

HKMJ October 2021 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 **30 November 2021**.

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 18 November 2021):

College	CME points I	Passing Mark I	CME points II	Passing Mark II
Hong Kong College of Anaesthesiologists	1 (Non-Ana)	50%	1 (Non-Ana)	50%
Hong Kong College of Community Medicine	0.5 (Self Study)	50%	0.5 (Self Study)	50%
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.5.01)	50%	1 (Cat.5.01)	50%
Hong Kong College of Obstetricians and Gynaecologists	1 (non-O&G)	60%	1 (non O&G)	60%
College of Ophthalmologists of Hong Kong	0.5 (Self Study)	50%	0.5 (Self Study)	50%
Hong Kong College of Orthopaedic Surgeons	1 (PP-Cat.A)	80%	1 (PP-Cat.A)	80%
Hong Kong College of Otorhinolaryngologists	1 (Cat.1.2)	80%	1 (Cat.1.2)	80%
Hong Kong College of Paediatricians	1 (Active Cat.D)	50%	Nil	Nil
Hong Kong College of Pathologists	1 (Self Study)	60%	1 (Self Study)	60%
Hong Kong College of Physicians	1 (Active)	0%	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%

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

Answer Sheet – Hong Kong Medical Journal October 2021 Issue

Name: _____

Hong Kong Academy of Medicine <i>For Academy Fellows:</i> College: _____ Fellowship No: _____ <i>For MCHK CME Registrants:</i> MCHK Reg. No. _____	Hong Kong Medical Association HKMA Membership or CME No.: _____ HKID No: __ __ - __ __ __ __ X X (X) Contact Telephone No.: _____ Signature: _____
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I. Multicentre study of hospitalised patients with sports- and recreational cycling-related traumatic brain injury in Hong Kong	<i>True</i>	<i>False</i>
A. Are the following statements regarding cycling-associated traumatic brain injury (TBI) true or false? 1. Cycling is the sport most frequently associated with TBI in Hong Kong. <input type="checkbox"/> <input type="checkbox"/> 2. Patients hospitalised for cycling-associated TBI were significantly younger than those with TBI due to other sports. <input type="checkbox"/> <input type="checkbox"/> 3. 47% of patients hospitalised for cycling-associated TBI had intracranial haemorrhage. <input type="checkbox"/> <input type="checkbox"/> 4. The overall incidence of post-concussion syndrome was low and was similar between patients with cycling-associated TBI and those with TBI due to other sports. <input type="checkbox"/> <input type="checkbox"/> 5. Patients hospitalised for cycling-associated TBI had a three-fold increased risk of extracranial injury compared with patients of other sports. <input type="checkbox"/> <input type="checkbox"/>		
B. Are the following statements concerning helmet wearing among cyclists true or false? 1. Controversy exists in the medical literature regarding the protective effect of helmet wearing among cyclists. <input type="checkbox"/> <input type="checkbox"/> 2. In Hong Kong, among patients hospitalised for cycling-associated TBI, an increase in helmet use (15%) was observed compared with that more than a decade ago. <input type="checkbox"/> <input type="checkbox"/> 3. Helmet wearing reduced the risk of intracranial haemorrhage among patients hospitalised for mild TBI associated with cycling (defined as a Glasgow Coma Score of 14-15). <input type="checkbox"/> <input type="checkbox"/> 4. Helmet wearing did not reduce the risk of skull fractures among patients hospitalised for cycling-associated TBI. <input type="checkbox"/> <input type="checkbox"/> 5. Helmet wearing for all cyclists is mandated by law in Hong Kong. <input type="checkbox"/> <input type="checkbox"/>		
II. Total knee arthroplasty is safe for patients aged ≥80 years in Hong Kong	<i>True</i>	<i>False</i>
A. Are the following statements regarding total knee arthroplasty (TKA) in patients aged ≥80 years true or false? 1. Mortality rate within a year of surgery is >1.5%. <input type="checkbox"/> <input type="checkbox"/> 2. Mortality rates after TKA are higher in patients aged ≥80 years than in patients aged <80 years. <input type="checkbox"/> <input type="checkbox"/> 3. Significant improvements in pain after surgery can be expected. <input type="checkbox"/> <input type="checkbox"/> 4. Significant improvements in function after surgery cannot be expected. <input type="checkbox"/> <input type="checkbox"/> 5. The 1-year mortality rate of patients aged ≥80 years who have undergone TKA is higher than that of similarly aged adults who have not undergone TKA. <input type="checkbox"/> <input type="checkbox"/>		
B. Are the following statements about trends in TKA in Hong Kong between 2010 and 2019 true or false? 1. The median age at TKA is lower for the second half of this time period compared with that in the first half. <input type="checkbox"/> <input type="checkbox"/> 2. The proportion of patients aged ≥80 years at the time of TKA has increased over this time period. <input type="checkbox"/> <input type="checkbox"/> 3. The proportion of patients aged ≥80 years at the time of TKA between 2010 and 2019 is lower than that between 2000 and 2009. <input type="checkbox"/> <input type="checkbox"/> 4. Waiting time for TKA in the Hospital Authority (HA) system has decreased over this time period. <input type="checkbox"/> <input type="checkbox"/> 5. The number of TKA operations performed per year in the HA system in 2019 was more than twice the number of TKA operations performed in 2010. <input type="checkbox"/> <input type="checkbox"/>		