## SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME

(Code SMJ 202206B)

Question 1. Regarding portal venous gas: <ul> <li>(a) It is commonly caused by serious and potentially fatal conditions.</li> <li>(b) The distribution of portal venous gas is the same as that of pneumobilia.</li> <li>(c) Mesenteric gas cannot be found with portal venous gas.</li> <li>(d) It typically extends to within 2 cm of the liver capsule.</li> </ul>	True	False
<ul><li>Question 2. Regarding pneumoperitoneum and pneumoretroperitoneum:</li><li>(a) Pneumoperitoneum is only found in gastrointestinal perforations.</li><li>(b) Pneumoperitoneum can remain for up to two months after open laparotomy.</li><li>(c) They have some common causes.</li><li>(d) Both are crucial imaging findings for gastrointestinal perforation.</li></ul>		
<ul><li>Question 3. Regarding pneumatosis intestinalis:</li><li>(a) The idiopathic form is more common than the secondary form.</li><li>(b) It is possible to judge the presence or absence of necrosis by the shape of the gas.</li><li>(c) It can be found with portal venous gas and mesenteric venous gas.</li><li>(d) Pneumatosis cystoides intestinalis may be associated with pneumoperitoneum.</li></ul>		
Question 4. Regarding emphysematous infections:  (a) They are life-threatening.  (b) Obstruction of the urinary collecting system due to urinary stones or urothelial neoplasm is common.  (c) Ultrasonography is the most sensitive and specific imaging modality for emphysematous cholecystitis.  (d) Underlying diabetes mellitus is a well-known risk factor for emphysematous infections.		
<ul> <li>Question 5. Regarding gastrointestinal fistulas:</li> <li>(a) Pneumobilia and gas in the gallbladder are not present with cholecystoduodenal fistula.</li> <li>(b) Colovesical fistula is a common complication of diverticular disease.</li> <li>(c) Cholecystoduodenal fistula is the most common cholecystenteric fistula.</li> <li>(d) Computed tomography does not allow direct visualisation of a fistula between the gallbladder and the duodenum.</li> </ul>		
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'.

(1) Answers will be published online in the SMJ August 2022 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 31 August 2022. (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 2021 issue will be credited for the month of December 2021, even if the deadline is in February 2022).

Deadline for submission (June 2022 SMJ 3B CME programme): 12 noon, 24 August 2022.