

CODE: N17

Question: Neuro Type: Author: Dr. P. Houston

Opening Scenario:

68 female AVR 4 yrs previously. Fell in bathtub. ↓ LOC. CT shows large 6 R subdural. PMH - hypertension. Meds: Coumadin, Diuretic.

Major points of additional information to be provided to the candidate, e.g., hx, px, labs, x-ray, consults:

BP 210/100, HR 80, GCS 5. No focal signs.
Hb 138, PT 26, PTT 31, Lytes 130/3.0/98/26, CR 76
ECG LVH with strain.

Major decision points (major decision points or options which must be recognized by the candidate)

- Must consider - potential problems with AVR
 - anticoagulated state
 - ↑ ICP and compensatory ↑ BP
 - full stomach

Any followup information required to lead to the end of the question

Ten minutes after induction – ABG - 7.34/36/102/16, on 100% O₂; VT 750; RR 16; PEEP 5.
Diff Dx of Δa gradient: aspiration, pw edema, endobronchial intubation

Critical features to be included i.e. the *must* have to pass the question or to be considered *completely unacceptable*

- Must know how to manage airway and hemodynamics in face of AVR, possible CAD, ↑ ICP and full stomach
- Must address coagulation problem.
- Must not try ↓ BP and therefore ↓ CPP.

Ref: RCEXAMS2..Nov.94

USED:

Last revision: 95/10