



Case 1 (SCE 1, 2011.1)

SCENARIO

A 65 year-old man is brought to your urban district ED from a burning factory. Firefighters found him unconscious within the building. His observations are as follows

- Pulse 110 beats / min
- BP 104/58 mmHg
- Resp Rate 10 / min
- O₂ saturations 99% on a non re-breathing mask
- GCS 6 (E1, V1, M 4)

Arterial blood gases on 15 l of oxygen.

pH	7.2	(7.35 – 7.45)
pCO ₂	55	(35 – 45)
pa O ₂	144	(80 - 95)
HCO ₃	20	(22 - 28)
BE	- 8	(-3 - +3)

Question 1: List possible causes for his reduced conscious state.

Question 2: Describe and interpret the ABG results.

Question 3: What features in the assessment of this patient would support a diagnosis of CO poisoning?

Question 4: Outline the key issues in the airway management of this patient.

Question 5: The patient is safely intubated. COHb = 15% Discuss the role of hyperbaric oxygen therapy in this

Case 2 (SCE 2, 2011.1)

SCENARIO

A 24 year-old multiparous woman who is 36 weeks pregnant presents to triage in labour. She is transferred to the resuscitation room and the nurse tells you the head is on show. The maternity ward is located in a separate building to the ED.

Question 1: Outline your actions in response to this situation.

Question 2: The baby is delivered within minutes. The cord is clamped and cut. Outline your routine initial management of the newborn infant.

Question 3: The cord has been clamped and cut and the placenta is still in-situ. The midwife is yet to arrive. Describe how you would manage the third stage of labour.

Question 4: The placenta is delivered. It appears incomplete and the patient has very heavy PV bleeding. Outline your actions in response to this.

Question 5: Following this incident you decide to review the contents of the emergency delivery pack in your ED. Describe how you would undertake this review.