

HKMJ October 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 30 November 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 18 October 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 (O&G)	60%	
College of Ophthalmologists of Hong Kong	1 (Self Study)	50%	1 (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%	0.5 (Active)	0%	
Hong Kong College of Psychiatrists	1 (Self Study)	80%	1 (Self Study)	80%	
Hong Kong College of Radiologists	1 (Self Study B)	50%	1 (Self Study B)	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 October 2024 Issue

Name:

Hong Kong Academy of Medicine		Hong Kong Medical Association			
For	For Academy Fellows: HKMA Membership or CME No.:				
	College: Fellowship No.: HKID No.: XX(-	
	Contact Telephone No.:				
For MCHK CME Registrants:				_	
MCHK Reg. No.: Signature:					
I.	Paracetamol-induced hepatotoxicity after normal the Chinese population	therapeutic doses in the Hong Kong	True	False	
А.	A. Are the following statement(s) regarding the incidence of paracetamol-induced significant				
	hepatotoxicity in the Hong Kong population true or fa	llse?			
1.	. The incidence is 1.2 cases per year.				
2.	Hepatotoxicity can develop within a short period of ti	me.			
3.	The incidence is higher in patients aged >80 years.				
4.	The incidence is higher in patients with weight <50 kg	g.			
5.	The incidence is higher in patients with malnutrition.				
В.	Are the following statement(s) concerning the use of	paracetamol in adults true or false?			
1.	The recommendations apply to all patients, regardless	of their risk factors.			
2.	The recommended maximum daily dose is ≤ 3 g in high	gh-risk group.			
3.	The standard dosage ≤ 4 g per day is safe for most peo	ple.			
4.					
5.	The recommendations are based on local data from th	e Hong Kong Chinese population.			
II.	2024 Hong Kong College of Obstetricians and Gyn	aecologists guideline on antenatal	True	False	
	screening and management of hepatitis B for prevention of mother-to-child				
	transmission				
А.	A. Are the following statement(s) regarding the prevention of mother-to-child transmission (MTCT) of hepatitis B true or false?				
1.		infants should receive the birth dose of hepatitis B vaccine as soon as possible (within			
1.	24 hours after delivery), followed by the second and t				
	age, respectively.	mild doses at 1 month and 0 months of			
2.	Breastfeeding is contraindicated for hepatitis B virus	(HBV) infected mothers			
2. 3.	Hepatitis B virus–infected pregnant women should un				
5.	level, maternal hepatitis B e antigen, and baseline live				
	determine the need for antiviral treatment during preg				
4.	Maternal liver function tests should be performed eve				
4.	cessation of prophylactic antiviral treatment.	Ty 5 months for 6 months after			
5.	Starting tenofovir disoproxil fumarate at 28 weeks of	gestation in women with a viral load			
	of >200 000 IU/mL can effectively reduce the risk of	MTCT.			
В.	Which of the following is/are risk factor(s) of persiste	ent neonatal hepatitis B infection			
	despite timely neonatal vaccination?				
1.					
2.	Vaginal delivery				
3.	Maternal HBV DNA level of >200 000 IU/mL				
4.	Positive maternal hepatitis B e antigen				
5.	. Positive maternal hepatitis B surface antigen				