

SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 201909A)

	True	False
1. Adolescents develop their sexuality as they go through biophysical changes in puberty and adapt themselves to societal and cultural expectations of adulthood.	<input type="checkbox"/>	<input type="checkbox"/>
2. Primary care doctors with a good grasp of the important issues surrounding adolescent sexuality can proactively screen and advise adolescents on their sexual and reproductive health, regardless of sexual activity or marital status.	<input type="checkbox"/>	<input type="checkbox"/>
3. Under Section 375 of the Penal Code, a man will be guilty of rape if he has vaginal sex with a girl aged under 14 years, regardless of her consent.	<input type="checkbox"/>	<input type="checkbox"/>
4. Sexual offenders aged above 21 years who 'groom' children aged under 16 years through more than two encounters, using bribery, tricks, threats and emotional manipulation to force them to cooperate, with the intention of having sex, would not have broken the law if they did not have sex with the minor.	<input type="checkbox"/>	<input type="checkbox"/>
5. In Singapore, the proportion of young people aged 10–19 years diagnosed with a sexually transmitted infection (STI) decreased by 8% from 2014 to 2015.	<input type="checkbox"/>	<input type="checkbox"/>
6. Teenage pregnancy rates in Singapore were reported to be the lowest in 25 years, with 359 babies born to women aged 19 years and under in 2015.	<input type="checkbox"/>	<input type="checkbox"/>
7. HEADSSS, a screening tool designed for high-risk adolescents, systematically progresses from common threatening topics to the most personal and sensitive subjects.	<input type="checkbox"/>	<input type="checkbox"/>
8. The acronym HEADSSS stands for home, education/employment/eating, activities, drugs, sexuality, sleep, suicide/depression and safety.	<input type="checkbox"/>	<input type="checkbox"/>
9. Key qualities for working with young people include: being empathic, respectful and non-judgemental; respecting privacy, confidentiality and consent issues; and understanding that family, school and peers are key agents of socialisation.	<input type="checkbox"/>	<input type="checkbox"/>
10. The clinician's challenge lies in helping adolescents to recognise dangerous lifestyle patterns, because adolescents can see their activities as solutions instead of problems.	<input type="checkbox"/>	<input type="checkbox"/>
11. Boundaries and limits of patient confidentiality, even with mentally competent young people, should not be kept when dealing with disclosure of past or current sexual abuse, current or recent self-harm and suicidal thoughts, or homicidal intent.	<input type="checkbox"/>	<input type="checkbox"/>
12. Gillick competency and the Fraser guidelines arose from a legal case that involved whether doctors should be able to give contraceptive advice or treatment to those under 16 years of age without parental consent.	<input type="checkbox"/>	<input type="checkbox"/>
13. Emergency contraception may prevent pregnancy if taken as soon as possible and only within three days of unprotected sex.	<input type="checkbox"/>	<input type="checkbox"/>
14. In Singapore, emergency contraception is only available with a prescription signed by a Singapore Medical Council-registered medical doctor, and only for patients aged 16 years and above.	<input type="checkbox"/>	<input type="checkbox"/>
15. The contraception of choice for young adults should be a barrier method such as condoms, as it can also reduce the risk of potential STIs.	<input type="checkbox"/>	<input type="checkbox"/>
16. For 28-day oral contraceptives (i.e. regular birth control pills), taking four of the last seven pills can be prescribed as an alternative emergency contraception.	<input type="checkbox"/>	<input type="checkbox"/>
17. For long-term contraception in adolescents aged above 16 years, the effectiveness and safety of each method should be explained and a shared decision reached between patient and physician.	<input type="checkbox"/>	<input type="checkbox"/>
18. The attending doctor should acknowledge that the feeling of sex can be new and confusing, and advise or refer if the patient has difficulties handling situations or people.	<input type="checkbox"/>	<input type="checkbox"/>
19. A follow-up review six weeks after any emergency contraceptive is a good practice to review issues and previous matters discussed.	<input type="checkbox"/>	<input type="checkbox"/>
20. A specialist referral is indicated if there is suspected sexual abuse, risk of self-harm, teenage pregnancy or newly diagnosed sexually transmitted infections.	<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 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 November 2019 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 8 November 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 (September 2019 SMJ 3B CME programme): 12 noon, 1 November 2019.