BJOG yearly CME program

Objectives:

After evaluating a specific article published in Bangladesh Journal of Obstetrics& Gynaecology participants of BJOG CME program should be able to demonstrate an increase in their knowledge in obstetrics & Gynaecology. Participants will be able of evaluate the appropriateness of the clinical information as it applies to the promotions patients care.

Participants:

This program is designed for physician who are involved in providing patient care and who wish to advance their current knowledge in obstetrics & gynaecology

BJOG CME award

To earn the award the participants must read the article and complete the exam answer sheet and the evaluation form below. Please send it to OGSB office by 30th july 2018. Address it to: **Editor, BJOG**. And mention the subject as **BJOG yearly CME program**. Either scan your Answer sheet and email these to ogsb@agni.com. Or, send it in a sealed envelop by surface mail to: Editor, BJOG

Obstetrical and Gynaecological Society of Bangladesh (OGSB)

Halcyon Heights

2/3 Mirpur Road, Flat-A/3, Block-A, Mohammadpur, Dhaka-1207.

Please write down your full mailing address (both surface mail & email)

Answer sheets will be graded and certificates including answer keys for exam will be mailed to each participant for CME participation. Three highest credit winners will get award during annual conference of OGSB.

CME on BJOG, 2017, 32(2): 1-3

Review Paper: Aspirin to prevent Pre eclampsia

- Q.1 which of the following are true regarding low dose aspirin in "Collaborative low-Dose aspirin study in pregnancy (CLASP)"?
 - a. It lowered the incidence of preeclampsia significantly
 - b. It lowered the risk of preterm delivery significantly
 - c. It involved >9300 women at risk of PE & IUGR
 - d. They used 80 mg aspirin daily for study
 - e. They have compared aspirin with placebo
- Q.2 A pregnant lady, age 18 years, presented to you with twin pregnancy at 14 weeks of gestation. Will you prescribe her tab. aspirin 75 gm. after food, daily?
 - a. Yes b. No

- Q.3 What are the WHO Recommendation for prevention of pre-eclampsia and eclampsia for our pupation?
 - a. Daily supplementation of 1.5-2.0 gm of oral elemental calcium
 - b. Daily supplementation low dose aspirin 75gm who are at high risk.
 - c. Low dose aspirin should be initiated before 20 weeks of gestation
 - d. Antioxidant should be started in first trimester
 - e. Salt restricted diet has to be taken in moderate to high risk pregnancies.
- Q.4 What recommendations are made in this review paper on Aspirin to prevent preeclampsia (PE)?
 - a. 75 mg Aspirin has to be taken daily in full stomach
 - b. To be taken on alternate days

- c. Only pregnant mothers at high risk for PE should take aspirin
- d. Aspirin should be stopped 5-10 days before delivery
- e. Aspirin should be started after 20 weeks of gestation

Case Report: Sertoli-Leydig Cell tumour of ovary

- Q.5 Which of the following are true regarding Sertoli-Leydig cell tumour of ovary?
 - a. It originates from primitive sex cord and stromal cells.
 - b. It is a common condition in women.
 - c. Typically presents with abdominal pain and lump.
 - d. It commonly causes virilization.
 - e. Usually develop in 3rd decade of life.
- **Q.6** What are the presenting features of the reported case of sertoli-Leydig cell tumours of ovary?
 - a. Her age was eighteen years
 - b. Her menstruation was established for 4 years
 - c. She had painful lump in lower abdomen
 - d. Her breasts were well developed
 - e. Her external genitalia showed hypertrophy of clitoris.
- Q.7 What androgenic effects are caused by sertoli-Leydig cell tumour of ovary?
 - a. Menorrhagia
 - b. Hoarseness of voice

- c. Hirsutism
- d. Breast hypertrophy
- e. Clitoral hypertrophy

Original article: Risk Factors and outcome of preterm labour in a tertiary Health Centre:

- **Q.8** Which of the following are true for a case control study?
 - b. It deals with outcome
 - It is a prospective study
 - d. Cases are with outcome and controls are without outcome
 - e. Student's 't' test is the most common test of significance
 - f. Odd ratio are usually calculated for risk factors
- Q.9 What are the risk factors for preterm labour related to past obstetric history found in this study?
 - a. Abortion
 - b. Post term delivery
 - c. Hyperthyroidism
 - d. Diabetes
 - e. Anaemia
- **Q.10** What risk factors for preterm labour related to present pregnancy are found in this study?
 - a. Pregnancy induced hypertension
 - b. Urinary Tract infection
 - c. Respiratory tract infection
 - d. Vaginal infection
 - e. Oligohydramnios

nswer Sheet: BJOG yearly CME program: Examination: BJOG 2017:32(1).

CME on BJOG, 2017, 32(1): 1-3 Please answer the questions on page by filling in the appropriate boxes below. Please mark the box for true answer and fill in the box until the letter is no longer visible. To process your exam, you must also provide the following information:						
Name (in CAPITAL LETTER)						
Official Address						
Mailing Address						
Mobile noE-mail						
OGSB Member No.						
Q 1	A B C D E					
Q 2						
-	Q3 A B C D E					
	Q5 A B C D E					
Q 6	Q6 A B C D E					
Q 7						
Q S						
Q 1						
Evaluation form						
Your completion of these CME activities includes evaluating them. Please respond to the questions below.						
1. Plea	ase rate these activities (1- minimally, 5- completely)	1	2	3	4	5
1.1	1.1 These CME activities are effective in meeting the educational objectives					
1.2	1.2 These CME activities are appropriately evidence based					
1.3	These CME activities are relevant to my practice					
2. How many of your patients are likely to be impacted by what you learned from these activities?						
< 20%	< 20%		>80%			
3. Do you expect that these activities will help you improve your skill or judgment within the next 6 months? (1-definitely will not change, 5-definitely will change)				3	4	5
4. How will you apply what you learned from these activities (tick mark all that apply on the right of the statement):						
4.1 In diagnosing patients						
4.2	In monitoring patients					
4.3	In educating students and colleagues					
4.4	As part of a quality or performance improvement project					
4.5	For Maintenance of board certification					
4.6	In making treatment decisions					
4.7	As a foundation to learn more					
4.8	In educating patients and their caregivers					
4.9	To confirm current practice					
4.10	For maintenance of licensure					
Please list at least one (1) change you will make to your practice as a result of this CME activity:						
How long did it take you to complete these activities?hoursminutes						
What, in your opinion, are the biggest clinical challenges related to obstetrics and gynecology?						