



Questions 1-3

- 1) You are being called to place a lethargic patient on Noninvasive positive pressure ventilation (NIPPV) for severe hypercapnia. His ABG: Ph 7.30, PaCO₂ 95, PaO₂ 78, HCO₃ 45.
Would NIPPV is appropriate to help this patients' lethargy?
 - A) Yes
 - B) No

- 2) What is the baseline PaCO₂ for this patient?
 - A) 30
 - B) 50
 - C) 70
 - D) 90

- 3) After 1 hour of NIPPV, the patient remains lethargic, PaCO₂ is now 50. PH now is expected to be?
 - A) 7.2
 - B) 7.3
 - C) 7.4
 - D) 7.5
 - E) 7.6

Questions 4-6

- 4) An 18 year old patient with DKA and complaining of shortness of breath. His ABG: PH 7.2, PaCO₂ 14, PaO₂ 80, HCO₃ 8.
Is the patient compensating well and PaCO₂ appropriately low?
 - A) Yes
 - B) No

- 5) What is the expected PaCO₂ in that patient?
 - A) 10
 - B) 15
 - C) 20
 - D) 25

- 6) What is the Acid-Base balance in this patient?
- A) Primary metabolic acidosis
 - B) Primary respiratory alkalosis
 - C) Primary metabolic acidosis and respiratory alkalosis
 - D) Primary metabolic alkalosis and respiratory alkalosis
- 7) You are assessing a patient with COPD exacerbation getting ready for intubation after failing NIPPV. His ABG with PH 7.1, PaCO₂ 80, PaO₂ 60, HCO₃ of 23, his Potassium is 6.5 meq/l, lactic acid 2, renal functions normal. ECG with no arrhythmias. Best treatment for hyperkalemia in this patient is?
- A) Emergent dialysis
 - B) Nebulized bronchodilators
 - C) Intravenous Calcium
 - D) Emergent Intubation
- 8) A seventeen year old patient who ingested 100 tablets of aspirin 325 mg and markedly obtunded, with extremely high aspirin level. PH 6.9, HCO₃ 5. PaCO₂ is expected to be?
- A) < 12
 - B) 13-15
 - C) 15-20
 - D) > 20
- 9) 80 year old presented with repeated vomiting and dehydration for last 3 days. His ABG is PH 7.52, PaCO₂ 55, HCO₃ 40. This patients' acid-base balance is:
- A) Primary metabolic alkalosis
 - B) Primary metabolic alkalosis and respiratory acidosis
 - C) Primary respiratory acidosis
 - D) Primary respiratory acidosis with metabolic acidosis
- 10) 84 years old male with congestive heart failure who is being treated with diuretics. His ABG initially was PH 7.38, PaCO₂ 38, HCO₃ 25, PaO₂ 60 on RA. Today PH 7.55, PaCO₂ 48, HCO₃ 36, PaO₂ is 110 on 4 lit NC. To correct the ABG, you should?
- A) Add acetazolamide diuretic
 - B) Increase doses of diuretics
 - C) Stop diuretics
 - D) Place on NIPPV