SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 201712B)

		True	False
Question 1. Regarding the anatomy of the aorta:		_	_
(a)	The ascending aorta originates at the aortic valve and extends to the ligamentum arteriosum.		
(b)	The arch of the aorta extends from a point at the origin of the innominate artery and terminates at		
	the ligamentum arteriosum.	_	_
(C)	The distal portion of the aortic arch is often slightly widened.		
(d)	The maximum diameter of the descending aorta is 4 cm.		
Question 2. Regarding the Stanford classification system for aortic dissection:			
(a)	Type A aortic dissection is confined to the descending aorta.		
(b)	Type A aortic dissection involves the ascending thoracic aorta or aortic arch.		
(C)	Type B aortic dissection is confined to the descending aorta.		
(d)	An intimal defect originating in the descending aorta is classified as a Type B dissection even if		
	the dissection flap extends into the ascending aorta.		
Question 3. Known risk factors for aortic dissection include:			
(a)	Hypertension.		
(b)	Pregnancy.		
(c)	Previous cerebrovascular accident.		
(d)	Congenital heart disease.		
Question 4. Regarding the imaging features of aortic dissection:			
(a)	The cobweb sign is the term given to linear filling defects detected within the opacified false lumen.		
(b)	The beak sign is the term given to the acute angle seen between the dissection flap and outer wall		
()	of the false lumen.	_	_
(C)	The windsock sign represents intimo-intimal intussusception.		
(d)	The degree of opacification of the false lumen usually increases with distance from the intimal defect.		
	estion 5. When differentiating between the true and false lumen of a dissection on computed		
tom	nography aortography:	_	_
(a)	The false lumen is usually smaller in calibre.		
(b)	Aortic wall calcification is usually seen along the margin of the false lumen.		
(C)	Thrombus is more commonly seen in the false lumen.		
(d)	The beak sign is demonstrated only in the false lumen.		

Doctor's particulars: Name in full: _____ ____ MCR no.: ______ Specialty: _____ Email:

SUBMISSION INSTRUCTIONS:

Visit the SMJ website: http://www.smj.org.sg/current-issue and select the appropriate quiz. You will be redirected to the SMA login page. For SMA member: (1) Log in with your username and password (if you do not know your password, please click on 'Forgot your password?'). (2) Select your answers for each quiz and click 'Submit'.

For non-SMA member: (1) Create an SMJ CME account, or log in with your SMJ CME username and password (for returning users). (2) Make payment of SGD 21.40 (inclusive of 7% GST) via PayPal to access this month's quizzes. (3) Select your answers for each quiz and click 'Submit'.

RESULTS:

(1) Answers will be published online in the SMJ February 2018 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 29 January 2018. (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: (December 2017 SMJ 3B CME programme): 12 noon, 22 January 2018.