

Instruction:

1. Please use pencil to shade the box for the best and correct answer (only one answer for each question).
2. Send back the answer sheet (see loose leaf page) to the Hong Kong College of Paediatricians. One point will be awarded to each article if ≥ 3 of the 5 answers are correct. The total score of the 4 articles will be 4 CME points.

(A) The Effects of Education Program Applied to the Families of Moderate and Late Premature Infants on Breastfeeding, Parental-infant Attachment and Parents' Anxiety Levels in the First Year: A Randomised Controlled Trial

1. Moderate and late premature infants are born at;
 - a. 32^{0/7}-36^{6/7} gestational week
 - b. 34^{0/7}-36^{6/7} gestational week
 - c. 32^{0/7}-34^{6/7} gestational week
 - d. 28^{0/7}-32^{6/7} gestational week
 - e. 30^{0/7}-36^{6/7} gestational week
2. Moderate and late premature infants constitute how much percentage of the premature babies.
 - a. 42
 - b. 55
 - c. 67
 - d. 75
 - e. 84
3. When were the home educational visits made to the participating groups in the current study?
 - a. at one week after discharge than at 1 and 3 months corrected age (CA) of the infant.
 - b. at one week after discharge than at 1, 2, and 3 months CA of the infant.
 - c. at two weeks after discharge than at 1, 2, and 3 months CA of the infant.
 - d. at 1, 2, 3 and 4 months CA of the infant.
 - e. at two weeks after discharge than at 1 and 3 months CA of the infant.
4. In this study, the appropriate time of starting complementary feeding was recommended at which months of corrected age.
 - a. 3
 - b. 4
 - c. 5
 - d. 6
 - e. 8

5. Which one of the following assessment tools was not used in the current study?
 - a. The Maternal Attachment Inventory
 - b. Infant Character Perception Scale
 - c. Trait Anxiety Inventory
 - d. The Edinburgh Postnatal Depression Scale
 - e. The Paternal Postnatal Attachment Questionnaire

(B) Comparison of Three Critical Illness Scoring Systems for Assessing Septic Acute Kidney Injury

1. The best mortality assessment system for paediatric patients with stage 1 acute kidney injury (AKI) was?
 - a. PRISM III
 - b. PCIS
 - c. P-MODS
 - d. SOFA
 - e. A and B
2. The best mortality assessment system for paediatric patients with stage 2 AKI was?
 - a. P-MODS
 - b. PRISM III
 - c. PCIS
 - d. SOFA
 - e. None of the above
3. The best mortality assessment system for paediatric patients with stage 3 AKI was?
 - a. PRISM III
 - b. PCIS
 - c. P-MODS
 - d. SOFA
 - e. All the above

4. P-MODS is primarily used to assess the degree of organ dysfunction in children by evaluating parameters such as?
 - a. Bilirubin
 - b. Lactic acid
 - c. Fibrinogen and urea
 - d. Oxygenation index
 - e. All the above
5. Which system the P-MODS score does not include for assessment?
 - a. Circulation
 - b. Breathing
 - c. Liver function
 - d. Nervous system
 - e. Blood coagulation

(C) Paediatric Deep Neck Space Abscesses: Experience of a Tertiary Care Hospital

1. Which antibiotic is most preferred as the first choice for deep neck space abscesses?
 - a. Ceftriaxone
 - b. Ampicillin sulbactam
 - c. Clindamycin
 - d. Ampicillin
 - e. Piperacillin tazobactam
 2. Which symptoms can be seen in patients with deep neck space abscesses?
 - i. neck pain
 - ii. swelling of the cervical lymph nodes
 - iii. trismus
 - iv. hoarseness
 - a. i, ii, iv
 - b. i, ii, iii
 - c. ii, iii, iv
 - d. i, iii, iv
 - e. All the above
 3. In what age range is retropharyngeal abscess more common?
 - a. 1-2 years
 - b. 2-5 years
 - c. 5-10 years
 - d. 10-15 years
 - e. <1 year
4. Which complications can be seen secondary to deep neck space abscesses?
 - i. airway obstruction
 - ii. mediastinitis
 - iii. jugular vein thrombosis
 - iv. cranial nerve dysfunction
 - v. sepsis/septic shock
 - a. i, ii, iii
 - b. ii, iii, iv, v
 - c. i, iii, iv, v
 - d. i, iii, iv
 - e. All the above
 5. In this study, which time interval to surgery is considered for defining delayed surgical drainage from the start of first intravenous antibiotic treatment?
 - a. 12 hours
 - b. 24 hours
 - c. 48 hours
 - d. 72 hours
 - e. 96 hours

(D) Surgical Management of Rapunzel Syndrome: A Retrospective Report from Two Children's Medical Centres

1. The clinical manifestation(s) of Rapunzel syndrome include:
 - a. Abdominal pain, bloating
 - b. Nausea, vomiting
 - c. Early satiety
 - d. Diarrhoea, constipation
 - e. All of above
2. Rapunzel syndrome commonly appear as a result of:
 - a. Crapulent
 - b. Vegetarian diet
 - c. Absorption of enormous volumes of hairs
 - d. Moderate in eating
 - e. None of above
3. The complication(s) of Rapunzel syndrome include:
 - a. Anaemia
 - b. Haematemesis
 - c. Intestinal obstruction
 - d. Intestinal perforation
 - e. All of above

4. Why should psychiatric evaluation be part of the therapy for patients with Rapunzel syndrome?
- a. Because the impulsive behaviour associated with trichophagia in these patients is difficult to manage.
 - b. Because there are risks of recurrence should be considered
 - c. Because the patients may continue to overeat
 - d. Because the patients like vegetarian food and don't like meat
 - e. None of above
5. Which of the following examination is the preferred investigation to distinguish Trichobezoars from other probable epigastric mass aetiologies?
- a. Plain radiograph
 - b. Ultrasonography
 - c. Upper gastrointestinal contrast
 - d. Computed tomographic (CT)
 - e. None of above

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- (A) 1. e; 2. c; 3. a; 4. b
(B) 1. c; 2. e; 3. c; 4. a
(C) 1. e; 2. a; 3. b; 4. c

- (D) 1. c; 2. d; 3. c; 4. e
(E) 1. e; 2. e; 3. d; 4. b