

HKMJ December 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 eHKAM LMS (<https://lms.hkam.org.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 January 2024**.

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 9 January 2024):

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)	0%	1 (Non-O&G)	0%
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)	50%	1 (Cat.1.2)	50%
Hong Kong College of Paediatricians	1 (Active Cat.D)	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%

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

Answer Sheet – Hong Kong Medical Journal December 2023 Issue

Name: _____

Hong Kong Academy of Medicine For Academy Fellows: College: _____ Fellowship No.: _____ For MCHK CME Registrants: 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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	True	False
I. Ten-year territory-wide trends in the utilisation and clinical outcomes of extracorporeal membrane oxygenation in Hong Kong		
A. Are the following statement(s) regarding the trends in extracorporeal membrane oxygenation (ECMO) utilisation in Hong Kong between 2010 and 2019 true or false?		
1. During the study period, more patients received extracorporeal cardiopulmonary resuscitation (ECPR) than veno-arterial ECMO.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. An increasing number of patients with a Charlson Comorbidity Index of ≥ 2 were shown.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. There were eight ECMO centres under centralised Intensive Care Unit (ICU) governance in 2019.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. The rates of inter-hospital transfer of patients on ECMO decreased.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. For patients with episodes of inter-hospital transfer, most post-transfer major operations involved the cardiovascular system.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
B. Are the following statement(s) concerning the clinical outcomes of patients receiving ECMO in Hong Kong between 2010 and 2019 true or false?		
1. Throughout the 10-year study period, both the hospital and ICU length of stay significantly increased (P for trend=0.011 and <0.001, respectively).	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. According to the receiver operating characteristic curves for various risk prediction models, the Acute Physiology and Chronic Health Evaluation IV score outperformed the Survival after Veno-Arterial ECMO and the Respiratory ECMO Survival Prediction scores for the prediction of post-ECMO hospital mortality.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. With reference to the global Extracorporeal Life Support Organization registry, ECPR was associated with better survival compared with veno-venous and veno-arterial ECMO.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. The low registration rate (3.8%) in the Hong Kong Centralised Organ Donation Register may have indirectly contributed to the reduction of overall study cohort survival.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Stroke is the most frequent complication occurring in patients requiring ECMO.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
II. Consensus recommendations for the screening, diagnosis, and management of <i>Helicobacter pylori</i> infection in Hong Kong		
A. Are the following statement(s) regarding screening and testing of <i>Helicobacter pylori</i> infection in Hong Kong true or false?		
1. <i>H pylori</i> infection in adults has been associated with increased risks of gastric adenocarcinoma.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. In adults, interventional trials have demonstrated a reduced risk of gastric cancer after <i>H pylori</i> eradication.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Adults with non-ulcer dyspepsia should be tested for <i>H pylori</i> and, if tested positive, treated.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Routine testing of <i>H pylori</i> infection in asymptomatic children is recommended if their family members are diagnosed with the infection.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Serological testing is recommended for initial diagnosis and post-eradication follow-up of <i>H pylori</i> infection.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
B. Are the following statement(s) concerning treatment of <i>H pylori</i> infection in Hong Kong true or false?		
1. In the first-line setting for <i>H pylori</i> eradication, possible therapies include triple therapy with a proton pump inhibitor, clarithromycin, and amoxicillin for 7 days.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. The overall failure rate of clarithromycin-based triple therapy was about 10% during the period from 2003 to 2018.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. The reuse of antibiotics that were previously unsuccessful should be avoided. However, as amoxicillin has low rates of resistance, it can be reused.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. <i>H pylori</i> eradication may worsen gastroesophageal reflux disease in some patients.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. All patients should be tested for <i>H pylori</i> after eradication therapy.	<input checked="" type="checkbox"/>	<input type="checkbox"/>