## **TIE BREAKER**

- Only Calcium channel blocker recommended through intrathecal route is.
- 1 litre of liquid oxygen provides \_\_\_\_\_\_of gas
- A perimortemcesearen section should be initiated \_\_\_\_\_\_ AFTER the onset of the maternal cardiac output, if ROSC is not achieved by usual resuscitative measures.

• The size of uncuffed tracheal tube that can be passed through classic LMA size 3

• Expand THRIVE

- **ZICONITIDE**
- <u>860 LITRES</u>
- <u>4 MINUTES</u>
- <u>6.5</u>
- TRANSNASAL HUMIDIFIED RAPID
   INSUFFLATION VENTILATORY EXCHANGE

 Calculate PAO2? 1ATM,FiO2-50%,PACO2-40mmHg On normal diet

• Calculate Contents of Nitrous Oxide cylinder? Wt of Etype full N2Ocylinder-6.4kg,Empty E-type N2O-3.1kg

 ABG of a patient weighing 70kg shows pH-7.1, HCO<sub>3</sub>-6, Standard negative Base Excess is -18, PaCO2 is 38. How much 7.5% Soda-Bicarb needed for base deficit correction? PAO2=PiO2-PACO2/R

 =(Pb-PH20)xFiO2 - PACO2/0.8
 =(760-47)x0.5-40/0.8
 =713x0.5-40/0.8
 =356.5-50
 =306.5mmHg

 Wt of liquid N2O = wt of FullN2O-Empty N2O cylinder =6.4-3.1kg=3.3kg=3300g Using Avagadro's Hypothesis 1 gram molecular weight of any substance will occupy 22.4 litres; The molecular weight of  $N_2O = 44$  g So 44g N<sub>2</sub>O will give 22.4 litres 3300 g will give 3300x22.4/44 = **1680 litres** 1680 LITRES AT 273 KELVNS At 20deg room temp 1680x293/273=1803.07lit

- Dose(mEq)=0.3 x wt in kg x base deficit
   =0.3 x 70 x 18
  - =378meq's
  - clinically only 50% correction is given, so dose required is 378/2=189
  - molecular weight of NaHCO3 (sodabicarb) is 84g so, 7.5% soda bicarb has 0.9meq/ml
  - so required ml of 7.5% soda bicarb is
  - =189/0.9=210ml