



SAJS CPD QUESTIONS

- Please submit online before 31 March 2026 -

Microductectomy under local anaesthetic for pathological nipple discharge. Is it time to change practice?

1. What is the most common histological finding in patients with pathological nipple discharge (PND) who underwent microductectomy under local anaesthesia in this study?

- a. Ductal ectasia
- b. Intraductal papilloma
- c. Ductal carcinoma in situ (DCIS)
- d. Invasive breast cancer

Stakeholder engagement towards establishing a national thyroid cancer registry in South Africa

2. Which of the following was identified as the most significant barrier to clinician participation in a thyroid cancer registry in South Africa?

- a. Lack of interest in cancer research
- b. Limited time and heavy clinical workload
- c. Lack of information technology (IT) infrastructure in South Africa
- d. Financial limitations

Preoperative risk factors for 90-days postoperative mortality in patients with pancreatic ductal adenocarcinoma undergoing surgery: a cohort-based study

3. Despite advances in surgical techniques and better perioperative care in patients undergoing pancreatic resection, the reported morbidity and mortality rates remain high. Which of the following predictive factors was significantly associated with increased risk of 90-day mortality?

- a. Pancreatic duct dilatation
- b. Carbohydrate antigen (CA) 19–9 > 200 U/L
- c. Serum gamma-glutamyl transferase (GGT) > 500 U/L
- d. HIV-positive status
- e. Tumour located in the body or tail of pancreas

Risk factors for foetal loss in injured pregnant patients: an analysis of 105 patients managed at a major trauma centre in South Africa

4. In the general management of pregnant trauma patients, which principle is most important to optimise both maternal and foetal outcomes?

- a. Prioritising foetal monitoring before maternal stabilisation
- b. Maternal resuscitation and stabilisation take precedence
- c. Immediate delivery regardless of gestational age
- d. Avoidance of all radiological imaging during pregnancy

Pan CT for blunt polytrauma – Is there a need for more selective indications?

5. Why were some “clinically negative” Pan CT scans still regarded as clinically helpful?

- a. They reduced hospital stay by 24 hours
- b. They ruled out injury in patients with unreliable clinical assessment (e.g. intubated, GCS < 15, distracting injuries)
- c. They improved contrast safety profiles
- d. They helped predict long-term disability

The profile and outcomes of patients in a newly established acute surgical care unit in a teaching tertiary hospital in Botswana

6. In the study of 278 acute surgical condition admissions, which of the following is correct?

- a. Intestinal obstruction was the most common cause of admission, followed by acute appendicitis
- b. Median age of patients was 42 years
- c. Most operations (over 70%) were performed by consultants alone
- d. Appendectomy was the most common procedure, accounting for 72% of operations
- e. The overall complication rate was 19.7%

Audit to evaluate the clinical presentation and surgical management of acute appendicitis at a secondary-level hospital in the Western Cape

7. According to the 2024 audit on acute appendicitis at George Regional Hospital, what proportion of patients underwent laparoscopic appendectomy?

- a. 25%
- b. 50%
- c. 66%
- d. 80%

Retrospective observational review comparing pre- and post-COVID-19 surgical services at Mankweng Hospital

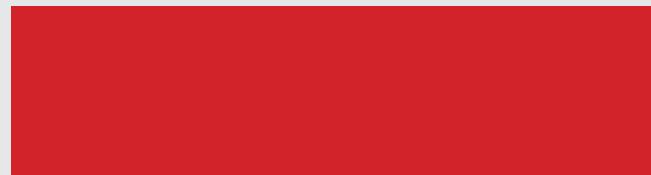
8. Which department had more operations during post-pandemic period in compared to pre-COVID 19 period?

- a. General surgery
- b. Orthopaedic surgery
- c. Paediatric surgery
- d. Gynaecology

Development and implementation of an online undergraduate surgical teaching module at the University of KwaZulu-Natal during COVID-19

9. Which of the following was a key change in the assessment components of the online General Surgery module during the COVID-19 pandemic?

- a. Oral viva voce examinations were replaced with podcasts
- b. Clinical case examinations were replaced with written, structured clinical case scenario examinations
- c. Pre-recorded videos were replaced with live-streamed surgeries
- d. Weekly quizzes were replaced with group projects



SAJS CPD CONTINUED

- Please submit online before 31 March 2026 -

Preliminary experience of reverse lymphatic mapping technique using indocyanine green dye lymphangiography and patent blue dye in melanoma patients undergoing sentinel lymph node biopsies: a case series

10. According to the case series on sentinel lymph node (SLN) biopsy in melanoma, what was a key advantage of the combined ICG and patent blue dye technique in resource-limited settings?

- a. It allowed accurate SLN localisation without requiring radiocolloid injection
- b. It eliminated the need for surgical reconstruction in wide excision cases
- c. It reduced the Breslow thickness measurement of primary melanoma
- d. It avoided the use of intraoperative frozen section for margin assessment

Spinal hydatid cyst with myelopathy: a rare case report

11. What is the causative organism of spinal hydatid disease?

- a. Taenia solium
- b. Schistosoma haematobium
- c. Echinococcus granulosus
- d. Entamoeba histolytica

Eight-year survival with metastatic oesophageal carcinoma: a case report and review of the literature

12. What is one of the main benefits of palliative oesophageal stenting in patients with advanced oesophageal cancer?

- a. It prevents tumour recurrence
- b. It eliminates the need for chemotherapy
- c. It cures the underlying carcinoma
- d. It enables continued oral nutrition and improved quality of life

Gallbladder tuberculosis: an unlikely diagnosis after laparoscopic cholecystectomy

13. Why is imaging alone often insufficient in diagnosing gallbladder tuberculosis?

- a. It cannot detect gallbladder wall thickness
- b. It frequently misinterprets TB as liver metastases
- c. Imaging findings overlap with malignancy and cholecystitis
- d. CT scans are contraindicated in suspected TB

To complete and submit this CPD activity go to www.mpconsulting.co.za

Note that from the 2nd of April 2024 MPC is now offering a comprehensive CPD compliance solution under their new brand as Vertice Software Solutions. This is an annual subscription offered to HCPs to:

- Gain access to all relevant CPD medical journals published on the **Sabinet African Journals Platform** with full functionality and seamless integration to support medical research.
- Complete CPD assessments for all accredited medical journals (excluding those associated with Association or Society Memberships) on the Vertice Software Solutions' system.
- Receive CPD Compliance Support services to HCPs requiring assistance with their CPD compliance status at the Health Professions Council of South Africa (HPCSA), where HCPs complete CPD assessments for Medical Journals. This support service is provided by Vertice Software Solutions.

To subscribe to this service, or more information please contact the Vertice support team support@vertice.software.