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 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.

<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>
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</table>

College CME/CPD Points (as of 18 November 2021):

<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 (Non-Ana)</td>
<td>50%</td>
<td>1 (Non-Ana)</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>
<td>50%</td>
<td>1 (Self Study)</td>
<td>50%</td>
</tr>
<tr>
<td>Hong Kong College of Emergency Medicine</td>
<td>1 (Self Study)</td>
<td>50%</td>
<td>1 (Self Study)</td>
<td>50%</td>
</tr>
<tr>
<td>Hong Kong College of Family Physicians</td>
<td>1 (Cat.5.01)</td>
<td>50%</td>
<td>1 (Cat.5.01)</td>
<td>50%</td>
</tr>
<tr>
<td>Hong Kong College of Obstetricians and Gynaecologists</td>
<td>1 (non-O&amp;G)</td>
<td>60%</td>
<td>1 (non O&amp;G)</td>
<td>60%</td>
</tr>
<tr>
<td>College of Ophthalmologists of Hong Kong</td>
<td>0.5 (Self Study)</td>
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<tr>
<td>Hong Kong College of Orthopaedic Surgeons</td>
<td>1 (PP-Cat.A)</td>
<td>80%</td>
<td>1 (PP-Cat.A)</td>
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</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.D)</td>
<td>50%</td>
<td>Nil</td>
<td>Nil</td>
</tr>
<tr>
<td>Hong Kong College of Pathologists</td>
<td>1 (Self Study)</td>
<td>60%</td>
<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%</td>
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<td>0%</td>
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<tr>
<td>Hong Kong College of Psychiatrists</td>
<td>1 (Self Study)</td>
<td>80%</td>
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<td>80%</td>
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<tr>
<td>Hong Kong College of Radiologists</td>
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<td>Nil</td>
<td>Nil</td>
<td>Nil</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. Multicentre study of hospitalised patients with sports- and recreational cycling-related traumatic brain injury in Hong Kong

<table>
<thead>
<tr>
<th>Statement</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. 1. Cycling is the sport most frequently associated with TBI in Hong Kong.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 2. Patients hospitalised for cycling-associated TBI were significantly younger than those with TBI due to other sports.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 3. 47% of patients hospitalised for cycling-associated TBI had intracranial haemorrhage.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 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.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 5. Patients hospitalised for cycling-associated TBI had a three-fold increased risk of extracranial injury compared with patients of other sports.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. 1. Controversy exists in the medical literature regarding the protective effect of helmet wearing among cyclists.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 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.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 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).</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 4. Helmet wearing did not reduce the risk of skull fractures among patients hospitalised for cycling-associated TBI.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 5. Helmet wearing for all cyclists is mandated by law in Hong Kong.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

## II. Total knee arthroplasty is safe for patients aged ≥80 years in Hong Kong

<table>
<thead>
<tr>
<th>Statement</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. 1. Mortality rate within a year of surgery is &gt;1.5%.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 2. Mortality rates after TKA are higher in patients aged ≥80 years than in patients aged &lt;80 years.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 3. Significant improvements in pain after surgery can be expected.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 4. Significant improvements in function after surgery cannot be expected.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>A. 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.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement</th>
<th>True</th>
<th>False</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. 1. The median age at TKA is lower for the second half of this time period compared with that in the first half.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 2. The proportion of patients aged ≥80 years at the time of TKA has increased over this time period.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 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.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 4. Waiting time for TKA in the Hospital Authority (HA) system has decreased over this time period.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>B. 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.</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>