Effective in 2014, the CPD programme for SAMJ will be administered by Medical Practice Consulting: CPD questionnaires must be completed online at www.mpconsulting.co.za

True (A) or false (B):

National expenditure on health research in South Africa (SA)

- 1. High-quality research is essential for identifying the health needs and improving health outcomes of a population.
- 2. Remarkable medical advances have occurred in SA, such as the invention of computed tomography.
- 3. The SA government's current allocations to health research equate to approximately 2% of the national health budget.

Self-reported use of evidence-based medicine and smoking cessation 6 - 9 months after acute coronary syndrome (ACS)

- 4. Recent projections suggest that by 2030 ischaemic heart disease will become a leading cause of death in Africa, surpassing HIV/AIDS.
- 5. Good evidence exists to support the use of secondary prevention medications (aspirin, statins, beta-blockers and angiotensinconverting enzyme inhibitors or angiotensin receptor blockers) and smoking cessation in patients after ACSs.
- 6. Patients who continue to smoke after an ACS have a significantly increased risk of a future acute myocardial infarction compared with those who quit.
- 7. Evidence suggests that two-thirds of smokers will successfully give up smoking in the 9 months following an acute coronary episode.

Predicting outcome in severe traumatic brain injury (TBI) using a simple prognostic model

- 8. Following TBI, an ipsilateral fixed and dilated pupil suggests lateral transtentorial herniation, while bilaterally fixed and dilated pupils are consistent with central transtentorial herniation in a fully resuscitated patient.
- 9. Bilateral pupil reactivity, a Glasgow Coma Score (GCS) of 6 8 and oxygen saturation ≥90% were shown to predict a positive outcome following severe TBI, and the higher the GCS score, the better the outcome.

Adherence to the 2010 antiretroviral guidelines in the antiretroviral roll-out clinic at 1 Military Hospital, South Africa

10. Advances in management and treatment of HIV/AIDS have transformed HIV into a chronic condition rather than a debilitating terminal illness.

When is the right time? Complex issues around withdrawing lifesustaining treatment in children

- 11. According to South African legislation, a parent or caregiver may refuse a treatment that medical professionals deem to be in a child's best interests.
- 12. Unless a child has suffered brainstem death or is in a persistent vegetative state, withholding life-sustaining treatments is not permissible legally or ethically.

Talking to children: What to do and what not to do

- 13. Children are frequently aware of the severity of their illness and will be able to talk about what is going to happen to them.
- 14. Children like to be told by an adult what is going to happen to them, because adults know best and children trust them.

Basic counselling skills

- 15. The WPC method of breaking bad news requires us to warn, pause, check back.
- 16. Key factors to take into account when breaking bad news are time, acknowledging emotion, confidentiality and setting the scene.

Managing pain in children at the end of life: What the GP should know

- 17. The gold standard of pain assessment is patient self-report.
- 18. Short-acting morphine should be given 4-hourly and not as required.

Physician self-care

- 19. One of the symptoms of burnout is overwhelming physical and emotional exhaustion.
- 20. Pathological altruism is a condition in which the practitioner is unable to clearly define boundaries between him/herself and the patient.

CPD questions include articles from CME. The full versions of each article can be found on the *SAMJ* website (http://www.samj.org.za)

A maximum of 3 CEUs will be awarded per correctly completed test.

INSTRUCTIONS

1. Read the journal. All the answers will be found there. 2. Go to www.mpconsulting.co.za to answer the questions.



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