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SAJAA CPD ANSWER FORM - September/October 2021

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Please answer the following questions:

Patient satisfaction at the Chronic Pain Clinic at Groote Schuur Hospital

- 1. According to Kamerman et al. (2020), the prevalence of chronic pain in South Africa is:
- 20%
- 25% b.
- 30% c. d.
- In this study, patients were randomly selected from a registry to reduce the risk of: 2.
- Recall bias a.
- b. Selection bias
- Confirmation bias
- The Brief Pain Inventory (BPI) is a validated tool for assessing pain severity and pain interference with function. On the BPI, a score of three out of ten (3/10) is interpreted as:
- Moderate pain b.
- Severe pain
- Extreme pain d.

Comparative study between an ultrasound-guided transversus abdominis plane block and an ultrasound-guided caudal block for postoperative analgesia in children undergoing lower abdominal surgeries – a prospective randomised study

- 4. A transversus abdominis plane (TAP) block blocks the sensory nerve supply of and provides postoperative analgesia.
- anterior abdominal wall
- posterior abdominal wall b.
- lateral abdominal wall
- bilateral lower limbs
- 5. During ultrasound-guided TAP block, which muscles should be visualised?
- The external oblique
- The internal oblique
- The transversus abdominis muscles
- Ы All the above
- 6. Caudal block involves deposition of local anaesthetic agent in:
- subarachnoid space
- b. subdural space
- epidural space none of the above ld.
- CHIPPS score includes 7.
- crying and facial expression la.
- posture of trunk and legs b. motor restlessness
- d. used in children and infants
- all the above

22q11.2 deletion syndrome: an anaesthetic perspective

22q11DS genetics and prevalence

- The diagnosis of 22q11DS depends on recognition of a set of typical phenotypical features.
- 22q11DS is mostly an inherited disorder with an autosomal recessive inheritance pattern. Patients with long segment deletion have more severe clinical expression with lower life expectancy.
- 22q11DS is the most common microdeletion syndrome with a prevalence of 1 in d. 3 000-6 000 in the general population.

9. Hypoparathyroidism and hypocalcaemia in patients with 22q11DS:

- should only be considered in patients that present with classical DiGeorge syndrome.
- is only a problem during the neonatal period. b.
- should always be a consideration for all patients with 22qDS.
- is not usually a problem when preoperative calcium levels are within normal range.

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10. Blood transfusion and transfusion-associated graft-versus-host disease (TA-GVHD) in patients with 22q11DS

- Patients with 22q11DS should preferably receive blood products from a family member.
- b. A normal immunological screen excludes the need for irradiated blood products.
- Only patients requiring cardiopulmonary bypass require leucofiltration of blood products.
- The mortality of TA-GVHD is close to 100%, and therefore, all 22q11DS patients should d. receive only irradiated cellular blood products.

11. Airway abnormalities

- The diagnosis of 22q11DS is only likely in patients with a combination of complex airway abnormalities and congenital heart defects.
- Airway abnormalities should be anticipated in all patients with 22q11DS.
- A smaller endotracheal tube might be needed for patients with subglottic stenosis, tracheomalacia, and glottic webs, but the depth of placement will remain appropriate
- Common facial features, complicating airway management, include a large protruding tongue, flat nose bridge and limited mouth opening.

Development of a clinical prediction model for high hospital cost in patients admitted for elective non-cardiac surgery to a private hospital in South Africa

- 12. Clinicians can demonstrate the value of their care by:
- billing appropriate fees
- saving costs for all patients
- tracking quality outcomes measures of care in patients at risk for high cost of care

13. Clinical prediction models can be used to:

- predict the cost of hospital admission
- h understand the influence of predictors on a specific outcome
- identify sick patients

Minimum alveolar concentration of sevoflurane required to prevent Bell's phenomenon during examination of the eye under anaesthesia

- 14. Which volatile anaesthetic agent did Guedel use when describing eye signs under
- Chloroform
- b. Ether
- Methoxyflurane c.
- 15. Compared to full term infants, the occurrence of Bell's reflex in premature neonates is:
- less frequent
- iust as frequent
- more frequent
- 16. When planning a study using the up-and-down experimental method, the sample size:
- must be > 60 participants
- b. requires precise calculation beforehand
- cannot be accurately predicted

17. The MAC of an anaesthetic agent:

- declines with age
- b. is age-independent
- increases with age

Anaesthesia drugs preparation and administration in Libyan tertiary hospitals: a multicentre qualitative observational study

18. Emergency medication, if used, was generally drawn up and given directly

- after double-checking and labelled without double-checking but labelled
- without double-checking or label

19. The pre-existing literature has demonstrated that double-checking medication before administration:

- can reduce medication errors
- b. has no effect on medication errors
- can reduce prescribing errors

20. Environmental factors reported by observers and participants were:

- a. noise only
- noise and interruptions b.
- noise, interruptions and disorder

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