

SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME (Code SMJ 202001B)

Question 1. Regarding intraperitoneal focal fat infarction (IFFI):

- (a) IFFI is a mimicker of acute surgical abdomen.
- (b) Focal infarction of the falciform ligament fatty appendage is the most common cause of IFFI.
- (c) IFFI is usually self-limiting and resolves spontaneously.
- (d) Epiploic appendagitis and omental infarction are uncommon causes of IFFI.

True	False
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Question 2. Regarding the anatomy of the falciform ligament:

- (a) It is a single-layered peritoneal fold that attaches the anterior part of the liver to the ventral abdominal wall and inferior diaphragmatic surface.
- (b) It separates the left lobe of the liver into the lateral and medial segments.
- (c) It contains the ligamentum teres, obliterated umbilical vein and fatty appendages.
- (d) Its arterial supply is via a vessel originating from the left inferior phrenic artery and middle segmental artery of the liver.

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Question 3. Regarding focal infarction of the falciform ligament fatty appendage:

- (a) It is attributed to torsion of the fat appendage of the falciform ligament that leads to fat necrosis and infarction.
- (b) Patients commonly present with acute abdominal pain at the suprapubic region.
- (c) Laboratory tests are usually normal or reveal mild inflammatory changes.
- (d) Surgical intervention is the mainstay of management.

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Question 4. Regarding imaging of focal infarction of the falciform ligament fatty appendage:

- (a) Radiological features on computed tomography (CT) include a focal area of fat stranding with a thin peripheral rim of high attenuation ('hyperattenuating rim' sign) in the vicinity of the falciform ligament.
- (b) The CT finding of high-attenuated central focus ('central dot' sign) corresponds to a thrombosed vessel.
- (c) Axial CT images are always more sensitive than sagittal images in detecting this pathology.
- (d) Ultrasonography usually demonstrates a hyperechoic, slightly heterogeneous mass at the site of tenderness with increased vascularity.

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Question 5. Regarding epiploic appendagitis:

- (a) Epiploic appendages are small outpouchings of the visceral peritoneum that contain adipose tissues and small blood vessels, and are attached to the serosal surface of the small bowel via a vascular stalk.
- (b) The clinical presentation can mimic acute appendicitis and acute cholecystitis.
- (c) Radiological features on CT are identical to those of focal infarction of the falciform ligament fatty appendage, except that it more often affects the descending colon.
- (d) It is a self-limiting condition and can be managed conservatively.

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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 March 2020 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 12 March 2020. (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 January 2020 issue will be credited for the month of January 2020, even if the deadline is in March 2020).

Deadline for submission (January 2020 SMJ 3B CME programme): 12 noon, 5 March 2020.