

HKMJ December 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 January 2016**.

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

College CME/CPD Points (as of 15 December 2015) :

College	CME points I	Passing Mark I	CME points II	Passing Mark II
Hong Kong College of Anaesthesiologists	1 (Ana-Active)	0%	Nil	Nil
Hong Kong College of Community Medicine ¹	CME/CPD points already accredited for reading articles in the <i>Hong Kong Medical Journal</i> 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 Obstetricians 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	1 (Cat. C)	50%	1 (Cat. C)	50%
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	1 (Active)	0%	1 (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%

¹ 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

CME Points for MCHK CME Programme: 1 CME point per article

Answer Sheet – Hong Kong Medical Journal December 2015 Issue

Name: _____

Hong Kong Academy of Medicine	Hong Kong Medical Association
<i>For Academy Fellows:</i> College: _____ Fellowship No: _____	HKMA Membership or CME No.: _____ HKID No: __ __ - __ __ __ __ X X (X)
<i>For MCHK CME Registrants:</i> MCHK Reg. No. _____	Contact Telephone No.: _____ Signature: _____

I. Outcome of elderly patients who receive intensive care at a regional hospital in Hong Kong	<i>True</i>	<i>False</i>
A. Which of the following statement(s) concerning elderly patients who receive intensive care is/are true?		
1. According to the published data from Australia and Austria, the intensive care unit (ICU) admission rates for those aged ≥ 80 years decreased over time.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. The decision to admit or decline a patient from ICU care should not depend solely on patient's age.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Severity of illness and premorbid functional status are important determinants of ICU outcome.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Commonly used ICU prognostic scores, eg Acute Physiology and Chronic Health Evaluation score and simplified acute physiology score, include age as one of the components of a mortality risk prediction model.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. There are plenty of local data focused on the outcome of critically ill elderly patients.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B. Which of the following statement(s) regarding the outcome of elderly patients who receive intensive care is/are true?		
1. For those patients aged ≥ 60 years, their ICU and hospital mortality decreased gradually over 5 years of study period.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. The ICU admission rate for those patients aged ≥ 80 years increased over 5 years.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Compared with patients aged 60 to 79 years, those aged ≥ 80 years had more co-morbidities and had greater disease severity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Less than half of those aged ≥ 80 years could be discharged home.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. The mortality rates were similar for those ≥ 80 years and those aged 60 to 79 years with low disease severity but the gap widened with higher disease severity.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
II. Clinicopathological effects of pepper (oleoresin capsicum) spray	<i>True</i>	<i>False</i>
A. Which of the following statement(s) about the pepper spray is/are true?		
1. Pepper spray is hydrophilic and therefore water is good for decontamination after exposure to it.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. The major constituent of pepper spray that exhibits pungency is capsaicin.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Inhalation of pepper spray induces not only cough, but also bronchoconstriction.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Positional asphyxia is not regarded as a precipitating cause of pepper spray-related death.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Capsaicin-induced neurogenic inflammation is associated with heat allodynia and thermal hyperalgesia.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. Which of the following statement(s) concerning the management after pepper spray exposure is/are true?		
1. Pepper spray victim is advised to immediately rub over the skin to get rid of the pepper spray residue after exposure.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. It is helpful to irrigate the upper and lower palpebral cul-de-sac because spray residues tend to collect there and become entrapped.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Cool water soothes the burning sensation to the area affected by pepper spray.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. The effect of pepper spray is transient and will not cause permanent ocular complications.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Beware of secondary contamination by contaminated clothing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>