

Question 1 (12 marks)

An 18 month old male is brought into your emergency department following ingestion of vape juice 30 minutes prior to his arrival into ED. There are no clinical features of toxicity at the time of presentation.

The patient has no medical conditions.

- a) State three (3) additional details you require to perform a risk assessment. (3 marks).

1.

2.

3.

- b) List three (3) clinical features from three (3) different systems that would suggest early toxicity from this ingestion. (3 marks).

1.

2.

3.

- c) List two (2) clinical features from two (2) different systems that would suggest delayed toxicity from this ingestion. (2 marks).

1.

2.

The patient remains asymptomatic for the necessary period of observation.

- d) State four (4) conditions that must be satisfied for safe discharge of this patient. (4 marks)

1.

2.

3.

4.

Question 2 (12 marks)

A 32 year old female presents to the emergency department (ED) after an alleged assault. You note that in the last two (2) months she has had multiple presentations with various injuries. You suspect intimate partner violence.

- a) List four (4) physical injury characteristics that would support your suspicion of intimate partner violence. (4 marks)

1.

2.

3.

4.

- b) List five (5) risk factors on history which indicate an increased risk of lethality. (5 marks)

1.

2.

3.

4.

5.

- c) State three (3) resources an ED needs to adequately manage cases of suspected intimate partner violence. (3 marks)

1.

2.

3.

Question 3 (12 marks)

A 28 year old male involved in a high speed motor vehicle accident is brought in to your emergency department (ED) via ambulance. He is hypotensive, pale and diaphoretic. He has an isolated intra-abdominal injury. Packed red cell transfusion is initiated.

Tranexamic acid (TXA) was administered pre-hospital, and your junior doctor enquires regarding the evidence for its use.

- a) State the primary finding from the PATCH-Trauma study (Prehospital Tranexamic Acid for Severe Trauma). (1 mark)

Your site utilises thromboelastography to guide trauma resuscitation.

- b) List two (2) potential benefits of thromboelastography-guided product replacement over a fixed ratio blood transfusion. (2 marks)

1.

2.

- c) List four (4) physiological and/or laboratory parameters that you would target in the ED to reduce bleeding. (4 marks)

1.

2.

3.

4.

- d) List five (5) potential complications of massive red cell transfusion. (5 marks)

1.

2.

3.

4.

5.

Question 4 (12 marks)

An 81 year old female is brought to the emergency department (ED) with a reduced level of consciousness.

Her observations are:

Temp	36 °C
HR	70 bpm
BP	170/90 mmHg
RR	16 /min
SaO ₂	98 % in room air
GCS	7 (E1, V2, M4)

A non-contrast CT brain has been performed. An axial slice is shown. **See Prop Booklet page X.**

a) List three (3) findings on the CT brain. (3 marks)

1.

2.

3.

b) State the most likely cause for these findings. (1 mark)

You decide that palliation is the most appropriate course of management for this patient.

- c) Prescribe (medication, dose, route of administration) four (4) medications, including indication to use for symptom relief. (4 marks)

	Medication	Dose	Route	Indication
1.				
2.				
3.				
4.				

The patient has a rapid decline while still in the ED.

- d) State four (4) other measures that would facilitate good end of life care for the imminently dying patient and their next of kin. (4 marks)

1.

2.

3.

4.

Prop

