

SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 201503B)

Question 1. Regarding imaging modalities of the spleen:

- (a) Delayed phase imaging performed 3 min after contrast injection is helpful for excluding splenic lacerations in post-traumatic patients.
- (b) Colour Doppler offers no additional value in splenic imaging.
- (c) After intravenous contrast injection, inhomogeneous enhancement during the arterial and early portal venous phase is a sign of lymphomatous involvement of the spleen.
- (d) Splenic signal intensity varies with patient age.

True False

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Question 2. The following is not a vascular tumour:

- (a) Haemangioma.
- (b) Littoral cell angioma.
- (c) Lymphangioma.
- (d) Angiosarcoma.

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Question 3. The following criteria are in favour of benign cystic lesions:

- (a) Intralesional solid components.
- (b) Wall-thickening.
- (c) Sharply circumscribed lesion.
- (d) Contrast-enhancement.

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Question 4. Regarding splenic infarctions:

- (a) Splenic infarctions can be of either arterial or venous origin.
- (b) Gas in an infarcted area is a sign of superinfection.
- (c) On MR imaging, the signal intensity of infarcted areas varies depending on the age of the lesion.
- (d) Chronic infarcts may decrease in size, resulting in retraction of the splenic capsule.

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Question 5. Concerning significant splenic variations:

- (a) Absence of free abdominal or perisplenic fluid and normal splenic enhancement are key imaging features to differentiate splenic lobules from an area of laceration.
- (b) Scintigraphy with Tc-99m sulfur colloid or denatured red cells is the most sensitive technique for detecting splenules and ectopic splenic peritoneal implants.
- (c) Asplenia and polysplenia are congenital syndromes associated with anomalies in viscero-atrial situs.
- (d) Splenic lobules typically have irregular borders.

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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 May 2015 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 4 May 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: (March 2015 SMJ 3B CME programme): 12 noon, 27 April 2015.