Nov/Dec 2011 - Paediatric Cardiology

CPD questionnaires must be completed online via www.cpdjournals.co.za. After submission you can check the answers and print your certificate.

COMMON PAEDIATRIC CARDIAC EMERGENCIES

- 1.During treatment for a cyanotic spell, the child's murmur is noted to become softer. This indicates (choose one):
 - A. The diagnosis is not tetralogy of Fallot
 - B. The child is responding well to the treatment
 - C. The murmur is originating from a ventricular septal defect
 - D. The pulmonary blood flow has reduced further
 - E. The child has developed a pericardial effusion.
- 2. The drug of choice for the treatment of a narrow complex tachycardia with a rate >220/min is:
 - A. Amiodarone
 - B. Propranolol
 - C. Adenosine
 - D. Verapamil
 - E. Digoxin.

PATTERN RECOGNITION IN PAEDIATRIC ECGs: THE HIDDEN SECRETS TO CLINICAL DIAGNOSIS

- 3. The following is not a criterion for RVH (choose one):
 - A. Dominant R wave in lead V1
 - B. Q wave in lead V1
 - C. Right axis deviation
 - D. Left axis deviation.
- 4. True (A) or false (B):

After termination of a SVT a patient should always have a 12-lead ECG.

MANAGING CONGENITAL HEART DISEASE AND CO-MORBIDITIES

- The following maternal condition is NOT associated with CHD (choose one):
 - A. Acne
 - B. Alcoholism
 - C. Diabetes mellitus
 - D. Osteoarthritis
 - E. Smoking.
- 6. True (A) or false (B):

A normal clinical examination and CXR is 100% sensitive in excluding significant congenital heart disease.

RHEUMATIC HEART DISEASE AND THE ASAP PROGRAMME: FRESH INSIGHTS INTO AN OLD DISEASE

7. True (A) or false (B):

The diagnosis of rheumatic heart disease (RHD) is now predominantly made using echocardiography.

8. True (A) or false (B):

There is conclusive evidence that oral penicillin is the most effective agent for primary and secondary prevention.

ANAESTHESIA FOR THE CHILD WITH CONGENITAL HEART DISEASE: POINTERS AND PITFALLS

9. True (A) or false (B):

The presence of a murmur indicates significant heart disease and should always be investigated prior to any surgery.

10. True (A) or false (B):

Propofol is a safe induction agent for all children with CHD.

CONGENITAL HEART SURGERY: WHAT WE DO TO OUR PATIENTS

11. True (A) or false (B):

Most PDAs require surgical closure.

12. The following is NOT a possible complication of a Blalock-Taussig shunt (choose one):

- A. Postoperative pneumonia
- B. Pericardial effusion
- C. Congestive cardiac failure
- D. Protein-losing enteropathy
- E. Severe cyanosis.

DRUGS FOR THE PAEDIATRIC HEART

- 13. Management of a narrow complex tachycardia in children *does not* include one of the following:
 - A. Vagal manoeuvres
 - B. Recording of a 12-lead ECG at the time of the tachycardia and its resolution
 - C. Adenosine used intravenously
 - D. Verapamil intravenously
 - E. Referral to a cardiologist.

14. True (A) or false (B):

Rheumatic fever prophylaxis consists of biweekly intramuscular penicillin injections.

NEONATAL CARDIAC EMERGENCIES

- 15. Which one of the following is *not* typical of cardiac cyanosis in the neonate?
 - A. Respiratory distress with grunting and recession
 - B. A cardiac murmur is only occasionally present
 - C. The pCO₂ on the blood gas tends to be normal or low
 - D. The neonate 'fails' the hyperoxia test
 - E. The chest X-ray shows clear lung fields with oligaemia or plethora.
- 16. A 3-day-old neonate on treatment for congenital sepsis is found to have a heart rate of 250/min after a few vomiting episodes. The most likely reason is:
 - A. Sinus tachycardia
 - B. Electrolyte imbalance
 - C. An AV re-entry tachycardia
 - D. Dehydration
 - E. Ventricular tachycardia.

DEFIBRILLATION AND CARDIOVERSION IN CHILDREN: DEMYSTIFYING THE SHOCK OF SHOCKING

17. True (A) or false (B):

Shockable dysrhythmias in children include ventricular fibrillation (VF), pulseless ventricular tachycardia (VT) and supraventricular tachycardia (SVT).

18. True (A) or false (B):

KY jelly, sonar gel, alcohol- or saline-soaked gauze should *not* be used as alternatives to defibrillation gel.

THE ROLE OF EPIGENETICS IN THE ORIGIN OF CONGENITAL HEART DISEASE

19. True (A) or false (B):

The control of heart development is primarily the function of the T-box transcription factors.

20. True (A) or false (B):

Teratogenic or other modifications of these (epigenetic) controlling mechanisms can lead to CHD without causing any changes of the DNA sequence.

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