

Example SBA Questions for the FFICM MCQ

1. **An 80 year old man remains ventilated 2 days following emergency infra-renal abdominal aortic aneurysm repair. His abdomen is distended and he becomes oliguric with a creatinine rising to 200 micromol/L. Serum potassium is 5.0 mmol/L and arterial pH 7.3. Mean arterial pressure is 70 mmHg unsupported.**

What is the best initial management?

- A. Commence inotropes
- B. Commence furosemide infusion
- C. Measure intra-abdominal pressure
- D. Start renal replacement therapy
- E. Urgent abdominal CT scan

Answer = C

This patient is at high risk of abdominal compartment syndrome. While all of the answers are plausible, the best answer is to measure the intra-abdominal pressure before considering the other management options

2. **You are reviewing a patient on ICU who has developed recent diarrhoea. He has had a prolonged hospital admission, with several abdominal operations. He is on day 5 of a course of antibiotics for a ventilator-associated pneumonia. Stool PCR-based assay for Clostridium difficile toxins A and B is positive.**

Which is the most appropriate next investigation?

- A. Stool: Enzyme immune assay (EIA) for toxins A and B
- B. Stool: Glutamate dehydrogenase EIA
- C. No further testing required
- D. Colonoscopy and repeat PCR based assay for toxins A and B
- E. Stop antibiotics and no further testing

Answer = A

The Department of Health and ARHAI advise that organisations adhere to a two stage testing approach which consists of:

A GDH EIA (or a NAAT or PCR) test to screen samples followed by a sensitive toxin EIA test (or a cytotoxin assay)

If the first test (GDH or NAAT) is negative, the second test (sensitive toxin EIA) does NOT need to be performed

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/215135/dh_133016.pdf

EIA: Enzyme immunoassay that detects the presence of toxins.

GDH: A glutamate dehydrogenase (GDH) test detects an antigen that is produced in high amounts by C. difficile, both toxin and non-toxin producing.

NAAT: Nucleic Acid Amplification Test that detects the presence of toxin gene(s).

PCR: Polymerase Chain Reaction test (a type of NAAT).

Toxin test: A toxin test is used to detect the presence of C. difficile toxin(s) that are specific for C. difficile colitis / pseudomembranous colitis.