

HKMJ December 2018 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 2019**.

Category	Answer sheet to be mailed/faxed to:
Academy Fellows; OR 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 28 November 2018) :

College	CME points I	Passing Mark I	CME points II	Passing Mark II
Hong Kong College of Anaesthesiologists	1 (Ana-active)	50%	1 (Ana-active)	50%
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	Pending		Pending	
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. D)	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 (SS/OL)	80%	1 (SS/OL)	80%
Hong Kong College of Radiologists	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 2018 Issue

Name: _____

<p>Hong Kong Academy of Medicine</p> <p><i>For Academy Fellows:</i> College: _____ Fellowship No: _____</p> <p><i>For MCHK CME Registrants:</i> MCHK Reg. No. _____</p>	<p>Hong Kong Medical Association</p> <p>HKMA Membership or CME No.: _____</p> <p>HKID No: ____ - ____ X X (X)</p> <p>Contact Telephone No.: _____</p> <p>Signature: _____</p>
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I. Group A <i>Streptococcus</i> disease in Hong Kong children: an overview	<i>True</i>	<i>False</i>
<p>A. Are the following statements regarding the characteristic features of toxic shock syndrome caused by Group A streptococcal infection true or false?</p> <ol style="list-style-type: none"> Organ dysfunction can precede hypotension. <input type="checkbox"/> <input type="checkbox"/> It is more commonly associated with pharyngitis than with skin infection. <input type="checkbox"/> <input type="checkbox"/> Blood culture is always positive. <input type="checkbox"/> <input type="checkbox"/> The portal of bacteria entry is not obvious in 50% of cases. <input type="checkbox"/> <input type="checkbox"/> Endotoxins produced by the bacteria are associated with disease invasiveness. <input type="checkbox"/> <input type="checkbox"/> 		
<p>B. Are the following statements about antibiotic treatment for Group A β-haemolytic <i>Streptococcus</i> (GABHS) pharyngitis in children true or false?</p> <ol style="list-style-type: none"> All GABHS in Hong Kong are sensitive to macrolides. <input type="checkbox"/> <input type="checkbox"/> Carriers of GABHS shall always be treated to prevent recurrence. <input type="checkbox"/> <input type="checkbox"/> Throat swab for rapid antigen tests has a 95% sensitivity in excluding GABHS infection. <input type="checkbox"/> <input type="checkbox"/> Inadequate treatment can lead to immune-mediated late complications. <input type="checkbox"/> <input type="checkbox"/> Broad-spectrum antibiotics are recommended for young children. <input type="checkbox"/> <input type="checkbox"/> 		
II. Medication overuse headache: strategies for prevention and treatment using a multidisciplinary approach	<i>True</i>	<i>False</i>
<p>A. Are the following statements regarding the detection and diagnosis of medication overuse headache (MOH) true or false?</p> <ol style="list-style-type: none"> Globally, MOH is among the most prevalent neurological causes of disability, and is more prevalent than migraine. <input type="checkbox"/> <input type="checkbox"/> MOH can be due to the use of simple analgesics and is then defined as headaches occurring on ≥ 15 days per month associated with use of simple analgesics on ≥ 15 days per month and occurring for ≥ 3 months. <input type="checkbox"/> <input type="checkbox"/> The risk of developing MOH is higher in patients using triptans than in those using codeine products. <input type="checkbox"/> <input type="checkbox"/> Overuse of simple analgesics, such as paracetamol and nonsteroidal anti-inflammatory drugs, can be easily picked up by pharmacists. <input type="checkbox"/> <input type="checkbox"/> Migraines can be diagnosed by asking about the impact of headache, nausea, and sensitivity to light. <input type="checkbox"/> <input type="checkbox"/> 		
<p>B. Are the following statements concerning the management of medication overuse headache (MOH) true or false?</p> <ol style="list-style-type: none"> The risk of relapse is highest in the first year after withdrawal. <input type="checkbox"/> <input type="checkbox"/> After withdrawal from the overused medication patients usually remain free of headaches. <input type="checkbox"/> <input type="checkbox"/> Strategies to minimise the risk of MOH in migraine patients include use of prophylaxis, triptans for severe episodes, and paracetamol/codeine for mild headaches. <input type="checkbox"/> <input type="checkbox"/> Abrupt withdrawal from overused medication with support from a multidisciplinary team is the preferred strategy. <input type="checkbox"/> <input type="checkbox"/> Topiramate, an antiepileptic drug, is recommended for prevention of chronic migraine. <input type="checkbox"/> <input type="checkbox"/> 		