CPD Challenge

Questions

Q1 Please indicate TRUE or FALSE statements concerning the management of sepsis-induced hypotension
a. Patients with sepsis-induced hypotension are commonly treated with intravenous fluids and/or vasopressors.
b. Restrictive fluid strategy (prioritizing vasopressors) is superior to a liberal fluid strategy (prioritizing higher volumes of fluids)
c. Restrictive fluid strategy isn't superior to the liberal fluid strategy in patients with sepsis-induced hypotension.
d. Prioritizing vasopressors gives better treatment outcome.
e. Prioritizing higher volume of fluids gives better treatment outcome.

Q2 Please indicate TRUE or FALSE statements regarding malaria prevention regimens in pregnancy:
a. Intermittent preventive therapy of malaria in pregnancy with sulfadoxine-pyrimethamine (SP) reduces malaria-associated adverse birth outcomes.
b. Dihydroartemisinin-piperaquine (DP) is an alternative therapy in the setting of SP resistance.
c. Although Dihydroartemisinin-piperaquine has superior antimalarial effects, its use is associated with a higher composite rate of adverse pregnancy outcomes (low birth weight, small for gestational age, preterm birth, death).
d. SP may have other benefits on pregnancy outcomes, making it a preferred therapy than DP.
e. ALL TRUE

Q3 Which of the following statements are TRUE or FALSE in maternity care?
a. Appropriate oxytocin infusion dose during labor should be determined through the response of individual patient, based on their uterine contraction and fetal heart rate patterns, without regard to an arbitrary maximum dose.
b. A single oral dose of azithromycin in women planning vaginal delivery reduces the risk of maternal sepsis and death.
c. The prevalence of preeclampsia in the setting of assisted reproductive technology (ART) after various cycles of sperm donation are higher after one cycle compared to those conceiving after 2 or more cycles.
d. There is no difference in preeclampsia prevalence between those conceiving after 2 or more cycles by ART and individuals conceiving spontaneously.
e. Positive blood cultures in neonatal sepsis are associated with place of birth, maternal level of education, maternal vaginal discharge, birth weight less than 2500 grams, presence of severe abdominal distension, inability to breastfeed, tachypnea, and severe chest wall in-drawing; and knowledge of these factors help in averting neonatal morbidity and mortality.

Q4 Which of the following interventions are TRUE or FALSE for prevention of thrombosis in patients with fractures?
a. Thromboprophylaxis with either low-molecular-weight heparin (LMWH) 30mg or aspirin 81mg twice daily can be used.
b. Non-fatal pulmonary embolism and bleeding complications can occur in both groups.
c. In patients with fractures, aspirin is not inferior to LMWH in preventing death from any cause.
d. LMWH is superior in preventing death from any cause.
e. ALL TRUE

Q5 Please indicate TRUE or FALSE statements with respect to various scenario below in clinical practice:
a. Omission of radiotherapy following breast conservation surgery in older women ≥65 years with localized breast cancer increases the risk of local recurrence, but does not affect survival or distant recurrence.
b. Use of hydrocortisone in patients admitted with severe pneumonia lowers the risk of death.
c. Patients with a high Surgical Apgar score (SAS) are more likely to develop major complications, while those in medium SAS category are in less risk of dying.
d. Ibuprofen can be used to induce closure in preterm infants with echocardiographically-confirmed patent ductus arteriosus.
e. Although Tamoxifen, a selective estrogen-receptor modulator, is used as adjuvant therapy in patients with hormone-sensitive breast cancer or at increased risk for breast cancer, it is nevertheless associated with an increased risk for uterine pathology.

Answers

1). a T; b F; c T; d F; e F
2). a T; b T; c T; d T; e T
3). a T; b T; c T; d T; e T
4). a T; b T; c T; d F; e F
5). a T; b F; c T; d T; e T