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**Question:** 290

Signs and symptoms of hemolytic transfusion reactions include:

- A. Hypothermia
- B. Hypertension
- C. Polyuria
- D. Abnormal bleeding

**Answer:** D

Signs and symptoms of hemolytic transfusion reactions include abnormal bleeding. Other symptoms of a hemolytic transfusion reaction include fever, chills, and pain and heat at the infusion site, as well as respiratory distress, anxiety, hypotension, and oliguria. During surgery, a hemolytic transfusion reaction can manifest as abnormal bleeding.

**Question:** 291

A patient suspected of having a hemolytic transfusion reaction should be managed with:

- A. Removal of nonessential foreign body irritants, e.g., Foley catheter
- B. Fluid restriction
- C. Steroids
- D. Fluids and mannitol

**Answer:** D

A patient suspected of having a hemolytic transfusion reaction should be managed with fluids and mannitol. Hemolytic transfusion reactions lead to hypotension and oliguria. The increased hemoglobin in the plasma will be cleared via the kidneys, which leads to hemoglobinuria.

**Question:** 292

Which of the following characteristics in a patient might increase the risk of a wound infection?

- A. History of colon surgery

- B. Hypertension
- C. Male sex
- D. Receipt of chemotherapy

**Answer:** D

A characteristic in a patient that might increase the risk of a wound infection is receipt of chemotherapy. Decreasing the bacterial inoculum and virulence by limiting the patient's prehospital stay, clipping the operative site in the operating room, administering perioperative antibiotics (within a 24-h period surrounding operation) with an appropriate antimicrobial spectrum, treating remote infections, avoiding breaks in technique, using closed drainage systems (if needed at all) that exit the skin away from the surgical incision, and minimizing the duration of the operation have all been shown to decrease postoperative infection.

**Question:** 293

Signs and symptoms associated with early sepsis include:

- A. Respiratory acidosis
- B. Decreased cardiac output
- C. Hypoglycemia
- D. Cutaneous vasodilation

**Answer:** D

Signs and symptoms associated with early sepsis include cutaneous vasodilation. A changing mental status, tachypnea that leads to respiratory alkalosis, and flushed skin are often the earliest manifestations of sepsis.

**Question:** 294

Hypocalcemia is associated with:

- A. Acidosis
- B. Shortened QT interval
- C. Hypomagnesemia
- D. Myocardial irritability

**Answer: C**

Hypocalcemia is associated with hypomagnesemia. Hypocalcemia is also associated with a prolonged QT interval and may be aggravated by both hypomagnesemia and alkalosis.

**Question: 295**

Which of the following inhalation anesthetics accumulates in air-filled cavities during general anesthesia?

- A. Diethyl ether
- B. Nitrous oxide
- C. Halothane
- D. Methoxyflurane

**Answer: B**

The inhalation anesthetic that accumulates in air-filled cavities during general anesthesia is nitrous oxide. Nitrous oxide (N<sub>2</sub>O) has a low solubility compared with other inhalation anesthetics. Its blood:gas partition coefficient is 0.47 and it is 30 times more soluble in blood than is nitrogen (N<sub>2</sub>).

**Question: 296**

Dopamine is a frequently used drug in critically ill patients because:

- A. At high doses, it increases splanchnic flow
- B. At high doses, it increases coronary flow
- C. At low doses, it decreases heart rate
- D. At low doses, it lowers peripheral resistance

**Answer: B**

Dopamine is a frequently used drug in critically ill patients because at high doses, it increases coronary flow. In low doses (1-5 mg/kg/min), dopamine affects primarily the dopaminergic receptors. Activation of these receptors causes vasodilation of the renal and mesenteric vasculature and mild vasoconstriction of the peripheral bed, which thereby redirects blood flow to kidneys and bowel.

**Question:** 297

During blood transfusion, clotting of transfused blood is associated with:

- A. ABO incompatibility
- B. Minor blood group incompatibility
- C. Rh incompatibility
- D. Transfusion through Ringer's lactate

**Answer:** D

During blood transfusion, clotting of transfused blood is associated with transfusion through Ringer's lactate. Calcium-containing solutions such as Ringer's lactate cause clotting within the intravenous line rather than hemolysis and may lead to pulmonary embolism.

**Question:** 298

The etiologic factor implicated in the development of pulmonary insufficiency following major nonthoracic trauma is:

- A. Aspiration
- B. Atelectasis
- C. Fat embolism syndrome
- D. Fluid overload

**Answer:** C

The etiologic factor implicated in the development of pulmonary insufficiency following major nonthoracic trauma is fat embolism syndrome. Post-traumatic pulmonary insufficiency in the absence of significant thoracic trauma has been attributed to a wide variety of etiologic agents, including aspiration, simple atelectasis, lung contusion, fat embolism, pneumonia, pneumothorax, pulmonary edema, and pulmonary thromboembolism.

**Question:** 299

Signs and symptoms of unsuspected Addison's disease include:

- A. Hypothermia
- B. Hypokalemia
- C. Hyperglycemia
- D. Hyponatremia

**Answer:** D

Signs and symptoms of unsuspected Addison's disease include hyponatremia. Other clinical manifestations of adrenocortical insufficiency include hyperkalemia, hyponatremia, hypoglycemia, fever, weight loss, and dehydration.

**Question:** 300

Treatment for clostridial myonecrosis (gas gangrene) includes which of the following measures?

- A. Administration of an antifungal agent
- B. Administration of antitoxin
- C. Wide debridement
- D. Administration of hyperbaric oxygen

**Answer:** C

Treatment for clostridial myonecrosis (gas gangrene) includes wide debridement. Necrotizing skin and soft tissue infections may produce insoluble gases (hydrogen, nitrogen, methane) through anaerobic bacterial metabolism.

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