

CME Diabetes SAQs

- (e) He may be at increased risk of sudden death

9 Which of the following statements concerning diabetes in hospital are true and which false?

- (a) Diabetes is responsible for 5–10% of hospital bed-days in the UK
- (b) Employing a specialist nurse with special responsibility for inpatients could be expected to improve quality of life but not length of hospital stay for diabetic patients
- (c) Insulin infusion therapy in non-diabetic intensive care unit patients can improve mortality and morbidity
- (d) To improve the prognosis of metformin-treated diabetic patients with acute MI they should be switched to insulin only when their blood glucose rises above 10 mmol/l
- (e) Any symptomatic hypoglycaemia in a hospitalised patient is a sign of poor management

10 A 62-year-old retired professional golfer who has had type 2 diabetes for six months presented with an ulcer on his right foot where his golf shoe had been 'rubbing'. Examination revealed an ulcer with surrounding erythema on the plantar surface of his right foot and loss of sensation to light pressure using a 10 g monofilament in both feet. Which of the following statements are true and which false?

- (a) The short duration of diabetes makes this an unlikely cause of his peripheral neuropathy
- (b) Loss of sensation indicates that this is a predominantly neuropathic ulcer
- (c) Once the ulcer has healed he should be instructed in the removal of callus from the soles of his feet

- (d) He is at risk of recurrent foot ulceration and should be reviewed regularly in a diabetic foot clinic
- (e) A swab should be taken to guide antibiotic choice

Guidelines on completing the answer sheet for those who wish to submit their answers on paper

A loose leaf answer sheet is enclosed, which will be marked electronically at the Royal College of Physicians. **Answer sheets must be returned by 21 September 2004** to: CME Department (SAQs), Royal College of Physicians, 11 St Andrews Place, London NW1 4LE.

Overseas members only can fax their answers to 020 7487 4156
Correct answers will be published in the next issue of *Clinical Medicine*.

*Further details on CME are available from the CME department at the Royal College of Physicians (address above or telephone 020 7935 1174 extension 306 or 309).

Your completed answer sheet will be scanned to enable a quick and accurate analysis of results. To aid this process, please keep the following in mind:

- 1 Please print your GMC Number firmly and neatly
- 2 Only write in allocated areas on the form and indicate either true or false for all questions
- 3 Only use pens with black or dark blue ink
- 4 For optimum accuracy, ensure printed numbers avoid contact with box edges
- 5 Please shade circles like this: ● Not like this: ☉
- 6 Please mark any mistakes made like this: ✖
- 7 Please do not mark any of the black squares on the corners of each page
- 8 Please fill in your full name and address on the back of the answer sheet in the space provided; this will be used to mail the form back to you after marking.

CME Respiratory Medicine SAQs

Answers to the CME SAQs published in *Clinical Medicine* May/June 2004

Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10
a) T	a) T	a) T	a) F	a) F	a) F	a) T	a) T	a) F	a) T
b) T	b) T	b) F	b) T	b) F	b) F	b) F	b) F	b) F	b) F
c) T	c) F	c) T	c) F	c) T	c) T	c) F	c) F	c) T	c) T
d) F	d) F	d) F	d) F	d) T	d) T	d) T	d) F	d) T	d) T
e) F	e) T	e) F	e) F	e) F	e) F	e) T	e) F	e) T	e) F