



IN-TRAINING EXAMINATION GAPS IN KNOWLEDGE REPORTS

Below is a list of In-Training Examination (ITE) topics describing the questions that a majority of residents incorrectly answered. Each question was reviewed by the ITE Committee as part of key validation and the correct answer was determined to be accurate. The reports are arranged by year.

2018 GAPS IN KNOWLEDGE REPORT

- Increased temperature seen as the immediate result of a platelet transfusion is most likely due to the presence of cytokines in the platelet transfusion
- Facial and airway edema complicating airway management can result from ACE inhibitor associated angioedema
- Prolongation of the duration of action of succinylcholine can occur in patients who are taking donepezil
- According to NIOSH, the recommended maximum level for volatile anesthetics in the ambient air of an OR is 2 parts per million
- An elevated ipsilateral hemidiaphragm is commonly encountered after deep cervical plexus block
- Inhalational general anesthetics exert their effects by binding directly to amphiphilic cavities in proteins

2017 GAPS IN KNOWLEDGE REPORT

- Successful placement of an adductor canal block will result in weakness of the vastus medialis muscle
- Daily palpation of the dressing site for tenderness is recommended by the CDC as a method of preventing catheter-related bloodstream infections with central venous catheters
- Hypoalbuminemia is a potential cause of metabolic alkalosis
- The posterior cricoarytenoid muscles are solely responsible for abduction of the vocal cords, and are attached between the posterior cricoid cartilage and the arytenoid cartilages bilaterally

2016 GAPS IN KNOWLEDGE REPORT

- When viewed on a chest radiograph, the correct position of the tip of a central venous catheter placed via the right internal jugular vein is above the level of the carina
- As minute ventilation increases linearly in a mechanically ventilated patient, PACO₂ decreases asymptotically, with a more rapid decline initially
- When a patient develops a generalized seizure during hyperbaric oxygen therapy, the most appropriate initial treatment is to discontinue inhaled oxygen
- Hyperglycemia should be avoided in the management of patients with hypokalemic periodic paralysis

- Hyperthyroidism will increase beta-1 adrenoceptor density in cardiac sarcolemma
- When placing a femoral nerve block using a nerve stimulator, contraction of the sartorius muscle indicates that the needle needs to be moved deeper and more laterally
- Obesity is a risk factor for postoperative ischemic optic neuropathy after spinal fusion in the prone position
- General anesthesia with sevofurane will result in peripheral vasodilation, blunting the skin's normal vasoconstrictive response to hypothermia
- Occlusion of the gas outlet ports in the oxygenator of the cardiopulmonary bypass machine can result in a gas embolism
- The ASA Physical Status Classification System was originally developed for facilitating comparison of anesthetic data
- During one lung ventilation, ACE inhibitors can attenuate hypoxic pulmonary vasoconstriction