

HKMJ December 2019 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 2020**.

Category	Answer sheet to be mailed/faxed to:
Academy Fellows; OR Registrants for the MCHK CME Programme <u>under the Academy</u>	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 <u>under the Medical Association</u>	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 5 December 2019) :

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 (AP – Cat.A)	100%	1 (AP – Cat.A)	100%
Hong Kong College of Otorhinolaryngologists	Pending		Pending	
Hong Kong College of Paediatricians	1 (Active Cat.D)	50%	1 (Active Cat.E)	50%
Hong Kong College of Pathologists	1 (Self Study)	60%	1 (Self Study)	60%
Hong Kong College of Physicians	Nil		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 2019 Issue

Name: _____

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

I. In vitro fertilisation in Hong Kong: the situation in 2019	<i>True</i>	<i>False</i>
A. Which of the following is the most common complication of in vitro fertilisation?		
1. Congenital abnormality of the fetus	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Ectopic pregnancy	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Multiple pregnancy	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Ovarian hyperstimulation syndrome	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Preterm delivery	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B. Which of the following symptoms can be found in women with ovarian hyperstimulation syndrome?		
1. Ascites	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Dyspnoea	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Enlarged ovaries	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Oliguria	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Pleural effusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>
II. Assessment and diagnosis of dementia: a review for primary healthcare professionals	<i>True</i>	<i>False</i>
A. Are the following statements regarding the differential diagnosis of cognitive impairment true or false?		
1. The normal cognitive decline associated with ageing consists primarily of mild changes in memory and the rate of information processing, and does usually affect daily function.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Mild cognitive impairment is defined by the presence of memory difficulty and objective memory impairment but preserved ability to function in daily life.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Memory impairment is commonly associated with major depression in elderly people and it can cause pseudo-dementia syndrome.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Delirium is common in both community-dwelling elderly people and hospitalised elderly patients.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Patients with dementia are at increased risk of delirium, and that delirium and dementia may coexist.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. Are the following statements true or false?		
1. In patients with Alzheimer's disease, memory impairment is the most frequent feature, and deficits in language function and behavioural symptoms often manifest early, with executive function and impaired visuospatial skills tend to be affected later in the disease course.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Patients with post-stroke dementia experience a stepwise cognitive decline after a clinically diagnosed stroke.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Dementia with Lewy bodies occurs with symptoms of Parkinsonism, rapid eye movement sleep behavioural disorder, and fluctuation of cognition.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Antipsychotic drugs should be the first-line management of behavioural and psychological symptoms of dementia.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. The cut-offs of Hong Kong–Montreal Cognitive Assessment should be adjusted based on education level.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>