Self Assessment RSPT 2350 – Module C

- 1. The following acronym is used to remember blood gas errors. What do the initials mean?
 - A. "A": **AIR IN THE SAMPLE**
 - B. "V": **VENOUS SAMPLE**
 - C. "E": EXCESSIVE/IMPROPER ANTICOAGULANT
 - D. "R": **RATE OF METABOLISM**
 - E. "T": TEMPERATURE DISPARITY BETWEEN PATIENT & MACHINE
- 2. What is held constant in Gay Lussac's Law?
 - A. VOLUME
 - B. MASS
- Gay Lussac's law states that as temperature increases, pressure will INCREASE.
- Interpret the following ABG obtained on an FiO₂ of .40: pH: 7.56, PaCO₂: 35 torr, HCO₃⁻: 26 mEq/L, and PaO₂: 110 mm Hg LAB ERROR; ALKALOTIC pH WITH NORMAL PaCO₂ AND HCO₃⁻
- Henry's law states that the amount of oxygen that dissolves in the blood is dependent on THE SOLUBILITY OF THE GAS and PARTIAL PRESSURE OF THE GAS.
- 6. Explain how an air bubble will affect the ABG result if the arterial PO₂ is 60 mm Hg.
 - A. PaCO₂ WILL DECREASE
 - B. **PaO₂ WILL INCREASE**
 - C. pH WILL INCREASE
- You are attempting to obtain a femoral ABG from a patient who is hypotensive. You suspect that your ABG may have been contaminated with venous blood. This is called venous admixture. How will this effect the ABG results? A 1/10TH PART CONTAMINATION WILL LEAD TO A 25% ERROR IN PaO₂.

- 8. What is the normal WBC count? 4,000 TO 10,000 (DEPENDS ON LAB), YOUR BOOK SAYS 6,000 TO 10,000!
- In which clinical condition may an elevated WBC count affect the ABG results? LEUKOCYTOSIS
- 10. For each 1° C increase in temperature, oxygen consumption increases 10 %. I WON'T ASK YOU THIS BECAUSE I DON'T HAVE A GREAT REFERENCE FOR IT.
- A near drowning victim is seen in the ER and has a body temperature of 34° C. How will the patient's temperature affect the PaCO₂, PaO₂ and pH?

PaCO ₂ will	A. Increase	B <mark>. Decrease</mark>	C. No change
PaO₂ will	A. Increase	B <mark>. Decrease</mark>	C. No change
рН	A. Increase	B. Decrease	C. No change

- 12. Which cells in the blood are responsible for high metabolic activity? **LEUKOCYTES, PLATELETS, AND RETICULOCYTES**
- 13. The general consensus in the literature is **NOT** to correct for temperature changes when analyzing an ABG.

A. True

B. False THIS IS TRUE, BUT MOST LABS STILL DO.

- 14. You are drawing from an A-line and have not adequately withdrawn enough waste to remove the heparin from the line. Which ABG parameter will most likely be affected?
 - A. HCO₃
 - В. рН
 - C. PaCO₂
 - D. PaO₂
- 15. Which of the following has the greatest effect on an ABG result?
 - A. Size of an air bubble
 - B. Duration of exposure to an air bubble
- 16. Give a clinical example where the patient may look good and have bad ABG results. **METABOLIC ALKALOSIS WHERE PATIENT IS NOT BREATHING RAPIDLY (ACTUALLY HYPOVENTILATION IS COMPENSATORY) AND MAY NOT BE HYPOXEMIC.**

- 17. Give a clinical example where the patient may look bad but have good ABG results. "NORMALIZED" ABG SECONDARY TO HYPERVENTILATION FOR A METABOLIC ACIDOSIS.
- You obtain the following ABG results. What do you think????
 PaO₂: 149 torr SaO₂ 82% measured by co-oximeter
 MetHb% and COHb% are normal Temperature 37° C
 PaCO₂ 40 mm Hg pH 7.40 LAB ERROR