

Diameter and respiratory variation are important components of evaluation of IVC. The type of respiratory effort, spontaneous or mechanical positive pressure will determine if the IVC collapses or increases in diameter. In spontaneous the IVC collapses when fluid responsive (typically greater than 30% collapse), and in positive pressure increases when fluid responsive (typically 13% or greater increase in size).

Question	Your Answer	Correct Answer
1		
2		
3		

In a large study, it was shown that no matter size of patient, most IVC's were in the range of 1.5-2 cm.

Reviewer Comments
As in #1, the IVC is greatest at end inspiration and change from end expiration can be used to judge fluid responsiveness

- Which variables are used to evaluate the IVC?
 - Circumference
 - Diameter
 - Area
 - Respiratory variation
 - B and D**
- When evaluating the IVC, what clinical parameter is important to note?
 - Blood pressure
 - Heart rate
 - Type of ventilation: spontaneous or positive pressure**
 - Age of patient
- Normal diameter of the IVC is:
 - less than 10 mm
 - 10-20 mm**
 - 30-40 mm
 - Greater than 50 mm
- In a patient on positive pressure ventilation with no respiratory effort, when is the IVC diameter largest?
 - ~~End expiration~~
 - End inspiration**
 - Beginning of inspiration
 - Beginning of expiration
- IVC variation is best used to predict:
 - Fluid responsiveness**
 - Pulmonary artery systolic pressure
 - LV ejection fraction
 - RV systolic pressure