

SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 201811B)

	True	False
1. Polycystic ovary syndrome (PCOS) is a rare endocrine disorder affecting young women.	<input type="checkbox"/>	<input type="checkbox"/>
2. Obesity and family history of PCOS are risk factors for developing PCOS.	<input type="checkbox"/>	<input type="checkbox"/>
3. Menstrual irregularities and acne are common presentations in primary care for women with PCOS.	<input type="checkbox"/>	<input type="checkbox"/>
4. PCOS is a radiological diagnosis that requires confirming the presence of polycystic ovaries on ultrasonography.	<input type="checkbox"/>	<input type="checkbox"/>
5. Clinical features of hyperandrogenism associated with PCOS include hirsutism, acne and male pattern hair loss.	<input type="checkbox"/>	<input type="checkbox"/>
6. Differential diagnoses for PCOS include pregnancy, thyroid dysfunction and Cushing's syndrome.	<input type="checkbox"/>	<input type="checkbox"/>
7. PCOS is associated with Type 2 diabetes mellitus.	<input type="checkbox"/>	<input type="checkbox"/>
8. Iron and vitamin D deficiency are uncommon in women with PCOS.	<input type="checkbox"/>	<input type="checkbox"/>
9. It is important to screen for and identify any mental health issues in patient with PCOS.	<input type="checkbox"/>	<input type="checkbox"/>
10. The first-line therapy for PCOS is metformin.	<input type="checkbox"/>	<input type="checkbox"/>
11. Diet and exercise are not known to improve fertility or insulin resistance in patients with PCOS.	<input type="checkbox"/>	<input type="checkbox"/>
12. Treatment for PCOS has to be targeted to each patient's phenotype, symptoms, personal goals and expectations.	<input type="checkbox"/>	<input type="checkbox"/>
13. Patients with oligomenorrhoea do not have an increased risk of endometrial hyperplasia.	<input type="checkbox"/>	<input type="checkbox"/>
14. Cyclical progesterone and the oral contraceptive pill are treatment options for control of the menstrual cycle in PCOS.	<input type="checkbox"/>	<input type="checkbox"/>
15. Metformin is the treatment of choice in controlling hirsutism.	<input type="checkbox"/>	<input type="checkbox"/>
16. Bariatric surgery does not improve insulin resistance and restore fertility in morbidly obese women with PCOS.	<input type="checkbox"/>	<input type="checkbox"/>
17. The risk of pregnancy complications such as gestational diabetes mellitus, preeclampsia, pre-term delivery, macrosomia, birth defects and stillbirth can be reduced with lifestyle modifications such as diet and exercise.	<input type="checkbox"/>	<input type="checkbox"/>
18. It is safe for spironolactone to be continued during pregnancy for its anti-androgenic effect.	<input type="checkbox"/>	<input type="checkbox"/>
19. Treatment for infertility associated with PCOS includes ovulation induction with clomiphene citrate or letrozole.	<input type="checkbox"/>	<input type="checkbox"/>
20. Indications for endocrinologist referral for PCOS include rapidly progressive virilisation, testosterone levels that are twice the upper limit of normal, and the failure of first-line measures for cycle control or androgen excess.	<input type="checkbox"/>	<input type="checkbox"/>

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 login 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 January 2019 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 3 January 2019. (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 (November 2018 SMJ 3B CME programme): 12 noon, 27 December 2018.