

HKMJ February 2022 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 March 2022**.

<i>Category</i>	<i>Answer sheet to be mailed/faxed to:</i>
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 23 February 2022):

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	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 (PP-Cat A)	80%	Nil	
Hong Kong College of Otorhinolaryngologists	1 (Cat.1.2)	80%	1 (Cat.1.2)	80%
Hong Kong College of Paediatricians	1 (Active Cat.E)	50%	1 (Active Cat.D)	50%
Hong Kong College of Pathologists	1 (Self Study)	60%	1 (Self Study)	60%
Hong Kong College of Physicians	0.5 (Active)	0%	1 (Active)	0%
Hong Kong College of Psychiatrists	1 (Self Study)	80%	1 (Self Study)	80%
Hong Kong College of Radiologists	Nil		1 (Self Study)	50%
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 February 2022 Issue

Name: _____

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

I. Clinical outcomes of fast-track total knee arthroplasty for patients aged >80 years	<i>True</i>	<i>False</i>
A. Are the following statements regarding the protocol of fast-track total knee arthroplasty for patients aged >80 years true or false?		
1. All patients aged >80 years were admitted the day before surgery.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Blood transfusion was initiated if haemoglobin level dropped to <8 g/dL after surgery.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. For patients with discharge problems, placement was arranged by medical social worker prior to surgery to provide patients with early ambulatory environment and to reduce in-patient period.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Spinal anaesthesia was the preferred anaesthesia of choice in most of the cases.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Multimodal analgesia was prescribed after surgery to ensure adequate pain control.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. Are the following statements concerning the outcome of fast-track total knee arthroplasty for patients aged >80 years true or false?		
1. Hospital length of stay for patients aged >80 years was significantly longer than that for younger patients.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. The functional outcome gain in 1 year in terms of Knee Society Score was significantly higher in patients aged >80 years compared with younger patients.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Patients with history of peptic ulcer disease were more likely to develop postoperative complications.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. After adjusting for confounding factors, age >80 years was the predictor for complications.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. The commonest postoperative complication in this cohort was urinary catheterisation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
II. Prevalence of unruptured intracranial aneurysms in the Hong Kong general population and comparison with individuals with symptoms or history of cerebrovascular disease	<i>True</i>	<i>False</i>
A. Are the following statements regarding the methodology for estimation of the prevalence of cerebral aneurysm true or false?		
1. Retrospective studies tend to show lower prevalence rates than do prospective studies.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Prevalence does not vary with the modality of aneurysm detection.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. The prevalence generally increases with the sensitivity of detection techniques.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Autopsy studies tend to show much higher prevalence rates than arteriogram studies or magnetic resonance angiography studies.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Intracranial aneurysms are commonly overlooked at autopsy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. Are the following statements about the prevalence of cerebral aneurysm true or false?		
1. Unruptured cerebral aneurysms are more common in women and in those with older age.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Comparison of the prevalence between published studies is meaningful without considering the sex ratio and age distribution of the study samples.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Age- and sex-specific prevalences are more meaningful references than overall prevalence in clinical practice.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. The prevalence is unchanged in subject groups with a family history, history of cerebral aneurysm, or presence of symptoms relevant to cerebral aneurysm.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. The overall prevalence in a population at any time point is dependent on the sex and age composition of the population at that particular time point.	<input checked="" type="checkbox"/>	<input type="checkbox"/>