SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME
(Code SMJ 202007B)

	True	False
Question 1. Based on the latest published literature regarding the coronavirus disease 2019 (COVID-19) pandemic, what are the typical features of COVID-19 infection on computed tomography (CT) of the chest during the early stages of infection?		
(a) Ground glass opacities in a peripheral distribution.	☐	☐
(b) Pulmonary consolidation with tree-in-bud changes.	☐	☐
(c) Ground glass opacities in a perihilar distribution with cystic changes.	☐	☐
(d) Cavitating nodules with pleural effusion.	☐	☐
Question 2. What are other possible differential diagnoses for a 'crazy paving' appearance?		
(a) *Pneumocystis* pneumonia.	☐	☐
(b) Non-specific interstitial pneumonia.	☐	☐
(c) *Klebsiella* pneumonia.	☐	☐
(d) Acute respiratory distress syndrome.	☐	☐
Question 3. How are the imaging findings of COVID-19 pneumonia different from those of *Klebsiella* pneumonia? Chest CT findings of patients with COVID-19 pneumonia tend to have a:		
(a) Higher proportion of pulmonary lobar consolidation.	☐	☐
(b) Higher proportion of mediastinal lymphadenopathy.	☐	☐
(c) Higher proportion of pleural effusion.	☐	☐
(d) Higher proportion of cavitary nodules.	☐	☐
Question 4. Which of the following imaging features can help to differentiate the diagnosis of cardiogenic pulmonary oedema from COVID-19 pneumonia?		
(a) Bilateral pleural effusions.	☐	☐
(b) Presence of pulmonary upper lobe venous diversion.	☐	☐
(c) Presence of 'crazy paving' opacities in the case of COVID-19 pneumonia.	☐	☐
(d) Kerley B lines.	☐	☐
Question 5. Regarding the role of radiology in the diagnosis of COVID-19 infection:		
(a) A normal chest radiograph excludes COVID-19 infection.	☐	☐
(b) Radiographic imaging, such as chest radiography and CT, can aid in the detection of COVID-19 pneumonia in unsuspected cases.	☐	☐
(c) CT of the chest is now considered the gold standard for diagnosis.	☐	☐
(d) Other roles of imaging in patient management during the COVID-19 pandemic include triaging of disease severity and survivorship, as well as the management of complications.	☐	☐

Doctor's particulars:

Name in full: _____   MCR no.: _____

Specialty: _____   Email: _____