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Practice Simulation 2

39 year old Kim Hattler, 5 ft 4, weighing 100 kg (220 lbs) has just arrived in the labor and delivery department. She is 34 weeks pregnant with no history of prenatal care. She is complaining of intense contractions. The neonatologist Dr. Gerber is requesting your presence to assist in the care of the patient.

Go to Section A

Section A: Which of the following would you select to help in evaluating the patient.

- A) peak flow assessment (pre/post MDI)
- B) family medical HX
- C) Vital signs
- D) Electrolytes
- E) Dubowitz score
- F) L/S Ratio
- G) Blood sugar level
- H) Social history
- I) Previous medical HX

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Section B: Based on this patient's current clinical status you would recommend
(select one).

- A) Administering intravenous Lasix
- B) Administering intravenous Heparin
- C) Intubate the patient to secure the airway
- D) Administering intravenous magnesium sulphate
- E) Administering intravenous morphine sulphate

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Section C: An intra-uterine monitor has been inserted and the fetal rate noted at 250 bmp. In preparation for an emergency C-section you would select the following.

(select all applicable choices)

- A) Endotracheal tube size 2.5
- B) Endotracheal tube size 3.0
- C) Miller blade size 0
- D) Coude tip catheter
- E) Suction catheter size 8
- F) Bulb syringe
- G) Magill forceps
- H) Fenestrated tracheostomy tube size 4.0
- I) Resuscitation bag and mask

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Section D: the c-section was successful and baby Hattlers is placed on the radiant warmer with heart rate noted at 40bmp. Based on this situation you would immediately.

(select 1)

- A) Intubate the baby
- B) Initiate positive pressure ventilation
- C) Begin chest compressions and bag mask ventilation
- D) Administer 100% oxygen via nasal CPAP
- E) Insert an esophageal-balloon catheter.

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Section E: After 30 minutes of aggressive intervention, baby Hattlers pulse is noted at 150 bpm. An umbilical artery catheter is been placed, and current blood gas results are PH=7.24 PcO2=66 PO2=41 HCO3=20. Based on these results you would immediately.

- A) Initiate nasal CPAP
- B) Initiate mechanical ventilation
- C) Administer sodium Bicarbonate
- D) Administer KCL

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Section F: The neonatologist Dr. Gerber agrees with your decision and wants your input on probable ventilator settings for baby Hattler . The most appropriate initial ventilator settings will be:

- A) Time cycled, pressure limited pip=18 IT=0.6 RR=20 FiO₂=100%
- B) Time cycled, pressure limited pip=24 IT=0.5 RR=35 FiO₂=100%
- C) Time cycled, pressure limited pip=40 IT=0.6 RR=20 FiO₂=100%
- D) Time cycled, pressure limited pip=25 IT=0.4 RR=30 FiO₂=60%

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Section G: Dr. Gerber infused 2 doses of surfactant therapy its been 5 days now and routine morning chest x-ray shows reticulo granular infiltrates of a ground glass pattern and a blood gas PaO₂ of 40 mmHg on 100% FiO₂. You would now recommend (**select 1**)

- A) Transillumination to rule out pneumothorax
- B) Aggressive chest physical therapy and suction
- C) Initiating PEEP therapy
- D) A stat Echocardiogram
- E) Discontinuing conventional ventilation and switching to an oscillator
- F) Implementing Extra corporeal membrane oxygenation (ECMO)
- G) Decreasing the delivered FiO₂ and increasing the respiratory rate on the ventilator.

VIEW RESULTS:

TOTAL POINTS =49, PASS=40

Your Results: