

SAQ 1

An 84 year old man is brought to your emergency department following a high speed car accident. He has signs of multiple left rib fractures. Two hours after arriving in the emergency department he becomes more breathless and distressed.

His observations are:

- GCS 14
- HR 75 bpm
- BP 100/60
- RR 24

His arterial blood gas on room air : results are below

				Reference Range
pH	7.14			(7.35-7.45)
pCO ₂	60	mmHg		(35-45)
pO ₂	114			
HCO ₃ ⁻	17	mmol/L		(21-28)
Lactate	1.4	mmol/L		(< 2.0)
FiO ₂	50	%		
Na ⁺	139	mmol/L		(135-145)
K ⁺	4.8	mmol/L		(3.2-4.3)
Cl ⁻	116	mmol/L		(99-109)
Glucose	11.3	mmol/L		(3.0-6.0)

a. List 4 key abnormalities on the above blood gas (2 Marks)

½ Mark each up to 2 marks for

- Moderate acidaemia - mixed
- Hypercarbia / Raised pCO₂ / Resp acidosis
- Low bicarb / metabolic acidosis
- Raised chloride
- Raised glucose

b. Calculate the patient's expected pCO₂ and show the formula used (2 Marks)

1 Mark each for:

- Formula: Winter's formula Expected pCO₂ = 1.5 x HCO₃⁻ + 8 +/- 2
- Calculation: Expected pCO₂ = 25.5 + 8 = 33.5 (Accept 31 – 35)

c. Calculate the patient's A-a gradient and show the formula's used (2 Marks)

1/2 Mark each for:

- A-a gradient = PAO₂ – paO₂
- PAO₂ = (760-47) x FiO₂ – pCO₂ / 0.8
- PAO₂ = 713 x 0.5 – 75 = 281.5 (Accept 280 – 283)
- A-a gradient = 281.5 – 114 = 167.5 (Accept 165-169)

d. List 8 potential causes for the patient's clinical picture and ABG result (4 Marks)

½ Mark each up to 4 marks from:

- *Flail segment*
- *Pulmonary contusion*
- *Haemothorax*
- *Pneumothorax*
- *Drugs e.g. opiates*
- *Tension pneumothorax*
- *Fluid resuscitation +/- pulmonary odema (raised chloride)*
- *Hypoventilation from pain*
- *Hypercarbia secondary to oxygen Tx / underlying lung disease*

Question and answers taken adapted from FACEM VAQ 2011.1.8.