



Colombian Journal of Anesthesiology

Revista Colombiana de Anestesiología

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Wolters Kluwer

Questions and answers

Preguntas y respuestas

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1. In the prospective observational study by Shiraishi-Zapata et al,¹ which of the following variables constituted the greatest risk of postoperative nausea and vomiting in patients undergoing laparoscopic cholecystectomy?

- (a) Motion sickness.
- (b) Obesity.
- (c) Diabetes mellitus.
- (d) Duration of anesthesia.

2. Taking the manufacturing industry as an example, it has been possible to implement methodologies to increase safety standards in daily medical practice. One of the most recognized is TOYOTA's LEAN methodology. Among the concepts applied by this methodology is the PULL system, what does this methodology consist of?²

- (a) Making the care process to be carried out without unnecessary interruptions (making it flow).
- (b) Defining the customer's value (quality control).
- (c) Applying a Kaizen system (continuous improvement): perception is applied (discovering problems), ideas are developed (finding creative solutions), and decisions are made.
- (d) Applying a combination of LEAN methodology and six-sigma elements, which manages to reduce defects before they occur.

3. (MyCheckTime, SEGANEST. S.A.S. Cali, Colombia) is a software developed and described by Tafur Betancourt

et al,² based on a methodology that potentially allows surgical teams to provide more efficient, safe, and timely care, as well as record in real time the patient circuit in the surgical and recovery area. The conceptual pillars to develop the software included:

- (a) Checklists.
- (b) Security packages.
- (c) TOYOTA's LEAN methodology.
- (d) All of the above.

4. In the systematic review conducted by Cadavid-Puentes et al,³ on the efficacy of different paravertebral block techniques in thoracic surgery, it was found that:

- (a) Pre-operative surface-anatomy-guided blocking (BPV-AS) is inferior to blocking by direct surgeon visualization (BPB-C).
- (b) Ultrasound-guided blocking (BPV-US) is significantly superior to BPB-AS blocking.
- (c) Both the BPV-AS and BPV-US blocks are superior to the BPV-C block.
- (d) There is significantly larger opioid consumption in the first 24 hours with the BPV-C block than with the BPV-AS block.

5. Dr. Kehlet and Dr. Mogensen's approach to adult patients in intensified recovery programs after surgery has considerably improved postoperative outcomes. However, there is little information on recommendations for pediatric population. Which of the following components

How to cite this article: Raffán-Sanabria F. Questions and answers. Colombian Journal of Anesthesiology. 2020;48:102-103.

Read the Spanish version of this article at: <http://links.lww.com/RCA/A924>.

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<http://dx.doi.org/10.1097/CJ9.0000000000000157>

of the pediatric ERAS protocol is false according to the work of Trujillo-Mejía et al?⁴

- (a) Use of clear liquids up to 1 hour before surgery (3cm³/kg of weight).
- (b) Use of anxiolytics in patients over 1-year old.
- (c) Pre-operative bowel preparation with oral antibiotics and mechanical colon cleansing.
- (d) Pneumatic compression device in population with development of secondary sexual characteristics.

6. Acquired angioedema is an unusual disorder characterized by C1 inhibitor deficiency. Which of the following statements about this condition is true?⁵

- (a) It usually appears from the 2nd decade of life.
- (b) It is a disease that is often seen in allergic reactions generated by immunoglobulin E.
- (c) It can usually be cured with intravenous administration of epinephrine, steroids, and antihistamines.
- (d) Acute crises are treated by restoring C1 stearyl inhibitor levels with plasma-derived concentrate, recombinant C1 inhibitor, or lyophilized plasma.

7. The use of the spinal erector block described by Forero et al in 2016 has been increasingly practical in different intrathoracic surgery scenarios. It has the following advantages using ultrasound⁶:

- (a) Low complication rate.
- (b) Can be used in patients requiring perioperative anticoagulation.
- (c) Reduces opioid consumption.
- (d) All of the above.

8. Regarding ante or post-partum thromboprophylaxis, which of the following statements is false?⁷

- (a) When the antepartum risk score is ≥ 4 , consider first trimester thromboprophylaxis.
- (b) When the antepartum risk score is 3, consider thromboprophylaxis from 28 weeks of gestation onwards.
- (c) When the postpartum risk score is ≥ 2 , consider thromboprophylaxis up to 10 days later.
- (d) When the antepartum risk score is 2, consider thromboprophylaxis from the 21st week of gestation onwards.

9. Regarding dipyron use, the most widely reported pharmacovigilance studies recognize an incidence of agranulocytosis and aplastic anemia ranging from⁸:

- (a) 0.5 and 2.7 cases per million consumers.
- (b) 10 and 50 cases per 100,000 consumers.
- (c) 1 and 5 cases per 1000,000 consumers.
- (d) 1 and 5 cases per 10,000 consumers.

10. Regarding S-protein, it is true that⁷:

- (a) It's a vitamin K-dependent cofactor.
- (b) It acts by inhibiting factors Va and VIIIa of the coagulation cascade.
- (c) Congenital deficiency is an autosomal recessive disease.
- (d) Its deficiency promotes states of hypocoagulability.

Answers

- 1. a.
- 2. a.
- 3. d.
- 4. c.
- 5. c.
- 6. d.
- 7. d.
- 8. d.
- 9. a.
- 10. a.

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