MCQ’s: Pulse Oximeter

1. What are the appropriate alarm limits for saturation in neonates?
   a) 95 - 99%
   b) 85 - 95%
   c) 80 - 85%
   d) 98 - 100%

2. Life of flex or wrap probe is
   a) 6 months
   b) 12 months
   c) 2 years
   d) 3 years

3. Saturation monitors are useful for all EXCEPT:
   a) Quantification of central cyanosis
   b) Monitoring a baby for apnea
   c) Cardio pulmonary resuscitation
   d) Use in delivery room during resuscitation

4. A baby has central cyanosis, the paO\textsubscript{2} is 40 mm of Hg, saturation is likely to be
   a) 80-85 %
   b) 70-75%
   c) < 50%
   d) None of the above

5. All are true about perfusion index EXCEPT
   a) It is the ratio between pulsatile and non pulsatile component of pulse oximetry signal
   b) Changes occur with local vasoconstriction and vasodilatation
   c) If PI is low it means that the saturation is falling
   d) It can be used to choose the site for probe placement

6. Probes are disinfected using
   a) 2% glutaraldehyde
   b) Povidone iodine
   c) 70% alcohol
   d) Distilled water

7. Non uniform waves could occur due to all except
   a) Motion
   b) Falling SpO\textsubscript{2}
   c) Presence of BP cuff proximally
   d) Error in probe fixation