

## SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 201502A)

**Question 1.** The approach to a patient with frequent belching includes:

- (a) Gastroscopy.
- (b) 24-hour pH impedance.
- (c) Proton pump inhibitor.
- (d) Behavioural therapy.

True	False
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

**Question 2.** In a patient with prolonged reflux symptoms, the management approach includes:

- (a) Reassuring the patient and continuing with proton pump inhibitor therapy.
- (b) Gastroscopy.
- (c) Functional evaluation with 24-hour pH impedance.
- (d) Esophageal manometry.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

**Question 3.** A 35-year-old Chinese woman has prolonged symptoms of constipation with frequent straining and a sensation of incomplete evacuation. There is no loss of weight, perrectal bleeding or a significant family history. A prior colonoscopy was reported to be normal. She has tried various laxatives without much benefit. Appropriate management for her includes:

- (a) Repeat colonoscopy.
- (b) Performing a transit makers test.
- (c) Referral for anorectal manometry.
- (d) Obtaining a detailed psychological history.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

**Question 4.** The following symptom is a Rome III criterion for irritable bowel syndrome:

- (a) Recurrent abdominal pain or discomfort on at least 1 day per month in the last 6 months.
- (b) Worsening abdominal pain or discomfort with defaecation.
- (c) Onset of abdominal pain or discomfort associated with a change in the frequency of stool.
- (d) Onset of abdominal pain or discomfort associated with a stable form (appearance) of stool.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>

**Question 5.** Regarding lactulose hydrogen breath tests:

- (a) They are useful in evaluating patients who may have *Helicobacter pylori* gastritis.
- (b) They are the gold standard for evaluating patients for the presence of small bowel bacterial overgrowth.
- (c) A negative study excludes small bowel bacterial overgrowth.
- (d) A positive test does not distinguish small bowel bacterial metabolism from colonic metabolism of substrates.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

### Doctor's particulars:

Name in full : \_\_\_\_\_  
 MCR number : \_\_\_\_\_ Specialty: \_\_\_\_\_  
 Email address : \_\_\_\_\_

### SUBMISSION INSTRUCTIONS:

(1) Log on at the SMJ website: <http://www.sma.org.sg/publications/smjcurrentissue.aspx> and select the appropriate set of questions. (2) Provide your name, email address and MCR number. (3) Select your answers and click "Submit".

### RESULTS:

(1) Answers will be published in the SMJ February 2015 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 6 April 2015. (3) Passing mark is 60%. No mark will be deducted for incorrect answers. (4) The SMJ editorial office will submit the list of successful candidates to the Singapore Medical Council. (5) One CME point is awarded for successful candidates.

**Deadline for submission: (February 2015 SMJ 3B CME programme): 12 noon, 27 March 2015.**