

SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME (Code SMJ 201601B)

Question 1. Regarding the Morel-Lavallée lesion:

- (a) It is a closed, internal degloving injury resulting in separation of the fascia and muscle.
- (b) It contains blood or blood products, lymph, debris or fat globules.
- (c) It can always be identified within the first 24 hours after trauma.
- (d) Common locations include the flank, buttock and knee regions.

True False

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Question 2. Regarding the Morel-Lavallée lesion:

- (a) It is always associated with underlying fractures.
- (b) It is located in the prefascial plane.
- (c) A well-defined hypochoic lesion in the prefascial plane on ultrasonography is a diagnostic feature.
- (d) It does not show enhancement on CT.

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Question 3. A differential diagnosis of Morel-Lavallée lesions includes:

- (a) Acute post-traumatic haematoma.
- (b) Intramuscular haematoma.
- (c) Periarticular bursa.
- (d) Postoperative seroma.

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Question 4. On magnetic resonance imaging:

- (a) Morel-Lavallée lesions always show a high T2-weighted signal.
- (b) Fluid-fluid level, septations and capsular wall may be demonstrated.
- (c) The capsular wall is hypointense.
- (d) Morel-Lavallée lesions always show contrast enhancement.

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Question 5. Regarding treatment of Morel-Lavallée lesions:

- (a) Physiotherapy and lesion compression are effective for all lesions.
- (b) All patients should be given prophylactic antibiotics.
- (c) Percutaneous drainage is sufficient for Morel-Lavallée lesions with no capsule present.
- (d) Surgical debridement is an option when conservative management or percutaneous treatment has failed.

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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 March 2016 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 4 March 2016. (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: (January 2016 SMJ 3B CME programme): 12 noon, 26 February 2016.