

65. The factors that is **not important** in the local anaesthetic distribution and block height in a neuraxial block is:

- A. Baricity
- B. Dose of the local anaesthetic drug
- C. Advanced age
- D. Gender

66. Following statement regarding fat embolism syndrome (FES) is **False**:

- A. Increased intramedullary pressure with disruption of venous sinusoids leads to FES
- B. Injury to Pulmonary endothelium is triggered by release of free fatty acids
- C. Surgical manipulation & reaming is not considered to play role in the entity
- D. Petechial rashes form a part of clinical presentation of the FES

67. Anatomical location of musculocutaneous nerve in the upper forearm is most frequently found within which muscle:

- A. Coracobrachialis
- B. Triceps Brachii
- C. Brachialis
- D. Biceps Brachii

68. The principal site of action of local anesthetics placed into the epidural space is the

- A. Spinal cord
- B. Nerve roots
- C. Epidural space
- D. Subarachnoid space

69. Sonographically, the adductor canal block is best determined by identification of:

- A. Quadriceps femoris and Piriformis
- B. Adductor longus and adductor Brevis
- C. Sartorius and Vastus medialis
- D. Adductor Brevis & Adductor Magnus

70. A 72-year-old patient undergoing resection of an astrocytoma in the sitting position suddenly develops hypotension. Air is heard on the precordial Doppler ultrasound. Each of the following therapeutic manoeuvres to treat VAE is appropriate EXCEPT

- A. Discontinue N₂O
- B. Apply jugular venous pressure
- C. Implement positive end-expiratory pressure (PEEP)
- D. Administer epinephrine to treat hypotension

71. A 3-year-old child with fever, dysphagia, and drooling is brought to the emergency department (ED) by the caregiver. Lateral neck X-ray films reveal evidence of a "thumbprint" sign. Which of the following disorders is highest on your differential?

- A. Epiglottitis
- B. Croup
- C. Tracheal stenosis
- D. Tracheoesophageal fistula

72. According to the ASA Practice Guidelines for Management of the Difficult Airway, which of the following is the correct definition of a difficult airway?

- A. A clinical situation where a physician experiences difficulty with ventilation, intubation, or both.
- B. A clinical situation in which a conventionally trained anaesthesiologist requires adjuncts for ventilation and/or advanced airway equipment for intubation.
- C. A clinical situation in which a conventionally trained anaesthesiologist fails to ventilate and/or intubate a patient.
- D. A clinical situation in which a conventionally trained anaesthesiologist experiences difficulty with facemask ventilation of the upper airway, difficulty with tracheal intubation, or both

73. Which of the following has NOT been independently associated with challenging mask ventilation?

- A. Edentulousness
- B. Neck circumference >19 cm
- C. BMI >36 kg/m²
- D. Presence of a beard

74. According to the ASA Practice Guidelines for Management of the Difficult Airway, which of the following is NOT a recommended preformulated strategy for extubation of the difficult airway?

- A. Long-term intubation until the perioperative period is completed
- B. Short-term use of an airway exchange catheter
- C. Consideration of fully awake extubation
- D. Preparation for post-extubation non-invasive ventilation or high-flow oxygen

75. When considering surgical placement of a cochlear implant, which of the following is MOST important regarding the anaesthetic management?

- A. Nitrous oxide is absolutely contraindicated.
- B. Conscious sedation is the preferred technique.
- C. Regional block and local anaesthetic infiltration provide superior surgical outcomes.
- D. Patient immobility is paramount.

76. Which of the following is MOST closely linked to OR fires caused by inhalational anaesthetics?

- A. Use of xenon inhalational anaesthesia
- B. Use of high FiO₂
- C. A preceding period of ventilator inactivity
- D. High humidity in the breathing circuit

77. Which of the following is an advantage of a deep extubation versus a normal emergence and extubation following fiberoptic endoscopic sinus surgery?

- A. There is a lower incidence of laryngospasm.
- B. Time to discharge is decreased.
- C. It is associated with decreased postoperative opioid use.
- D. It can facilitate extubation with minimal movement or bucking

78. Which of the following medications, when administered intravenously, is MOST associated with increased ocular pressure?

- A. Midazolam
- B. Ketamine
- C. Propofol
- D. Dexmedetomidine

79. Which of the following complications of ophthalmic regional anesthesia is **correctly paired**?

- A. Optic nerve sheath injection: retinal detachment/loss of vision
- B. Intra-arterial injection: loss of vision
- C. Globe penetration/injection: epidural injection
- D. Extraocular muscle injury: diplopia

80. Which of the following is **MOST** correct regarding the Mallampati classification system?

- A. The Mallampati score correlates well with difficulty of mask ventilation.
- B. Phonation increases the specificity of the Mallampati test.
- C. A Mallampati IV classification has a high positive predictive value of difficult direct laryngoscopy.
- D. Ability to visualize lingual tonsils requires a Mallampati IV score

81. Which of the following is **false**?

- A. Commonly causes itching
- B. Can be used to control BP
- C. Causes tocolysis
- D. Contributes to urinary retention

82. All of the following are false concerning GA in parturient, EXCEPT

- A. General anaesthesia reduces gastric pH
- B. MAC is decreased
- C. Major cause of overall maternal mortality
- D. Succinylcholine crosses the placenta

83. Physiological changes in last trimester EXCEPT –

- A. Resting PaCO₂ is decreased
- B. PCV is decreased
- C. Blood Volume is increased
- D. Gastric secretion is increased

84. All of the following are suitable for aspiration prophylaxis prior to C-section EXCEPT-

- A. Metoclopramide
- B. Glycopyrrolate
- C. Sodium citrate
- D. Clear fluids 4 hours' pre-op

85. All are suitable techniques for pain relief in labour EXCEPT –

- A. Intravenous PCA
- B. Epidural bupivacaine
- C. Intrathecal narcotics
- D. 70% N₂O in O₂

86. Which of the following is a contra-indication to epidural analgesia in labour?

- A. Previous LSCS
- B. Fetal distress
- C. Severe coagulopathy
- D. Maternal exhaustion

87. Likely complications of epidural opioids during labour are all EXCEPT

- A. Itching
- B. Urinary retention
- C. Hypotension
- D. Nausea

88. All are included in Pre-eclampsia without severe features EXCEPT –

- A. BP \geq 160/110 mm Hg
- B. Thrombocytopenia (platelet count $<$ 1,50,000/mm³)
- C. Serum creatinine concentration $>$ 1.1 mg/dL or $>$ 2 times the baseline serum creatinine concentration
- D. Pulmonary edema

89. Which of the following is **false** regarding Early Onset Pre-eclampsia??

- A. Onset of clinical symptoms $<$ 34 weeks' gestation
- B. Relative frequency is 80% of cases
- C. Association with fetal growth restriction
- D. Risk for adverse outcome High

90. Which of the following is **not** a risk factor for chemical damage to the Cauda Equina during labour epidural insertion??

- A. Incorrect formulation, with unsuitable preservative or antioxidant
- B. Intrathecal injection of lidocaine, particularly 5%
- C. Hypobaric solution
- D. Lithotomy position

91. Following is first line therapy of severe "Anaphylactic Reaction" in an adult EXCEPT:

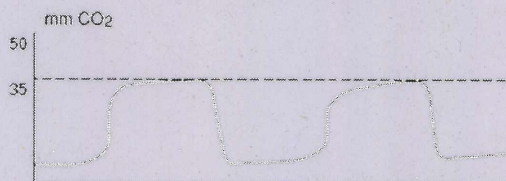
- A. Epinephrine: 100 micrograms over 5–10 min
- B. Oxygen: Titrate to $\text{Sao}_2 \geq 90\%$
- C. Methylprednisolone: 40-60 milligrams IV
- D. IV Fluids: 1-2 Litres

92. Causes of normal anion gap metabolic acidosis with tendency to hyperkalaemia, are all EXCEPT:

- A. Subsiding Diabetic Ketoacidosis
- B. Addison's Disease
- C. Renal Tubular Acidosis Type II
- D. Renal Tubular Acidosis Type IV

93. The End-Tidal Capnogram in the figure is suggestive of:

- A. Hypoventilation
- B. Hyperventilation
- C. Acute Pulmonary Embolism
- D. Air trapping

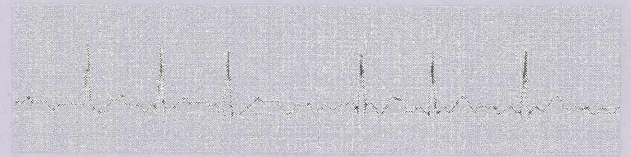


94. Causes of "Syndrome of Inappropriate Anti Diuretic Hormone" are all EXCEPT:

- A. Small cell carcinoma Lung
- B. Vinca Alkaloids (Chemotherapy agents)
- C. Traumatic Brain Injury
- D. Naloxone overtreatment

95. Identify the rhythm in the following figure:

- A. PSVT
- B. Atrial Flutter
- C. Atrial Fibrillation
- D. Junctional supraventricular tachycardia



96. Characteristics of AHA-2020 recommended closed chest compression are all EXCEPT:

- A. Chest compression rate is 100 to 120 per minute
- B. Chest compression depth should be 5 to 6 cm, not >6 cm
- C. Compression-to-breath ratio is 30:2, without definitive airway in place.
- D. Target chest compression fraction (CCF) should be around 40%.

97. Common recommended drugs used for ROSC from cardiac arrest are all EXCEPT:

- A. Amiodarone
- B. Soda bicarbonate
- C. Lignocaine
- D. Epinephrine

98. Contraindications for Extracorporeal-CPR in cardiac arrest are all EXCEPT:

- A. Severe Aortic Regurgitation
- B. Suspected Aortic Dissection
- C. Cardiac arrest due to STEMI
- D. Advance Malignancy

99. Pregnancy-related common causes of maternal cardiopulmonary arrest are all EXCEPT:

- A. Obstetric Haemorrhage
- B. Severe PIH
- C. Gestational Diabetes Mellites
- D. Sepsis

100. Exclusion criteria of Post-arrest Targeted Temperature Management (TTM) are all EXCEPT:

- A. DNAR status
- B. Awake/alert after cardiac arrest
- C. Vegetative state prior to cardiac arrest
- D. Post resuscitation ROSC with GCS<6

SUBJECT ANAESTHESIA

1	D	21	C	41	A
2	B	22	B	42	D
3	B	23	B	43	B
4	A	24	C	44	D
5	A	25	D	45	D
6	B	26	A	46	D
7	B	27	B	47	B
8	D	28	D	48	A
9	A	29	A	49	A
10	C	30	A	50	B
11	A	31	B	51	D
12	D	32	D	52	B
13	C	33	D	53	D
14	D	34	A	54	A
15	C	35	D	55	B
16	B	36	C	56	B
17	D	37	A	57	D
18	D	38	C	58	C
19	A	39	D	59	A
20	B	40	D	60	A
61	D	81	C		
62	D	82	B		
63	D	83	D		
64	C	84	B		
65	D	85	D		
66	C	86	C		
67	A	87	C		
68	B	88	B		
69	C	89	B		
70	C	90	C		
71	A	91	C		
72	A	92	C		
73	B	93	D		
74	A	94	D		
75	D	95	C		
76	C	96	D		
77	D	97	B		
78	B	98	C		
79	D	99	C		
80	B	100	D		