SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 202009A)

		True	False
1.	Tinnitus is a perception of sound in one or both ears, in the absence of an external source.		
2.	Patients may complain that they hear not just ringing but also buzzing and clicking sounds.		
3.	The initial approach to tinnitus is to dichotomise tinnitus into pulsatile and non-pulsatile types.		
4.	Hearing loss is not a commonly associated symptom.		
5.	Pulse synchronous pulsatile tinnitus arises largely from mechanical causes, while non-pulse synchronous		
	types are associated with vascular causes.		
6.	Tinnitus affects more females than males.		
7.	It is important to consider the effect of tinnitus on the patient's quality of life when managing the condition.		
8.	Common causes of tinnitus in our local context include impacted ear wax, presbycusis, noise-induced		
	hearing loss and ototoxicity.		
9.	For presbycusis, hearing loss is gradual with low frequencies affected first.		
10.	It is important for physicians to actively seek a history of noise exposure, as workplace modification and		
	appropriate protection can retard the progress of hearing loss.		
	Antibiotics such as macrolides can have the side effect of ototoxicity.		
12.	Sudden sensorineural hearing loss presents with a sudden drop in hearing that occurs within 48 hours.		
13.	Ménière's disease is characterised by recurrent episodic vertigo that is associated with hearing loss, tinnitus		
	and aural fullness.		
14.	Patients who complain of pulse synchronous pulsatile tinnitus often find that it is louder on the contralateral		
	side of the pathology.	_	_
	Myoclonus of the muscles of the middle ear muscle or palate is always idiopathic.		
	Initial management should be focused on resolving underlying causes.		
	Patients can make use of ambient noise from televisions or radios to mask their tinnitus.		
	Sudden hearing loss need not be referred urgently.		
	Bothersome tinnitus can be managed through a formal rehabilitation programme and with hearing aids.		
20.	Hearing aids are not an effective option for patients with both hearing loss and tinnitus.		

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 2020 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 10 November 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 September 2020 issue will be credited for the month of September 2020, even if the deadline is in November 2020).

Deadline for submission (September 2020 SMJ 3B CME programme): 12 noon, 3 November 2020.