



- b) Discuss the different types of available snake anti-venom, including indications and contra-indications for each type.  
*Bespreek die verskillende soorte slang teengif beskikbaar, insluitende die indikasies en kontra indikasies van elke soort.* (30)
- c) The snake responsible for biting the farm labourer is identified as a Boomslang (*Dispholidus Typus*). Describe the specific management for this snake bite.  
*Die slang verantwoordelik vir die byt van die plaaswerker is geïdentifiseer as 'n boomslang (Dispholidus Typus). Beskryf die spesifieke hantering van hierdie slangbyt.* (40)  
[100]
- 3 a) Compare and contrast diabetic ketoacidosis and hyperglycaemic hyperosmolar state (hyperosmolar non-ketotic coma) with respect to:  
*Vergelyk en kontrasteer diabetiese ketoasidose en hiperglisemiese hiperosmolare staat (hiperosmolare non-ketotiese koma) met betrekking tot:*
- i) pathophysiology  
*pato-fisiologie* (40)
- ii) expected blood results.  
*verwagte bloed uitslae.* (20)
- b) Discuss the use of urine dipsticks as a test for:  
*Bespreek die gebruik van uriene toetsstrokies as 'n toets vir:*
- i) red blood cells  
*rooibloedselle* (15)
- ii) ketones  
*ketone* (15)
- iii) glucose.  
*glukose.* (10)  
[100]
- 4 a) Discuss the pathophysiology of carbon monoxide poisoning.  
*Bespreek die pato-fisiologie van koolstofmonoksied vergiftiging.* (35)
- b) Explain how pulse oximetry works. How and why does carbon monoxide poisoning affect pulse oximeter readings?  
*Verduidelik hoe polsoksimetrie werk. Hoe en waarom affekteer koolstofmonoksied vergiftiging polsoksimetrie lesings?* (30)
- c) What effects can carbon monoxide poisoning have on a capnography reading?  
*Watter effekte het koolstofmonoksied vergiftiging op kapnografie lesing waardes?* (5)
- d) Write short notes on 4 indications for hyperbaric oxygen use in patients presenting to your emergency centre.  
*Skryf kort notas oor 4 indikasies vir die gebruik van hiperbariese suurstof in pasiënte wat presenteer by u noodeenheid.* (30)  
[100]



Dip PEC (SA)

THE COLLEGES OF MEDICINE OF SOUTH AFRICA

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Examination for the Diploma in Primary Emergency Care  
of the College of Emergency Medicine of South Africa

20 August 2009

Paper II

(3 hours)

*All questions to be answered. Each question to be answered in a separate book (or books if more than one is required for the one answer)*

*Al die vrae moet beantwoord word. Elke vraag moet in 'n aparte boek (of boeke indien meer as een nodig is vir 'n vraag) geskryf word*

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- 1 You have been resuscitating an eight-year-old child who fell into a swimming pool for 30 minutes.  
*U het 'n 8-jarige kind wat in 'n swembad geval het vir 30 minute geresussiteer.*
- a) Discuss the criteria you would use to determine when to terminate the resuscitation effort.  
*Besprek die kriteria wat u sal gebruik om vas te stel wanneer om die resussitasie poging te termineer. (50)*
- b) Describe how you would inform the parents of the patient of your decision to terminate the resuscitation.  
*Beskryf hoe u die ouers van die pasiënt sal verwittig van u besluit om die resussitasie poging te termineer. (50)*
- [100]
- 2 A 14-year-old boy presents with his mother to your emergency centre following a dog bite. He is understandably anxious. His vital signs are within normal limits for his age group and the wounds are not bleeding profusely. His mother is concerned about her child getting Rabies.  
*'n 14-jarige seun en sy moeder presenteer by u noodeenheid nadat hy deur 'n hond gebyt is. Hy is verstaanbaar angstig. Sy observasies is binne normale perke vir sy ouderdom en daar is geringe bloeding van sy byt wond. Sy moeder is besorg dat haar seun hondsdoelheid (Rabies) mag kry.*
- a) Describe the important information that should be obtained on history to assist you in your further decision making.  
*Beskryf die belangrike informasie oor geskiedenis wat moet verkry word om u te ondersteun met verdere besluitneming. (20)*
- b) Discuss the chemotherapy of Rabies, and describe the differences between the use of Anti-Rabies Serum and the Rabies Vaccine.  
*Besprek die chemoterapie van hondsdoelheid (Rabies) en beskryf die verskille tussen die gebruik van Anti-Rabies Serum en Rabies vaksien. (60)*
- PTO/Page 2 Question 2 c) .....

- c) The family presents two weeks later and mentions that the dog continues to thrive. How (if at all) would this change your management of the patient?  
*Die familie getuig twee weke later dat die betrokke hond aanhou floreer. Hoe sal hierdie feit (indien wel) u benadering tot behandeling van die pasiënt beïnvloed?* (20)  
[100]
- 3 You are required to manage a patient with a suspected spinal cord injury.  
*U word versoek om 'n pasiënt met 'n verdagte spinalekoord besering te hanteer.*
- a) List and explain 5 clinical syndromes associated with incomplete spinal cord injuries.  
*Lys en bespreek 5 kliniese sindrome geassosieer met onvolledige spinale-koord beserings.* (40)
- b) Discuss your management of a patient with a suspected spinal cord injury.  
*Bespreek u hantering van 'n pasiënt met 'n moontlike spinalekoord besering.* (40)
- c) Compare the signs and symptoms of neurogenic shock with hypovolaemic shock.  
*Vergelyk die simptome en tekens van neurogene skok met hypovolemiese skok.* (20)  
[100]
- 4 a) Compare and contrast anterior, inferior, posterior and right ventricular myocardial infarctions with respect to  
*Vergelyk en kontrasteer tussen anterior, inferior, agterste en regter ventrikulêre miokardiale infarksies met betrekking tot*
- i) Diagnosis on ECG.  
*EKG diagnose.* (30)
- ii) Complications to be vigilant for (including reasons why these complications occur).  
*Komplikasies om op die uitkyk voor te wees (insluitende redes waarom hierdie komplikasies voorkom).* (30)
- b) Discuss the use of the following agents in patients presenting with myocardial infarction.  
*Bespreek die gebruik van die volgende middels in pasiënte wat presenteer met miokardiale infarksie.*
- i) B-blockers.  
*B-blokkers.* (10)
- ii) Aspirin.  
*Aspirien.* (10)
- iii) Statins.  
*Statiene.* (10)
- iv) Non-steroidal anti-inflammatory drugs.  
*Nie-steroïede anti-inflammatoriese middels.* (10)  
[100]