

HKMJ June 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 July 2023**.

Category	Answer sheet to be mailed/faxed to:
Academy Fellows; <i>OR</i> 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 21 June 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	Pending		Pending	
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	Pending		Pending	
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.E)	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%

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

Answer Sheet – Hong Kong Medical Journal June 2023 Issue

Name: _____

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

	True	False
I. Preoperative considerations and benefits of neoadjuvant chemotherapy: insights from a 12-year review of the Hong Kong Breast Cancer Registry		
A. Are the following statement(s) regarding the use of neoadjuvant chemotherapy (NAC) in breast cancer among Hong Kong women true or false?		
1. Higher pathological complete response rates were detected in patients with human epidermal growth factor receptor 2–positive (non-luminal) and triple-negative tumours.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. After treatment with NAC, greater proportions of patients with clinical stage IIA or IIB disease underwent breast-conserving surgery.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. The proportion of patients treated with NAC nearly doubled from 2006-2011 to 2012-2017. The increase was most pronounced among patients with stage I disease.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Neoadjuvant chemotherapy should never be used for luminal A subtype breast cancer.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Breast cancer biomarkers and Ki-67 levels need not be retested after NAC.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B. Are the following statement(s) concerning the benefits of neoadjuvant therapy in management of breast cancer true or false?		
1. Reassessments of residual tumour after neoadjuvant therapy in subsequent surgical specimen would provide useful guidance regarding further adjuvant treatment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Neoadjuvant chemotherapy can downsize the tumour, potentially reduce the extent of surgery, and allow breast-conserving surgery.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Imminent start of systemic treatment is made possible with neoadjuvant therapy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. The use of NAC can eliminate the indication of postoperative adjuvant radiotherapy.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. There is evidence that effectiveness of NAC is equivalent to adjuvant chemotherapy in terms of disease-free survival and overall survival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
II. Best practices in epidermal growth factor receptor T790M testing for advanced non–small-cell lung cancer in Hong Kong		
A. Are the following statement(s) regarding epidermal growth factor receptor (EGFR)-mutant non–small-cell lung cancer patients on first-generation EGFR-tyrosine kinase inhibitor (TKI) with disease progression true or false?		
1. The most common resistance mechanism is T790M mutation.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Testing for resistance mechanism is not indicated if they do not have significant symptoms.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Tissue re-biopsy is the preferred initial investigation due to its higher sensitivity.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. There is no role of liquid biopsy–based testing if re-biopsy tissue sample is available.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. If T790M mutation is negative in the initial liquid biopsy, re-test can be considered.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. Are the following statement(s) concerning the method for EGFR T790M testing true or false?		
1. Next-generation sequencing (NGS) is the gold standard for testing of T790M mutation.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Digital polymerase chain reaction (PCR) platforms have higher sensitivity than real-time PCR in liquid biopsy samples.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Circulating tumour DNA testing is not suitable to be performed on other body fluid such as pleural fluid or cerebrospinal fluid.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Tissue sample can be tested by real-time PCR or NGS.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. The role of liquid-based NGS is limited.	<input type="checkbox"/>	<input checked="" type="checkbox"/>