## SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 201808B)

<b>Qu</b> (a) (b) (c) (d)	estion 1. Regarding sarcoidosis: It is characterised by formation of non-caseating granulomas in the affected organs. It typically manifests as bilateral hilar lymphadenopathy. Cardiac involvement is common. Cardiac involvement is seen in around 5% of cases.	True	False
Question 2. Regarding the clinical presentation of cardiac sarcoidosis (CS):			
(a)	Patients may be asymptomatic.		
(b)	Patients may present with chest pain and palpitations.		
(C)	Patients may succumb to sudden death from dysrhythmias.		
(d)	CS is never fatal.		
Question 3. Regarding cardiac magnetic resonance (CMR) imaging of CS in the acute phase:			
(a)	Patchy nodular areas of increased T2 signal intensity are seen within the myocardium.		
(b)	The nodular areas show early and late gadolinium enhancement (LGE).		
(C)	CS commonly involves the right ventricular wall.		
(d)	In CS, focal non-transmural lesions commonly affect the subendocardial portion.		
Question 4. Regarding CMR imaging of CS in the chronic phase:			
(a)	LGE is absent.		
(b)	LGE occurs due to increased volume of contrast material in the extracellular space secondary to underlying myocardial fibrosis.		
(C)	LGE is considered to be the strongest hallmark of CS and a marker of adverse events associated with CS.		
(d)	CMR imaging has been shown to have a specificity of 100% for diagnosing sarcoidosis.		
Question 5. Regarding CMR imaging diagnosis and the differential diagnoses of CS:			
(a)	Myocarditis frequently involves the lateral free wall of the left ventricle.		
(b)	Septal wall oedema, seen as increased T2 signal, is frequently seen in hypertrophic cardiomyopathy, differentiating it from CS.		
(c)	Ischaemic cardiomyopathy demonstrates segmental perfusion defect in the early phase with LGE, which is often subendocardial.		
(d)	Cardiac amyloidosis shows global LGE, which is most pronounced over the entire subendocardial circumference.		

## 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-SRM ampte: (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 October 2018 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 12 October 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 (August 2018 SMJ 3B CME programme): 12 noon, 5 October 2018.