


Medical RAG Agent

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[SECTION: 03 CRITICAL INCIDENTS]
03 CRITICAL INCIDENTS
69. PoST-DURAL PUNcTURE
hEADAcHe
Describe the common causes dural puncture is intentional in subarachnoid anaesthesia and a recognised and presentation of a post-dural complication of epidural placement. Puncturing the dura can result in puncture headache (PDPh). leakage of csF from the tear, a fall in icP and sagging of the brain in the skull vault, which can lead to the development of a debilitating postural headache. the headache usually occurs within 72 hours of dural puncture, is classically severe, frontal/occipital/retrobulbar and m

[SECTION: 03 CRITICAL INCIDENTS]
limbs. in every instance, other causes of headache must be considered and excluded.
What is the incidence of PDPh? the incidence of accidental dural puncture during epidural anaesthesia is 0-2.6% and is inversely proportional to the experience of the anaesthetist.
incidence of post-dural puncture headache (PdPH) following spinal depends on the type and gauge of needle used: with 25 g whitacre incidence is 0-14.5%, 24 g Sprotte 0-9.6%.
the most common place you will encounter dural punctures and PdPH

one of the most common places you will encounter spinal punctures and that **is in** the maternity unit because of the large numbers of epidu

[SECTION: 03 CRITICAL INCIDENTS VENOUS AIR EMBOLISM (VAE)]

03 CRITICAL INCIDENTS VENOUS AIR EMBOLISM (VAE)

72. vENoUS AIR EmBoLIsm

(vAE)

Venous air embolism (VAE) **is** a potential complication of many surgical procedures. The clinical features range **from** sub-clinical to life-threatening cardiovascular collapse depending upon the rate **and** volume of gas that **is** entrained into the circulation.

Examiners will expect an understanding of the types of procedures that are associated **with** an increased risk of VAE, **and** also the ability to diagnose **and** manage the problem.

What procedures are associated > n

[SECTION: 03 CRITICAL INCIDENTS ST SEGMENT CHANGES]

03 CRITICAL INCIDENTS ST SEGMENT CHANGES

70. ST SEGmENT chANGES

What **is** the significance of ST the st segment of the ecg represents repolarisation of the ventricles.

segment change? changes **in** the appearance of the st segments are caused by myocardial

ischaemia **or** myocardial infarction. **in** the face of ischaemia, st segment

depression **or** elevation may occur relative to the isoelectric line. movement

away **from** the isoelectric line of ≥ 1 mm **is** significant.

intra-operative st segment changes require rapid detection **and**

management **in** order to corr

[SECTION: 03 CRITICAL INCIDENTS]

03 CRITICAL INCIDENTS

What **is** the management of a state that this **is** an anaesthetic emergency, **and** that you would call **for** suspected vAE? senior anaesthetic assistance **and** make a rapid but thorough assessment of the patient.

> inform the surgeon who may be able to prevent further embolisation by compression of the surgical site **or** flooding the surgical site **with** saline.

> Administer 100% oxygen **and** discontinue nitrous oxide, which will increase bubble size due to its high solubility.

> increase cVP by tilting the patient slightly head-down, administer fluid **and**

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