



SAJS CPD QUESTIONS

- Please submit online before 31 March 2024 -

The clinicopathological spectrum and treatment outcomes in metastatic colorectal cancer in the KwaZulu-Natal province of South Africa

1. With regard to improved survival in the management of colorectal metastases, which of the following statements is correct?

- Palliation – current management does not improve survival
- Chemotherapy
- A multidisciplinary approach with a view to resect if amenable
- Radiofrequency ablation

Fungal abscess of the parotid gland – the value of microbiological assessment

2. Which of the following is incorrect in the management of fungal parotid abscesses?

- Immediate surgical drainage for source control regardless of the patient's clinical presentation.
- The surgical approach to a fungal parotid abscess should be graduated.
- In the absence of complications, less invasive, serial needle aspirations with or without ultrasound guidance may suffice.
- I&D may be required for source control in the presence of overwhelming sepsis, failed conservative treatment or with large collections with or without extension into the deep neck spaces.

Sentinel lymph node biopsy in a resource-limited setting: a retrospective comparison of sentinel lymph node biopsy before and after the introduction of Sentimag at an academic breast unit

3. Which statement is correct regarding the main benefit of sentinel node biopsy over axillary lymph node dissection?

- Reduced risk of breast cancer recurrence
- Reduced risk of lymphoedema
- Reduced risk of nerve injury
- Reduced risk of axillary metastasis

An observational cross-sectional study to assess teaching, knowledge and resource availability to provide surgical burn care by surgical trainees in hospitals in KwaZulu- Natal, South Africa

4. Which statement regarding a clinical concept that was poorly understood by respondents is correct?

- Full-thickness burns require surgery.
- Wound healing is addressed before contractures can be addressed.
- Granulation tissue indicates a deep wound that requires skin grafting.
- Large burns may require staged surgery.

The impact of thromboelastography on patients with penetrating abdominal trauma requiring intensive care

5. The most common form of coagulopathic bleeding in trauma patients is?

- Platelet dysfunction
- Systemic activation of coagulation
- Fibrinolysis shutdown
- Hypothermia

Adult corrosive ingestions in the Pietermaritzburg Metropolitan Surgical Service

6. The Zargar classification is a system used to

- grade the severity of mucosal injury associated with caustic ingestion.
- assess for mucosal enhancement on contrast-enhanced computerised tomography (CT).
- assess the risk of mortality from caustic ingestion.
- classify caustic agents.

7. The use of contrast-enhanced CT assists with

- assessing for the presence of transmural necrosis.
- ruling out the indication to offer endoscopic evaluation in corrosive ingestion.
- assessing for stricture formation in the acute presentation of corrosive ingestion.
- determining if the distribution of injury is of an alkali or acidic nature.

The vagaries of diagnosis and management of traumatic lumbar artery pseudoaneurysm

8. What is the most common hollow viscus injury from posterior penetrating wounds of the abdomen?

- Small bowel
- Stomach
- Colon
- Oesophagus

9. Embolisation of which artery may result in spinal cord infraction?

- Internal mammary artery
- Artery of Adamkiewicz
- Lumbar artery
- Intercostal artery

Rectal suction biopsies to diagnose Hirschsprung's disease in a low-resource environment – optimising cost-effectiveness

10. Regarding rectal biopsy for the diagnosis of Hirschsprung's disease, which of the following is true?

- A full-thickness rectal biopsy is preferred in newborns.
- A rectal suction biopsy is preferred in newborns.
- The biopsy should be done at the level of the dentate line.
- Rectal suction biopsy has a specificity of 75% for the diagnosis of Hirschsprung's disease.

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