CPD QUESTIONNAIRE

No 2 2022



Video transmission of urology surgeries: proof of concept in a resource-constrained environment

- 1. Which of the following is **not** a commercial device used for surgical broadcast?
- a. GoPro
- b. Proximie
- c. Kodak
- d. SWIS Surgical
- 2. Video capture cards play no role in live surgical broadcast
- a. True
- b. False
- 3. Which one of the following is an open-source and free programme?
- a. Adobe Premier
- b. OBS Studio
- c. vMix
- d. xSplit
- 4. The ability to see and control the desktop of the remote machine was enabled using:
- a. Cell phones
- b. Skype
- c. TightVNC
- d. WhatsApp

The use of penile fasciocutaneous island flaps in the repair of complex anterior urethral strictures in Kumasi, Ghana

- 5. Which of the following is the **most** suitable technique for treating complex urethral strictures?
- a. Direct vision internal urethrotomy
- b. Suprapubic cystostomy
- c. Urethral dilatation
- d. Urethroplasty
- 6. The following techniques of urethroplasty are suitable for complex urethral strictures, **except**:
- a. Buccal mucosa graft urethroplasty
- b. Excision and end-to-end urethral anastomosis
- c. Fasciocutaneous flap urethroplasty
- Staged urethroplasty

- 7. Which of the following is **not** an advantage of the use of penile fasciocutaneous flap for urethroplasty?
- a. Being hairless
- b. Highly vascularised pedicle
- c. Long flap length
- d. Presence of panlaminar plexus
- 8. The following are aetiological factors for urethral stricture, **except**:
- a. Gonoccocal urethritis
- b. Urethral catheterisation
- c. Urethral schistosomiasis
- d. Urinary tract infection
- 9. Which of the following is an advantage of the use of buccal mucosa graft over penile fasciocutaneous flap for urethroplasty?
- a. Being hairless
- b. Highly vascularised pedicle
- c. Long flap length
- d. Presence of panlaminar plexus

Age at surgery and outcomes of patients with undescended testes at Klerksdorp/Tshepong Complex Hospital, North West, South Africa

- 10. What is the rate of orchidopexy to the whole urology surgery in this study?
- a. 5%
- b. 10%
- c. 15%
- d. 25%
- 11. What is the latest recommended age for orchidopexy?
- a. 5 years
- b. 2-3 years
- c. 12-24 months
- d. 3-6 months
- 12. The following are complications of delayed orchidopexy, except?
- a. Testicular atrophy
- b. Impaired spermatogenesis and infertility
- c. Increased rate of orchiectomy
- d. Increased risk of testicular infection (orchitis)

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13. The study was performed for the following reasons, except?

- a. The importance of early intervention rather than late
- b. To determine the demography of UDT cases in North West Province, South Africa
- Early intervention will not decrease the rate of complication
- Late patient referral is the most important factor for delayed surgery

A case report of ureteroureterostomy for a complete duplex system of the kidney with an ectopic ureter

- 14. Complete duplication of the kidney collecting system and ureters results in anomalies which are best explained by the Weigert-Meyer rule, where:
- One ureteric bud arises from the mesonephric duct and will then bifurcate before it interacts with the metanephric blastema
- b. The lower moiety is analogues to a normal single system and will typically insert sub-sphincterically in a male
- An upper moiety is associated with an ectopic ureter, ureterocele and/or obstruction
- The lower moiety in a male will typically connect with mesonephric duct structures (i.e. seminal vesicles or vas deferens)
- 15. An ectopic ureter in a female should be suspected, with appropriate work up and upper tract imaging, when:
- a. She is two years old and has wet diapers
- b. Is post-toilet training age, with no identifiable neurological or functional disorders but has continuous incontinence
- c. On presentation with her first urinary tract infection (UTI)
- d. Is 35 and complains of stress urinary incontinence

- 16. A contraindication for ipsilateral ureteroureterostomy in a patient with a complete duplication of their kidneys is:
- a. A donor ureter diameter of over 1.2 cm
- b. Non-functioning of the upper pole moiety
- c. Vesicoureteral reflux of the lower moiety
- High-grade vesicoureteral reflux of the lower moiety system with resultant lower pole hydronephrosis being considered for concomitant ureter reimplantation
- 17. Complications of an upper pole nephrectomy include all the following, **except**:
- a. Yo-yo reflux
- Functional lower moiety loss or decreased function of remaining renal unit
- c. Bleeding
- d. Urine leak

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2022 Accreditation number: MDB015/131/01/2022