

HKMJ February 2024 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 (<u>https://lms.hkam.org.hk</u>). 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. <u>Registrants of the Academy must return the answer sheet to the Academy, similarly registrants of the Medical Association must return it to the Association.</u> 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 2024.

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 25 April 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 (O&G)	60%	1 (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	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.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%	

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

Answer Sheet – Hong Kong Medical Journal February 2024 Issue

Name:

Hong Kong Academy of Medicine		Hong Kong Medical Association						
		IKMA Membership or CME No.:						
College: Kill No.: X X				_				
Contact Telephone No.:		(11)						
For	MCHK CME Registrants:							
MC	HK Reg. No.: S	Signature:						
		<u> </u>						
I.	Non-vitamin K oral anticoagulants versus warfarin f	for the treatment of left	True	False				
	ventricular thrombus							
А.	. Are the following statement(s) regarding anticoagulation management of left							
	ventricular thrombus (LVT) true or false?							
1.	Non-vitamin K oral anticoagulants (NOACs) had a	\checkmark						
	events than warfarin.							
2.	NOACs had a much lower risk of intracranial haem			\checkmark				
3.	There was no significant difference between NOAC	Cs and warfarin in terms of LVT	\checkmark					
	resolution.							
4.	There was a higher propensity of cerebrovascular ev	vents such as stroke when		\checkmark				
	anticoagulation has been discontinued by 1 year.							
5.	There was a significantly higher risk of overt bleedi			\checkmark				
	Research Consortium class ≥ 2) for continuation of anticoagulation for ≥ 1 year.							
В.	Are the following statement(s) concerning baseline	characteristics of LVT patients						
	true or false?	\checkmark						
1.								
2.								
3.				\checkmark				
4.	1							
5. LVT was commonly associated with dilated cardiomyopathy.			<i>⊡</i> True					
II. COVID-19 vaccination and transmission patterns among pregnant and postnatal				False				
	women during the fifth wave of COVID-19 in a tertia							
А.								
	postnatal women during the fifth wave of coronavirus disease 2019 (COVID-19)							
	true or false?							
1.								
	COVID-19 vaccine.	\checkmark						
2.		nong women who had received the second dose of COVID-19 vaccine, around						
2	67% of them were overdue for their third dose.	620 / 20 6						
3.	The lowest vaccination rate was observed in women							
4.		en had a higher vaccination rate than Caucasian women.						
5.	A surge in vaccination was observed during the fifth wave of COVID-19.							
В.	Are the following statement(s) concerning COVID-							
1	postnatal women during the fifth wave of COVID-19 true or false?							
1.	COVID-19 infection was reported in 11% of all wo							
2.	The infection rate was 20 times higher in women without any or incomplete			\checkmark				
2	vaccination.							
3.	Women aged 20 to 29 years had the highest infection rate.							
4.		ical transmission from mother to neonate was commonly diagnosed.						
5.	The birth weight of babies was significantly lower in women with COVID-19			\checkmark				
	infection.							