

CPD QUESTIONNAIRE. MARCH 2023 VOL 22 NO 1

Low dislocation rate one year after total hip arthroplasty at a tertiary hospital in South Africa (Fourie PJ, Erasmus RD, Botha T, Jacobs HW)

1. Most dislocations after total hip arthroplasty (THA) occur:

- | | |
|--|---|
| a. Intraoperatively | A |
| b. While the surgical wound is still healing | B |
| c. During the first year | C |
| d. After five years | D |
| e. After ten years | E |

2. The most common complication after THA surgery is:

- | | |
|------------------------------------|---|
| a. Periprosthetic fracture | A |
| b. Infection | B |
| c. Dislocation | C |
| d. Aseptic loosening | D |
| e. Metallosis and immune responses | E |

3. The following factor potentially decreases the risk for post-THA dislocation:

- | | |
|---|---|
| a. Increasing cup anteversion above 30° | A |
| b. Increasing cup abduction above 60° | B |
| c. Using a femur head size ≥ 32 mm | C |
| d. Alternating surgical approaches to remain rehearsed in all of them | D |
| e. Using single mobility implants | E |

Functional outcome of free fibula grafting in benign non-reconstructable bone tumours involving the hand (Shah MR, Shah MM, Shah IM)

4. What are the advantages of use of the free fibula graft in treatment of benign non-reconstructable bone tumours involving the hand?

- | | |
|--|---|
| a. Provides strut support | A |
| b. Relatively easy to procure | B |
| c. Medullary canal helps in fixation | C |
| d. Shape matches with small hand bones | D |
| e. All of the above | E |

5. Criteria for non-reconstructable hand tumours in the article means?

- | | |
|--|---|
| a. Non-contained lesions | A |
| b. Lytic expansile lesions with more than 70% bone destruction | B |
| c. Pathological fractures | C |
| d. Conventional bone grafting is not possible | D |
| e. All of the above | E |

6. At final biopsy, tumours in the study were histopathologically of the following varieties except?

- | | |
|------------------------------|---|
| a. Aneurysmal bone cyst | A |
| b. Enchondroma | B |
| c. Benign histiocytic lesion | C |
| d. Chondrosarcoma | D |
| e. Giant cell tumour | E |

A survey on the educational value of an mHealth referral app for orthopaedics in South Africa (Kauta NJ, Owolabi EO, Salence B, Swanepoel S, Roche S, Chu KM)

7. One of the key messages from the results of this study is:

- | | |
|--|---|
| a. More than 60% of users felt that orthopaedic referral group (ORG) was a good platform to keep up to date with current principles of fracture management and for on-the-job continuous medical education | A |
| b. While the platform helps expedite the management of trauma cases in community health centres (CHCs), thanks to the advice from the specialist team, there is no educational value to it | B |
| c. The platform is not a sustainable mHealth strategy for tele-mentoring due to a large volume of cases being discussed from different CHCs | C |
| d. Fifty per cent of users felt overburdened with the frequency of clinical queries and responses posted on ORG | D |
| e. Most users were dissatisfied with ORG because of massive delays in getting responses from the specialist team | E |

8. ORG users were able to improve their conservative management skills for the following injuries:

- | | |
|--|---|
| a. Femur fracture, tibia fracture, hip dislocation | A |
| b. Ankle fractures, distal radius fractures, shoulder dislocations | B |
| c. Ankle fractures, tibia fractures, clavicle fractures | C |
| d. Shoulder dislocation, clavicle fractures, distal radius fractures | D |
| e. Hip dislocation, shoulder dislocation, knee dislocation | E |

9. When contemplating sharing patients' information for clinical discussion with peers or mentors on social platforms, which one of the following ethical statements is correct?

- | | |
|--|---|
| a. Patient consent is not needed if the information shared informs the patient management plan | A |
| b. Patient consent should be obtained before information is shared | B |
| c. The provider has the right to share any patient information | C |
| d. Patient consent is not needed if an encrypted platform is used | D |
| e. Patient consent is not needed if the information shared is de-identified | E |

Enhancing healthcare services in an orthopaedic department utilising a system dynamics and participatory action research perspective to optimise patient flow (Ansermeah MMF, Proches CG, Snyders R)

10. In the participatory action research process, which of the following is correct:

- | | |
|--|---|
| a. The primary researcher is not considered to be an active agent of transformation | A |
| b. The researcher is relegated to being a mere passive observer | B |
| c. This methodological process involves cyclical processes of reflection, action and observation | C |
| d. The researcher is not considered to be part of the affected community | D |
| e. Participants who are directly affected by the challenges being studied are excluded | E |

11. Answer true or false: 'Systems-as-cause' thinking promotes the idea that we have to play an active role in taking responsibility for our own actions instead of seeking to allocate blame to other sources.

- a. True A
b. False B

Factors associated with dissemination and complications of acute bone and joint infections in children (Mdingi VS, Maré PH, Marais LC)

12. What was the overall rate of chronic osteomyelitis in the study?

- a. 11% A
b. 31% B
c. 45% C
d. 20% D
e. 5% E

13. Which of the following statements is true?

- a. Sixty-five per cent of the children included were female A
b. The median time between onset of symptoms and presentation at our institution was two days B
c. Locally advanced disease was defined as adjacent acute haematogenous osteomyelitis and septic arthritis C
d. The median age at presentation at our institution was 4 years D
e. Four patients met the Pediatric Sepsis Consensus Conference (PSCC) criteria for septic shock E

14. What was the culture-negative rate in our study?

- a. 30% A
b. 4% B
c. 50% C
d. 15% D
e. 25% E

Intertrochanteric femur fractures: a current concepts review (Sukati FM, Viljoen J, Alexander A)

15. When assessing the reduction quality for intertrochanteric femur fractures, which of the following is the best reduction?

- a. Central axial alignment and a native neck shaft angle A
b. Central axial alignment with smooth anterior cortex contact B
c. A neutral medial cortical apposition and a native neck shaft angle C
d. Slight valgus neck shaft angle and positive medial cortical apposition D
e. Slight anterior neck on lateral view and a neutral medial cortical apposition E

16. Which of the following is *not* true with regard to the bony arcade in the intertrochanteric region?

- a. The vertical column originates in the lower lateral femoral neck A
b. The vertical column conveys compression forces B
c. The horizontal column originates in the femoral shaft C
d. The horizontal column conveys tension forces D
e. The calcar is situated posterior to the neutral axis of the femoral neck E

17. Cephalomedullary nails (CMNs) are commonly used to fix intertrochanteric fractures. Which of the following statements is true when comparing CMN treatment options?

- a. Fractures fixed with long nails show greater torsional stiffness than with short nails A
b. Distal locked short CMNs have a higher mean failure to load in torsion than unlocked short CMNs B
c. Thigh pain is less common in patients with distally locked than unlocked CMNs C
d. Biaxial CMN has lower cut-out rates compared to monoaxial CMN D
e. Patients treated with CMN have better mobility at four months than those treated with dynamic hip screw (DHS) E

18. Arthroplasty has some benefits over internal fixation, *except*:

- a. Early postoperative weight bearing A
b. Shorter hospital stay B
c. Lower implant-related complications C
d. Lower re-operation rate D
e. Lower blood loss E

A subungual glomus tumour of the finger with five reappearances: a rare case report (Nkosi CS, Sefane TI)

19. Which of the following does *not* fit into the classic triad of glomus tumour symptoms?

- a. Paroxysmal pain A
b. Cold intolerance B
c. Exquisite tenderness to touch C
d. Infection D
e. All of the above E

20. A 65-year-old female presents with 6 months of worsening pain in her middle finger. She had previous surgical excisions with positive histology results for glomus tumours from the same finger. What is the most likely diagnosis?

- a. Infection A
b. Recurrent glomus tumour B
c. Fracture C
d. Malingering D
e. Osteoarthritis E

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