

CPD questionnaires must be completed online via [www.cpdjournals.org.za](http://www.cpdjournals.org.za). After submission you can check the answers and print your certificate. Questions may be answered up to 6 months after publication of each issue.

## TARGETED TREATMENT OF SEVERE HEAD INJURY

- 1. True (A) or false (B) – fill in only block A or B:**  
The separation of patients into 3 categories of severity (mild, moderate and severe) is no longer regarded as a very accurate way of directing treatment in head injury.
- 2. True (A) or false (B) – fill in only block A or B:**  
Secondary injuries that lead to death are the same ones that cause disability in survivors.
- 3. True (A) or false (B) – fill in only block A or B:**  
Concerns about hypoglycaemia have led clinicians to be less strict about the range of glucose control in neuro-trauma patients.

## FULL-BODY DIGITAL RADIOGRAPHIC IMAGING OF THE INJURED CHILD

- 4. One of the principles guiding radiographic imaging of children is:**
  - A. Scan as much of the body as possible
  - B. Always use digital imaging when available
  - C. Keep the radiation dose as low as reasonably achievable
  - D. Take multiple scans of suspected injuries to ensure detection
  - E. Image the patient in the resuscitation room.
- 5. The following is not an advantage of digital radiography (choose one):**
  - A. Faster examinations
  - B. Electronic access to images
  - C. A reduction in repeat examinations
  - D. Rapid printing of X-ray films
  - E. Cost-efficient imaging at high volumes.
- 6. True (A) or false (B) – fill in only block A or B:**  
Computed radiography is a fully digital imaging modality.

## MODERN MANAGEMENT OF PAEDIATRIC BURNS

- 7. True (A) or false (B) – fill in only block A or B:**  
Fluid losses are maximal from 3 - 12 hours post injury in small burns and up to 24 - 48 hours in larger burns.
- 8. True (A) or false (B) – fill in only block A or B:**  
Blisters larger than 2% BSA and loose skin should be removed while smaller blisters should be punctured.
- 9. True (A) or false (B) – fill in only block A or B:**  
Total parenteral nutrition is not advised in children due to associated infections, metabolic and immunological complications.

## LAPAROSCOPY IN ABDOMINAL TRAUMA

- 10. True (A) or false (B) – fill in only block A or B:**  
Minimally invasive surgery can be performed safely in small children.
- 11. Laparoscopy should not be the first management option for the following (choose one):**
  - A. Suspected bile leak
  - B. Haemodynamic instability
  - C. Pancreatic pseudocyst
  - D. Small-bowel perforations
  - E. Uncertain diagnosis.

## 12. Which one of the following is incorrect for hollow viscus injury?

- A. Diagnosis can be difficult and delayed
- B. It is common with bicycle handle bar injuries
- C. Laparoscopy may help with early diagnosis
- D. Conservative treatment is the preferred management
- E. Abdominal radiology may not always show free air.

## MINOR TRAUMATIC BRAIN INJURIES – WHAT IS NEW?

- 13. Which one of the following is the strongest indicator for intracerebral injury in a child with mTBI?**
  - A. Vomiting
  - B. History of loss of consciousness
  - C. Skull fracture
  - D. Scalp haematoma in a toddler
  - E. History of fall <3 meters.
- 14. Which one of the following has no proven benefit in the management of the concussed child:**
  - A. Explanation and symptom-directed information
  - B. Abstinence from television viewing and video games
  - C. Pain killers for concussion-related headaches
  - D. A graded return to sports activities
  - E. Return to physical rest when the child complains about dizziness during light activity.
- 15. True (A) or false (B) – fill in only block A or B:**  
The risk of fatal cancers induced by CT scanning of the head during the first year of life is 0.07%.

## CONSERVATIVE MANAGEMENT OF INTRA-ABDOMINAL INJURIES

- 16. True (A) or false (B) – fill in only block A or B:**  
Recent evidence advocates placing a single large-bore peripheral line that is immediately utilised, rather than prolonged attempts at establishing two peripheral lines and a central venous catheter, without actually starting the resuscitative process.
- 17. True (A) or false (B) – fill in only block A or B:**  
Tachycardia in children, in the presence of normal blood pressure, may be the only clinical sign of class III shock.
- 18. True (A) or false (B) – fill in only block A or B:**  
The current trend is for significantly shorter periods of bed rest and hospitalisation after injury.

## WHAT'S NEW IN PAEDIATRIC TRAUMA RESUSCITATION?

- 19. True (A) or false (B) – fill in only A or B:**  
The use of a cuffed endotracheal tube is contraindicated in paediatric trauma patients.
- 20. The recommended compression to ventilation ratio in two-person CPR in a child is (choose one):**
  - A. 15:2
  - B. 5:2
  - C. 30:2
  - D. 10:2.