HKMJ April 2020 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 May 2020.

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

<table>
<thead>
<tr>
<th>College</th>
<th>CME points I</th>
<th>Passing Mark I</th>
<th>CME points II</th>
<th>Passing Mark II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hong Kong College of Anaesthesiologists</td>
<td>1 (Self Study)</td>
<td>50%</td>
<td>1 (Self Study)</td>
<td>50%</td>
</tr>
<tr>
<td>Hong Kong College of Community Medicine</td>
<td>0.5 (Self Study)</td>
<td>50%</td>
<td>0.5 (Self Study)</td>
<td>50%</td>
</tr>
<tr>
<td>College of Dental Surgeons of Hong Kong</td>
<td>1 (Self Study)</td>
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<td>1 (Self Study)</td>
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</tr>
<tr>
<td>Hong Kong College of Emergency Medicine</td>
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<td>1 (Self Study)</td>
<td>50%</td>
</tr>
<tr>
<td>Hong Kong College of Family Physicians</td>
<td>1 (Cat.5.1)</td>
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<td>1 (Cat.5.1)</td>
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</tr>
<tr>
<td>Hong Kong College of Obstetricians and Gynaecologists</td>
<td>1 (non O&amp;G)</td>
<td>0%</td>
<td>1 (O&amp;G)</td>
<td>60%</td>
</tr>
<tr>
<td>College of Ophthalmologists of Hong Kong</td>
<td>0.5 (Self Study)</td>
<td>50%</td>
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<td>50%</td>
</tr>
<tr>
<td>Hong Kong College of Orthopaedic Surgeons</td>
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<td>Pending</td>
<td>Pending</td>
</tr>
<tr>
<td>Hong Kong College of Otorhinolaryngologists</td>
<td>1 (Cat.1.2)</td>
<td>80%</td>
<td>1 (Cat.1.2)</td>
<td>80%</td>
</tr>
<tr>
<td>Hong Kong College of Paediatricians</td>
<td>1 (Active Cat.E)</td>
<td>50%</td>
<td>1 (Active Cat.D)</td>
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</tr>
<tr>
<td>Hong Kong College of Pathologists</td>
<td>1 (Self Study)</td>
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<td>1 (Self Study)</td>
<td>60%</td>
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<tr>
<td>Hong Kong College of Physicians</td>
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<td>0.5 (Active)</td>
<td>0%</td>
</tr>
<tr>
<td>Hong Kong College of Psychiatrists</td>
<td>1 (Self Study)</td>
<td>80%</td>
<td>1 (Self Study)</td>
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<tr>
<td>Hong Kong College of Radiologists</td>
<td>1 (Self Study)</td>
<td>50%</td>
<td>Nil</td>
<td></td>
</tr>
<tr>
<td>College of Surgeons of Hong Kong</td>
<td>1 (Self Study)</td>
<td>0%</td>
<td>1 (Self Study)</td>
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</tbody>
</table>

CME Points for MCHK CME Programme: 1 CME point per article
I. Patient-reported outcomes after surgery or radiotherapy for localised prostate cancer: a retrospective study

<table>
<thead>
<tr>
<th>A. Are the following complications of prostatectomy reported in this series true or false?</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Prostatectomy patients had more bowel symptoms immediately after surgery.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>2. New-onset erectile dysfunctions were more prevalent in patients who had prostatectomy than patients who received radiotherapy.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>3. Prostatectomy patients reported more irritative symptoms documented in medical record.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>4. There was no unplanned readmission after surgery in prostatectomy patients.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5. Prostatectomy patients had poorer urinary function and incontinence as reported in the Expanded Prostate Cancer Index Composite (EPIC) questionnaire.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Are the following complications of radiotherapy reported in this series true or false?</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. More patients had rectal bleeding after receiving radiotherapy than those who had surgery.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>2. The most common reason for unplanned hospital admission was acute retention of urine.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>3. Patients treated with radiotherapy had better sexual function score as reported in EPIC questionnaire.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>4. Except in the initial 3 months after treatment, patients who received radiotherapy had much lower incidence of urinary symptoms (other than incontinence) than patients received surgery.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5. Despite more bowel symptoms reported in patients who received radiotherapy, there was no difference in the EPIC bowel symptom score between patients treated with radiotherapy and surgery.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

II. Congenital infections in Hong Kong: an overview of TORCH

<table>
<thead>
<tr>
<th>A. Which of the following bacterial infections are considered as TORCH congenital infections?</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Group B Streptococcal infection</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>2. Syphilis</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>3. Staphylococcal infection</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>4. Mycoplasma infection</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5. <em>Escherichia coli</em> infection</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Which of the following viral infections are considered as TORCH congenital infections?</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. German measles</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>2. Coronavirus disease</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>3. Herpes simplex</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>4. Zika</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>5. Measles</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>