

## HKMJ June 2015 CME/CPD for Fellows and non-Fellows

The *Hong Kong Medical Journal* has introduced CME/CPD for Fellows of the Hong Kong Academy of Medicine (HKAM), and registrants of the MCHK CME Programme under the HKAM or the Hong Kong Medical Association can also participate. It is based on published articles in the Journal, and the Editorial Board aims at selecting topics of more general interest to a wide range of specialties. For HKAM Fellows, decision of whether any of the selected article(s) is/are appropriate for CME/CPD exercise rests with the CME/CPD committee of their representative Colleges. Answer sheets sent by Fellows of College(s) that do not assign CME/CPD points will not be processed.

The amount of CME/CPD points awarded (for specialist CME/CPD) to each of the articles by the specific Colleges is indicated at the bottom of this page. Fellows of the specific Colleges can either participate by returning the answer sheet to the quizzes by mail/fax to the Academy or doing the quizzes online at iCMECPD (http://www.icmecpd.hk). If Fellows choose to do a quiz online, their answer sheet for the same quiz sent to the Academy by mail/fax will not be processed.

For the MCHK CME Programme, one CME point has been accredited per article by the Academy. Registrants of the MCHK CME Programme must mail or fax the completed answer sheet to their respective Administrator. Registrants of the Academy must return the answer sheet to the Academy, similarly registrants of the Medical Association must return it to the Association. The Academy and the Association, who are both appointed as Administrators for the MCHK Programme, will not be responsible for re-directing answer sheets sent to the wrong Administrator by mistake to each other.

## **Instructions:**

- 1. Fill in the personal particulars in the answer sheet.
- 2. Shade the correct answer square for each question.
- 3. Mail or fax the Answer Sheet to the Academy or the Medical Association by 31 July 2015.

Category	Answer sheet to be mailed/faxed to:		
Academy Fellows; OR Registrants for	Ref: CMECPD		
the MCHK CME Programme under	Hong Kong Academy of Medicine, 10/F, 99 Wong Chuk Hang		
the Academy	Road, Aberdeen, Hong Kong; fax: (852) 2505 5577		
Registrants for the MCHK/HKMA	The Hong Kong Medical Association		
CME Programme under the Medical	Duke of Windsor Social Service Bldg., 5/F, 15 Hennessy Road,		
<u>Association</u>	Hong Kong;		
	fax: (852) 2865 0943		

## College CME/CPD Points (as of 3 June 2015):

College	CME points I	Passing Mark I	CME points II	Passing Mark II
Hong Kong College of Anaesthesiologists	Nil	Nil	Nil	Nil
Hong Kong College of Community Medicine <sup>1</sup>	CME/CPD points already accredited for reading articles in the Hong Kong			
	Medical Journal under "Self study". No additional CME/CPD points to be			
	granted for the two specified articles.			
College of Dental Surgeons of Hong Kong	1 (Self Study)	50%	1 (Self Study)	50%
Hong Kong College of Emergency Medicine	1 (Self Study)	50%	1 (Self Study)	50%
Hong Kong College of Family Physicians	1 (Cat.5.1)	50%	1 (Cat.5.1)	50%
Hong Kong College of Obstetrics and Gynaecologists	Nil	Nil	Nil	Nil
College of Ophthalmologists of Hong Kong	0.5 (Self Study)	50%	0.5 (Self Study)	50%
Hong Kong College of Orthopaedic Surgeons	Nil	Nil	Nil	Nil
Hong Kong College of Otorhinolaryngologists	1 (Cat.1.2)	80%	1 (Cat.1.2)	80%
Hong Kong College of Paediatricians	1 (Cat.E)	50%	1 (Cat.D)	50%
Hong Kong College of Pathologists	1 (Self Study)	60%	1 (Self Study)	60%
Hong Kong College of Physicians	Nil	Nil	0.5 (Active)	0%
Hong Kong College of Psychiatrists	1 (Self Study)	80%	1 (Self Study)	80%
Hong Kong College of Radiologists	Nil	Nil	Nil	Nil
College of Surgeons of Hong Kong	1 (Self Study)	0%	1 (Self Study)	0%

<sup>&</sup>lt;sup>1</sup> The *Hong Kong Medical Journal* is already included in the list of the College's approved journals for self-study. One hour of self-study is awarded 1 point

Answer Sheet - Hong Kon	ng Medical Journal June 2015 Issue			
Name:				
Hong Kong Academy of Medicine	Hong Kong Medical Association			
For Academy Fellows:	HKMA Membership or CME No.:			
College: Fellowship No:	HKID No: X X (X)			
For MCHK CME Registrants:	Contact Telephone No.:			
MCHK Reg. No	Signature:			
		<del></del>		
I. Hospital Authority audit of the outcome of endoscopic resection of superficial upper gastro-intestinal lesions in Hong Kong		True	False	
A. Which of the following statement(s) regarding end	loscopic resection is/are true?			
1. Endoscopic resection is indicated for lesions confined to the mucosa and submucosa with		$\overline{\checkmark}$		
limited risk of distant metastasis.		<b>✓</b>	П	
*	osal resection (EMR) and endoscopic submucosal dissection (ESD) are			
methods of performing endoscopic resection.  3. ESD is indicated in lesion size of >5 cm.			<b>✓</b>	
<ul><li>4. ESD is indicated in lesion size of &gt;5 cm.</li><li>4. ESD is preferred over EMR as the former is associated with a higher en-bloc resection rate.</li></ul>		$\overline{\mathbf{V}}$		
5. ESD is more technically demanding than EMR.		✓		
B. Which of the following statement(s) concerning ea	arly gastric cancer is/are true?			
1. Early gastric cancers are confined to the mucosa and submucosa.		$\overline{\checkmark}$		
2. Early gastric cancers are associated with a high risk for lymph node metastasis.			$\overline{\checkmark}$	
3. Diagnosis of early gastric cancers requires a high index of suspicion.				
4. Early gastric cancers are associated with a 5-year survival rate of over 90%.				
5. Gastrectomy is the only modality that can provide cure for early gastric cancers.			$\overline{\mathbf{Q}}$	

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

True

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

П

V

False

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

 $\overline{\mathbf{V}}$ 

C. Which of the following statement(s) about the learning curve of ESD is/are true?

1. The procedure should be performed by doctors with adequate training and case volume.

4. A best practice guideline should be implemented by the Hospital Authority for standardisation

5. Learning of the procedure in porcine models before performing in human cases is recommended.

A. Which of the following statement(s) about management of childhood-onset eczema is/are true?

1. Management of eczema is guideline-driven and need not consider individual symptomatic

2. Basic therapy is focused on patient/family education, hydrating topical treatment, and avoidance

3. Anti-inflammatory treatment based on topical glucocorticosteroids and topical calcineurin

5. With optimal topical treatment and compliance, parents can be assured that eczema is a curative

2. Topical tacrolimus has been proven to be associated with skin and lymphoid malignancies in

3. Vancomycin is the first-line antibiotic to use as children with eczema are often colonised with

4. Non-sedating third-generation antihistamines are proven to be efficacious for the symptoms of

4. There is no place for complementary and alternative medicine in eczema management.

1. Skin thinning and osteoporosis are common side-effects with 1% hydrocortisone cream.

B. Which of the following statement(s) concerning eczema medications is/are true?

5. Herbal medicine does not have any side-effects and is curative for eczema.

inhibitors is used for exacerbation management and more recently in selective cases for

2. The risk of perforation is highest when performed by an experienced doctor.3. The number or procedures required to gain competency is 20 to 40 cases.

II. Eczema therapeutics in children: what do the clinical trials say?

of specific and non-specific provocative factors.

children and therefore should not be prescribed.

methicillin-resistant Staphylococcus aureus.

of the procedure.

variability.

disease.

proactive therapy.

itch and sleep loss.