SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 202109A)

		True	False
1.	Traumatic brain injury (TBI) is defined as a disruption in the normal function of the brain that can be caused		
	by a bump, blow, jolt to the head or penetrating head injury.		
2.	After malignancy, TBI is the second most common cause of death and disability in children.		
3.	Mild TBI is defined as TBI with a Glasgow Coma Scale score of 12–14.		
4.	Concussion is a type of mild TBI.		
5.	The most common cause of head injury among teenagers is non-accidental injury.		
6.	All infants below six months of age with head injury should be referred to the hospital.		
7.	Falls from the bed or sofa are a common cause of head injury in children aged less than two years.		
8.	If an 18-month-old child sustains a head injury from a fall off a bed 1 m in height, he/she should be referred to the hospital.		
9.	It is a red flag if a caregiver feels that a child is different from his/her norm after a head injury.		
10.	You notice clear rhinorrhoea in a child with head injury. You should be worried about cerebrospinal fluid		
	rhinorrhoea.		
11.	A two-year-old presents with a 1 cm \times 1 cm haematoma over the region of his frontal bone. There are no		
	red flags on history or physical examination. You should be concerned.		
12.	Clinically important TBI is a type of TBI with presence of intracranial injury on computed tomography of		
	the brain.		
13.	The PECARN algorithm can be easily accessed online and is used to identify children with clinically important TBI.		
14.	Primary care physicians can manage 99% of mild TBIs in the paediatric population.		
15.	Children with mild TBI can be sent home without follow-up.		
16.	Children with concussion should not return to playing sports on the same day owing to the risk of second		
	impact syndrome.		
17.	Students returning to school with residual post-concussive symptoms should be given a memo to allow		
	certain accommodations such as less homework or avoiding loud places such as the canteen or assemblies.		
18.	If post-concussive symptoms have been partially improving but not resolving for about a month, primary		
10	care physicians should continue looking after these patients.		
	You are seeing a child with bruises of different ages. Your top suspicion should be non-accidental injury.		
20.	Skull radiographs can help to determine the extent of a paediatric head injury.		

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 2021 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 30 November 2021. (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 2021).

Deadline for submission (September 2021 SMJ 3B CME programme): 12 noon, 23 November 2021.