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SAJAA CPD ANSWER FORM - March/April 2022

PLEASE SUBMIT ONLINE BEFORE 31 MARCH 2023

Please answer the following questions:

Case report of a caesarean delivery in a primigravida with congenitally corrected transposition of the great arteries $\,$

- 1. The incidence of congenital heart disease is:
- a. 1 in 100 pregnancies worldwide
- b. Decreasing worldwide
- c. Higher in low- and middle-income countries
- 2. Regarding foetal delivery in congenital heart disease:
- a. A 'pregnancy heart team' consists of an obstetrician and anaesthesiologist
- b. Regional anaesthesia and assisted vaginal delivery are mostly recommended
- c. Physiological changes after delivery are negligible in the parturient
- 3. Anaesthetic implications in congenital heart disease patients include:
- a. Central venous catheters are contraindicated
- b. Infective endocarditis prophylaxis is not recommended in South Africa
- c. The univentricular heart is sensitive to changes in preload
- 4. Drug recommendations after foetal delivery in congenital heart disease patients include:
- a. A titrated oxytocin infusion
- b. Ergot alkaloids to maintain afterload
- c. Opioids should be avoided
- 5. Preservation of cardiac output in congenital heart disease is assisted by:
- a. Beta agonist infusions
- b. Transoesophageal echocardiography monitoring
- c. Boluses of alpha agonists

Radiation exposure of anaesthesia providers in Africa: an occupational exposure study

- 6. The occupational exposure limits as set by the International Commission on Radiological Protection is:
- a. There is no limit
- b. Less than 20 mSv per year over a 5-year period or less than 50 mSv in any one year
- c. Less than 50 mSv per year over a 5-year period or less than 20 mSv in any one year
- 7. Exposure to significant amounts of radiation can be reduced by doing the following:
- a. Opening the windows and allowing good ventilation
- b. Maintaining a distance of more than 30 cm between yourself and the radiation source
- c. Maintaining a distance of greater than 1.5 m from the radiation source
- 8. Which of the following factors complicates radiation safety management in anaesthetic practice?
- a. Analysis of dosimeters is not done in South Africa
- b. The duration of exposure to radiation in theatre is often not controlled by the anaesthetist
- Compared to other theatre users, anaesthetists are mostly positioned closest to the source of radiation
- 9. Regarding pregnant staff and occupational radiation exposure:
- a. Chronic low dose radiation exposure has no known potential biological effects
- Pregnant staff can safely work in areas with low dose radiation exposure with appropriate personal protective equipment
- Pregnant staff members are not allowed to work in any area with potential radiation exposure

10. Radiation safety education

- should form part of the formal education of surgical and anaesthesiology training programmes.
- b. makes no difference with regards to change in practice.
- c. does not correlate with a greater likelihood of incorporating dose reduction strategies.

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Prevalence and predisposing factors of post-traumatic stress symptoms in anaesthetists during the second wave of COVID-19 in South Africa

11. Anaesthetists are among the highest risk for viral exposure due to their

- a. proximity to the airway and the nature of the airway procedures they perform.
- b. lack of social distancing in the theatre environment.
- c. impaired immune response secondary to volatile agent exposure.
- d. susceptibility to mental health problems.

12. Individuals suffering from post-traumatic stress disorder (PTSD)

- a. struggle with social anxiety and isolate themselves in the workplace.
- b. seldom seek care and are at risk of suicidal ideation and suicide attempt.
- c. are three times more likely to make drug errors.
- d. experience symptoms of depersonalisation, cynicism, and emotional exhaustion.

13. Which of the following was not found to be independently associated with mortality in the recent African COVID-19 Critical Care Outcomes Study (ACCCOS):

- a Hľ
- b. Chronic liver disease
- c. Smokina
- d. Diabetes

14. The PTSD Checklist for DSM-5 (PCL-5) is a 20-item self-report measure that is used to assess:

- a. The presence and severity of post-traumatic stress symptoms (PTSS)
- b. An individual's psychosomatic response to a traumatic life event
- c. The impact of psychological stress on work-life balance
- d. The presence and severity of burnout

15. Which of the following factors were *not* strongly associated with the development of PTSD amongst anaesthetists during the COVID-19 outbreak in South Africa?

- a. Feelings of loneliness
- b. Poor social support structure
- c. Testing positive for COVID-19
- d. Pre-existing mental health condition

The history of the College of Anaesthetists of South Africa

16. The establishment of 'The College of Medicine of South Africa' in October 1971 was a result of the amalgamation of the:

- a. College of Physicians and Surgeons of South Africa with the College of Gynaecologists
- South African College of General Practitioners with the College of Physicians, Surgeons and Gynaecologists
- $c. \quad \text{College of Physicians, Surgeons and Gynaecologists with the College of Anaesthetists} \\$

17. The longest serving Chairperson of the Faculty of Anaesthetists was:

- a. OVS Kok
- b. DF Morrell
- c. GG Harrison

18. The pass rate in the first FFA(SA) Part I examination written during the first semester of 1960 was:

- a. 0%
- b. 60%
- c. 100%

19. The FCA(SA) Part II examination was modified in the second semester of 2004 by the:

- a. Addition of a third objective written paper
- b. Change to a multiple choice question paper
- c. Removal of clinical patient cases

20. The boardroom of the CMSA building in Durban is named after anaesthetist

- a. Dr Anna Catherina Buys
- b. Dr Clive Daniel
- c. Dr Jack Abelsohn

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