

SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME (Code SMJ 201806B)

Question 1. Regarding popliteal artery entrapment syndrome (PAES):

- (a) It occurs predominantly in the elderly age group.
- (b) PAES is a progressive condition that, if left untreated, can lead to premature arteriosclerosis and stenosis.
- (c) It can occur in both lower limbs.
- (d) Turbulent flow through a tight arterial stenosis can lead to poststenotic aneurysm formation.

True	False
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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Question 2. Regarding PAES:

- (a) An accessory medial gastrocnemius leads to entrapment in Type III PAES.
- (b) It always occurs due to an aberrant origin of the gastrocnemius muscle.
- (c) It can occur in patients without aberrant anatomy.
- (d) It typically occurs in patients without cardiovascular risk factors.

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<input type="checkbox"/>	<input type="checkbox"/>
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Question 3. Regarding ultrasonography in PAES:

- (a) It is commonly used as the initial screening tool in those with intermittent claudication and suspected PAES.
- (b) Ultrasonography alone is sufficient for diagnosing PAES.
- (c) Ultrasonography is the preferred modality due to high anatomical detail.
- (d) Ultrasonography is the only modality with which the radiologist can dynamically evaluate for vessel compression with provocative manoeuvres.

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Question 4. Regarding computed tomography (CT)/magnetic resonance (MR) imaging in PAES:

- (a) It is performed in all patients who report symptoms of claudication.
- (b) CT is superior to MR imaging in the assessment of the underlying anatomical causes of PAES.
- (c) CT is the preferred modality to exclude other causes of claudication such as vasculitis or cystic adventitial disease.
- (d) MR imaging is the preferred modality due to its reduced susceptibility to motion artefacts as compared to CT.

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Question 5. Regarding the clinical management of PAES:

- (a) Endovascular treatment has equal outcomes with surgical intervention.
- (b) The main goal of treatment is to relieve arterial compression.
- (b) A saphenous vein graft is often used when bypass or grafting is required.
- (c) Re-occlusion is a possible complication after treatment.

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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 August 2018 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 6 August 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. (6) SMC credits CME points according to the month of publication of the CME article (i.e. points awarded for a quiz published in the December 2017 issue will be credited for the month of December 2017, even if the deadline is in January 2018).

Deadline for submission: (June 2018 SMJ 3B CME programme): 12 noon, 30 July 2018.