

1). an 82 year old patient attends Emergency Department with Dyspnoea. Her pulse oximetry (finger) Oxygen saturation is 82%. Which statement is best?

- a. Give 24% oxygen and monitor saturation
- b. Intubate the patient and provide invasive ventilation
- c. Prescribe iv hydrocortisone
- d. Sample arterial pO₂ and pCO₂ prior to giving any oxygen
- e. She should be immediately given 60% Oxygen

2). in which of the following is the diagnosis of Heart Failure with Preserved Ejection Fraction fulfilled

- a. EF 40 – 50%, dyspnoea and elevated natriuretic peptides
- b. EF > 40%, rales, oedema, restrictive filling on echocardiography
- c. EF >50% and dyspnoea
- d. EF > 50%, dyspnoea, elevated natriuretic peptides and echocardiographic diastolic dysfunction
- e. EF > 50%, fatigue, oedema, restrictive filling on echocardiography, response to diuretics

3). which of the following investigations has a class 1A indication in suspected acute heart failure?

- a. Arterial blood gas evaluation
- b. Chest X ray
- c. ECG
- d. Natriuretic peptide measurement
- e. Trans thoracic echocardiogram

4) Which of the following would be consistent with Pulmonary Arterial Hypertension (PAH) due to Chronic Thromboembolic Pulmonary Hypertension

- a. Mean Pulmonary Artery Pressure (PAPm) ≥ 15mmHg and Pulmonary Capillary Wedge Pressure (PCWP) ≥ 25mmHg
- b. PAPm ≥ 25mmHg and PCWP ≥ 15mmHg
- c. PAPm ≥ 25mmHg and PCWP ≤ 25mm
- d. PAPm ≥ 25mmHg and PCWP ≤ 15mmHg
- e. PAPm ≤ 25mmHg and PVR > 3 Wood Units

5) A 69 year old male smoker presents the Emergency Room with acute dyspnoea. On auscultation he has bilateral wheeze. His arterial blood gasses show a pO₂ of 8 kPa and a pCO₂ of 6.8 kPa. Which treatment should be offered to treat his wheeze?

- a. Intravenous doxapram
- b. Intravenous theophylline
- c. Prednisolone 10 mg immediately then daily for 7 days
- d. Salbutamol and Ipratropium nebuliser driven by oxygen
- e. Salbutamol nebuliser driven by air