

HKMJ February 2023 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 2023.

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

College CME/CPD Points (as of 21 February 2023):

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 B)	80%	1 (PP-Cat B)	80%
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	1 (Active)	0%	1 (Active)	0%
Hong Kong College of Psychiatrists	1 (Self Study)	80%	1 (Self Study)	80%
Hong Kong College of Radiologists	1 (Self Study)	50%	1 (Self Study)	50%
College of Surgeons of Hong Kong	1 (Self Study)	0%	1 (Self Study)	0%

Answer Sheet – Hong Kong Medical Journal February 2023 Issue

Name:

Hong Kong Academy of Medicine		Hong Kong Medical Association		
For Academy Fellows:		HKMA Membership or CME No.:		
Co	llege: Fellowship No:	HKID No: X X (X)		
		Contact Telephone No.:		
For	r MCHK CME Registrants:	•		_
MCHK Reg. No.:		Signature:		
I.	Cost-minimisation analysis of intravenous versus s	ubcutaneous trastuzumab regimen	True	False
	for breast cancer management in Hong Kong			
A.	Are the following statement(s) regarding the cost of b trastuzumab true or false?	reast cancer treatment using		
1		a the total east of treatment		
	 Human resource is the most significant factor affecting the total cost of treatment. Drug acquisition is the most significant factor affecting the total cost of treatment. 			
	 Drug acquisition is the most significant factor affecting the total cost of treatment. Compared with intravenous trastuzumab, subcutaneous route is more cost-effective by 			\square
3. Compared with intravenous trastuzumab, subcutaneous route is more cost-effective by reducing the number of clinic visits. □				IV.
4	4. Compared with subcutaneous trastuzumab, intravenous route would be more cost-effective			V
	if the price is reduced by 20%.			
5.	*			$\overline{\checkmark}$
B. Are the following statement(s) concerning the cost-minimisation analysis true or false?				
1. It is one of the analysis methods used in pharmacoeconomics and commonly used in			$\overline{\square}$	
	formulary management.			
2.	It is only applicable when both treatments are of comp	oarable efficacy.		
3.	It takes patients' preferences into consideration.			$\overline{\mathbf{Q}}$
	4. Direct non-medical costs can also be incorporated in the analysis.			
	It can be conducted from other perspectives, including		$\overline{\mathbf{Q}}$	
II.	Ten-year refractive and visual outcomes of intraoc	ular lens implantation in infants	True	False
	with congenital cataract		True	False
	with congenital cataract Are the following statement(s) regarding refractive ch		True	False
A.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false?	ange after cataract surgery and		
A.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that	ange after cataract surgery and n myopic shift.		V
A.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic	ange after cataract surgery and n myopic shift. shift in a growing eye, as the		
A.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an	ange after cataract surgery and n myopic shift. shift in a growing eye, as the		<u>d</u>
A. 1. 2.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth.	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during		V
A. 1. 2.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during		
A. 1. 2. 3.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed.	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery		
A. 1. 2. 3.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift.	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e.		
A. 1. 2. 3.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of life A hyperopic initial postoperative target refraction is us	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e.		
A. 1. 2. 3. 4. 5.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age.	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate		
A. 1. 2. 3. 4. 5.	with congenital cataract Are the following statement(s) regarding refractive ch intraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of life A hyperopic initial postoperative target refraction is us	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes		
A. 1. 2. 3. 4. 5.	with congenital cataract Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical corrections.	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false?		
A. 1. 2. 3. 4. 5.	with congenital cataract Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical corrafter cataract surgery and intraocular lens implantation Appropriate optical correction after cataract extraction avoid amblyopia.	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false? in infants is important for efforts to		
A. 1. 2. 3. 4. 5.	with congenital cataract Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical corrafter cataract surgery and intraocular lens implantation Appropriate optical correction after cataract extraction avoid amblyopia. Optical correction after cataract surgery in infants can	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false? In in infants is important for efforts to be achieved through a combination of		
A. 1. 2. 3. 4. 5. B. 1.	with congenital cataract Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of life A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical corrafter cataract surgery and intraocular lens implantation Appropriate optical correction after cataract extraction avoid amblyopia. Optical correction after cataract surgery in infants can intraocular lens implantation, contact lenses, and speci	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false? In in infants is important for efforts to be achieved through a combination of tacles.		
A. 1. 2. 3. 4. 5.	with congenital cataract Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical correction after cataract surgery and intraocular lens implantation Appropriate optical correction after cataract extraction avoid amblyopia. Optical correction after cataract surgery in infants can intraocular lens implantation, contact lenses, and spec Hyperopia is less amblyogenic than myopia in young the state of the second sec	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false? In in infants is important for efforts to be achieved through a combination of tacles. children, particularly among patients		
A. 1. 2. 3. 4. 5. B. 1. 2.	Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical corrafter cataract surgery and intraocular lens implantation Appropriate optical correction after cataract extraction avoid amblyopia. Optical correction after cataract surgery in infants can intraocular lens implantation, contact lenses, and spect Hyperopia is less amblyogenic than myopia in young who exhibit pseudophakia-related accommodation los	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false? In infants is important for efforts to be achieved through a combination of tacles. children, particularly among patients s.		
A. 1. 2. 3. 4. 5. B. 1.	with congenital cataract Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical corrafter cataract surgery and intraocular lens implantation Appropriate optical correction after cataract extraction avoid amblyopia. Optical correction after cataract surgery in infants can intraocular lens implantation, contact lenses, and spec Hyperopia is less amblyogenic than myopia in young who exhibit pseudophakia-related accommodation los Parental motivation and the likelihood of compliance in the state of the property of the state	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false? In infants is important for efforts to be achieved through a combination of tacles. children, particularly among patients s.		
A. 1. 2. 3. 4. 5. B. 1. 2.	Are the following statement(s) regarding refractive chintraocular lens implantation in infants true or false? In the long-term, hyperopic shift is more common that The presence of an intraocular lens magnifies myopic intraocular lens exhibits constant power and moves an ocular growth. Long-term refractive change can be accurately predict is performed. Myopic shift only occurs during the first 2 years of lift A hyperopic initial postoperative target refraction is us for the likely myopic shift that occurs with age. Are the following statement(s) concerning optical corrafter cataract surgery and intraocular lens implantation Appropriate optical correction after cataract extraction avoid amblyopia. Optical correction after cataract surgery in infants can intraocular lens implantation, contact lenses, and spect Hyperopia is less amblyogenic than myopia in young who exhibit pseudophakia-related accommodation los	ange after cataract surgery and n myopic shift. shift in a growing eye, as the teriorly away from the retina during ed based on the age at which surgery e. sually chosen in infants to compensate rection and long-term visual outcomes in infants true or false? In infants is important for efforts to be achieved through a combination of tacles. children, particularly among patients s. should be included in decisions		