

The CPD programme for SAJCH is administered by Medical Practice Consulting.

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## Regarding the effect of device position and use of transparent covers on the irradiance distribution of LED phototherapy devices

1. Which one of the following statements best describes intensive phototherapy as defined by the American Academy of Paediatrics (AAP)?
  - a. Irradiance in the 430 - 490 nm spectrum of at least 20  $\mu\text{W}/\text{cm}^2/\text{nm}$ , measured at the infant's skin directly below the centre of the phototherapy unit.
  - b. Irradiance in the 380 - 520 nm spectrum of at least 20  $\mu\text{W}/\text{cm}^2/\text{nm}$ , measured at the infant's skin directly below the centre of the phototherapy unit.
  - c. Irradiance in the 430 - 490 nm spectrum of at least 30  $\mu\text{W}/\text{cm}^2/\text{nm}$ , measured at 20 cm below the centre of the phototherapy unit.
  - d. Irradiance in the 430 - 490 nm spectrum of at least 30  $\mu\text{W}/\text{cm}^2/\text{nm}$ , measured at the infant's skin directly below the centre of the phototherapy unit.
2. Which one of the following methods is most likely to uniformly increase irradiance when using LED phototherapy lights?
  - a. Bring the light closer to the infant.
  - b. Move the light further away from the infant.
  - c. Add additional lights at the manufacturer's recommended distance.
  - d. Add additional lights closer than the manufacturer's recommended distance.
3. Under which one of the following circumstances does the AAP recommend the use of standard phototherapy at 8 - 10  $\mu\text{W}/\text{cm}^2/\text{nm}$  for infants?
  - a. Infants with unconjugated serum bilirubin level of 34 - 51  $\mu\text{mol}/\text{L}$  below the threshold for intensive phototherapy.
  - b. Infants with total serum bilirubin level of 34 - 51  $\mu\text{mol}/\text{L}$  below the threshold for intensive phototherapy.
  - c. Infants with total serum bilirubin level at or below the threshold for intensive phototherapy.
  - d. Infants with unconjugated serum bilirubin level at or below the threshold for intensive phototherapy.

## Regarding basic fibroblast growth factors as a biomarker of focal segmental glomerulosclerosis in HIV-positive and HIV-negative children

4. The classical findings of HIV-associated nephropathy (HIVAN) include all of the following, except:
  - a. persistent proteinuria
  - b. varying degrees of haematuria
  - c. urinary sediment with urinary microcysts
  - d. stage II hypertension.
5. The most common histological finding in HIVAN is:
  - a. minimal change disease
  - b. focal segmental glomerulosclerosis
  - c. membranous nephropathy
  - d. mesangiocapillary disease.

6. Elevated bFGF in the kidney extracellular matrix can lead to the following, except:
  - a. increased generation of the fibrotic lesions
  - b. tubulointerstitial proliferation
  - c. progression of focal segmental glomerulosclerosis
  - d. mesangial proliferation

## Regarding the impact of caregiver burden on health-related quality of life (HRQOL) and family functioning

7. Which of the following statements are true about the burden of epilepsy?
  - a. About 80% of people living with epilepsy are in high income-countries.
  - b. 50% of all types of epilepsy have an onset before the age of 10 years.
  - c. Caregiver burden of childhood epilepsy refers to physical, social, psychological or financial difficulties a caregiver may experience.
  - d. Occurrence of  $\leq 4$  complex partial seizures, one generalised tonic-clonic seizure or  $\leq 20$  absence/myoclonic seizures per month is classified as low seizure frequency.
  - e. The Pediatric Quality of Life (PedsQL) family impact module is designed to assess the effect of chronic medical conditions, e.g. epilepsy, on caregivers and their family.
8. Which of the following statements are true?
  - a. Caregivers' educational status was significantly associated with the HRQOL, family functioning and total functioning scores of the carer.
  - b. A parent of a child with high seizure frequency is more likely to have a poor family functioning score.
  - c. A caregiver with tertiary education whose child has low seizure frequency is predicted to have a high impact of caregiver burden.
  - d. The child support grant appears to be more effective than informal support provided by families and friends in mitigating the impact of caregiver burden.
  - e. Polytherapy of anti-epileptic drugs is significantly associated with negative impact on caregiving.

## Regarding breastfeeding support practices in workplaces

9. The most common time support practices found in this study were:
  - a. flexible working time
  - b. time to express breastmilk at work
  - c. part-time work options
  - d. paid maternity leave for >3 months.
10. The study revealed that:
  - a. 43% of workplaces did not provide time for expressing.
  - b. The provision of space was a common practice.
  - c. Workplace breastfeeding policies were mostly found in public sector workplaces.
  - d. Breastfeeding counsellors were not commonly found at workplaces.

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

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After submission you can check the answers and print your certificate.

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11. The study found:
- a mean structural support score of 5 for public sector workplaces
  - public sector workplaces had a higher mean time support score than private sector workplaces
  - public sector workplaces had a lower mean structural support score than private sector workplaces
  - a mean structural support score of 2 for private sector workplaces.
- Regarding the perinatal mortality surveillance system in Zimbabwe**
12. The following strategies can be used to improve the performance of a perinatal mortality surveillance system, except:
- periodic review of the data capturing tool
  - giving feedback to the health workers at the primary care facility
  - reprimanding health workers who fail to notify cases
  - systematic monitoring and evaluation of the surveillance system.
13. The following are attributes of a surveillance system, except:
- stability
  - responsibility
  - acceptability
  - timeliness.
- Regarding the epidemiology, complications and outcomes of neonates with spina bifida**
14. What percentage of the open spina bifida patients were diagnosed antenatally?
- 50%
  - 10%
  - 15%
  - 30%
15. What was the most common complication of open spina bifida in this cohort on admission?
- club feet
  - septic wound
  - hydrocephalus
  - hip dislocation.
16. What was the overall mortality in patients with open spina bifida in this cohort?
- 29%
  - 12%
  - 7%
  - 52%.
- Regarding the prevalence and antibiotic susceptibility of Group A beta-haemolytic *Streptococcus* (GABHS) in children presenting with acute pharyngitis**
17. *Streptococcus pyogenes* is the most important bacterial cause of pharyngitis because of the associated post-infectious immune-mediated complications of rheumatic fever and rheumatic heart disease. Which of the following is true regarding the diagnosis of GABHS pharyngitis?
- Clinical predictive rules are as sensitive as throat swab culture.
  - Use of rapid antigen tests is recommended for high endemic areas.
  - Clinical examination clearly differentiates between viral and GABHS pharyngitis.
  - Clinical predictive rules developed in a different population and which have been adopted in developed countries should be adopted without local validation.
18. Which of the following organisms have been suspected as possible causes of rheumatic fever, especially in the tropics?
- Staphylococcus aureus*
  - Beta-haemolytic *Streptococcus* group C and G
  - Haemophilus paraphrophilus*
  - Streptococcus pneumoniae*
19. Regarding treatment of GABHS:
- Numerous studies from Japan and central Europe show increasing emergence of penicillin-resistant isolates.
  - A 5-day course of penicillin is recommended.
  - There are no concerns for macrolide resistance.
  - Treatment within the first 10 days prevents rheumatic fever.

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