



THE JOURNAL *of the* AMERICAN OSTEOPATHIC ASSOCIATION

The purpose of this quiz is to provide a convenient means for osteopathic physicians to assess their understanding of the scientific content in the September 2014 issue of *The Journal of the American Osteopathic Association (JAOA)*.

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Alternatively, osteopathic physicians can complete the quiz below and mail it to the following address by March 31, 2016:

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For each of the questions below, place a checkmark in the box provided next to your answer so that you can easily verify your answers against the correct answers, which will be published in the October 2014 issue of the JAOA.

Pilot Trial of Osteopathic Manipulative Therapy for Patients With Frequent Episodic Tension-Type Headache

Guido Rolle, MD, DO (Italy);
Lucio Tremolizzo, MD, PhD;
Francesco Somalvico, MS;
Carlo Ferrarese, MD, PhD;
and Livio C. Bressan, MD

- Which of the following statements is correct about osteopathic manipulative therapy in the management of episodic tension-type headache:
 - (a) It has been consistently tested against prophylactic drug management.
 - (b) It reduces headache frequency but not use of over-the-counter medications over time.
 - (c) It reduces headache frequency and use of over-the-counter medications over time.
 - (d) It has been tested in a double-blind protocol.

Foley Catheter vs Prostaglandin as Ripening Agent in Pregnant Women With Premature Rupture of Membranes

A. Dhanya Mackeen, MD, MPH;
LaToya Walker, MD; Kelly Ruhstaller, MD;
Meike Schuster, DO; and Anthony Sciscione, DO

- Which one of the following is not associated with prolongation of latency:
 - (a) chorioamnionitis
 - (b) admission to the neonatal intensive care unit
 - (c) cesarean delivery
 - (d) neonatal sepsis
- In previous studies, the use of Foley catheter as a method for induction has been shown to be...
 - (a) inferior to prostaglandin use.
 - (b) equal to prostaglandin use.
 - (c) superior to prostaglandin use.

Osteopathic Primary Care of Patients With Inflammatory Bowel Disease: A Review

Jack D. Bragg, DO

- Which of the following statements is true regarding the primary care treatment of patients with inflammatory bowel disease (IBD):
 - (a) Anemia in a patient with IBD can cause symptoms such as fatigue and loss of stamina, can result in loss of quality of life, and should be evaluated and managed.
 - (b) Anemia in patients with IBD is always a result of iron deficiency.
 - (c) Most patients with IBD who have anemia need a blood transfusion as well as supplemental iron therapy.
 - (d) The gastroenterologist should be the physician team member who diagnoses and manages anemia.
- Patients with IBD should receive certain vaccinations. Which of the following statements is true:
 - (a) Human papillomavirus vaccination is not usually considered necessary in patients with IBD.
 - (b) Patients receiving immunosuppressive medications such as corticosteroids should receive no vaccinations because they may actually get the disease that is attempting to be prevented.
 - (c) Every patient with IBD should receive a parenteral form of the influenza vaccination.
 - (d) Vaccinations are not helpful in patients with IBD because their immune systems do not allow for the vaccination to produce a response.

Earn CME Credits Online

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6. Regarding bone health in patients with IBD, which of the following statements is true:
- (a) Corticosteroids may actually delay or prevent osteoporosis.
 - (b) There are several reasons why patients with IBD are at higher risk for osteoporosis.
 - (c) Dual-energy x-ray absorptiometry should be conducted yearly to ensure early diagnosis of osteoporosis.
 - (d) Primary care physicians and gastroenterologists alike consider diagnosing and managing bone disease as their responsibility.

Management of Ionizing Radiation Injuries and Illnesses, Part 4: Acute Radiation Syndrome

Doran M. Christensen, DO; Carol J. Iddins, MD; Steven J. Parrillo, DO; Erik S. Glassman, EMT-P, MS; and Ronald E. Goans, PhD, MD, MPH

7. Which of the following is not a subsyndrome of acute radiation syndrome:
- (a) hemato-orthopedic
 - (b) neurovascular
 - (c) gastrointestinal
 - (d) hematopoietic
8. What is the median lethal dose of ionizing radiation exposure when no treatment is provided?
- (a) 2.5 Gy (250 rad)
 - (b) 100 Gy (10,000 rad)
 - (c) 4 Gy (400 rad)
 - (d) 6.5 Gy (650 rad)

Relationships Between the Comprehensive Osteopathic Medical Achievement Test (COMAT) Subject Examinations and the COMLEX-USA Level 2-Cognitive Evaluation

Feiming Li, PhD; Kevin E. Kalinowski, PhD; Hao Song, PhD; and Bruce P. Bates, DO

9. Scores from which of the following Comprehensive Osteopathic Medical

Achievement Test (COMAT) subject examinations consistently had the highest correlations with scores on the Comprehensive Osteopathic Medical Licensing Examination-USA Level 2-Cognitive Evaluation (COMLEX-USA Level 2-CE):

- (a) emergency medicine
- (b) family medicine
- (c) internal medicine
- (d) pediatrics
- (e) psychiatry

10. Students who take 5 or more COMAT subject examinations are predicted to gain approximately how many points on the COMLEX-USA Level 2-CE over candidates taking 4 or fewer COMAT subject examinations?

- (a) 0
- (b) 6
- (c) 18
- (d) 29
- (e) 37

11. Scores on COMAT from which of the following groups explained the most variance in COMLEX-USA Level 2-CE scores:

- (a) students in the high-stakes group
- (b) students in the low-stakes group
- (c) psychiatry rotation students
- (d) surgical rotation students
- (e) all students

Pierre Robin Sequence in a Neonate With Suckling Difficulty and Weight Loss

Jeffery Summers, OMS IV; Jacob Ludwig, OMS IV; Amber Koon, OMS V; and David Kanze, DO

12. A woman gives birth to a male neonate weighing 7 lbs 6 oz. She received prenatal care in the first trimester. During feeding 2 hours after birth, the neonate has oxygen desaturation, and micrognathia and glossoptosis are noted. Which of the

following interventions should be tried initially to prevent oxygen desaturation during feeding:

- (a) distraction osteogenesis
- (b) osteopathic manipulative treatment
- (c) tongue-lip adhesion
- (d) a lateral feeding position
- (e) nasogastric tube placement

13. In the presence of Pierre Robin sequence, why is it important to consult a geneticist?

- (a) There is no need to consult a geneticist.
- (b) Pierre Robin sequence can be associated with other genetic abnormalities.
- (c) Treatment will be solely based on genetic makeup.
- (d) Genetics will determine the effectiveness of surgery.
- (e) Geneticists are the best-trained individuals to treat these newborns.

Use of a Small Intestine Submucosa Extracellular Matrix Patch in Repeated Carotid Endarterectomy

Nicholas J. Madden, DO; Douglas A. Troutman, DO; and Arthur J. DeMarsico, DO

14. Small intestine submucosa extracellular matrix patches in the setting of carotid endarterectomy have all of the following potential benefits except:

- (a) decreased infection rate
- (b) more physiologic remodeling properties
- (c) less expensive than other available patches
- (d) generation of an anti-inflammatory cascade
- (e) ease of handling

Answers to August 2014 JAOA CME Quiz

Discussion answers to JAOA continuing medical education quizzes appear only when authors have included discussions with the quiz questions and answers they must provide to meet the requirement for submission to and publication in the JAOA.

Effects of Somatic Dysfunction on Leg Length and Weight Bearing

Yasmin Qureshi, MHS (Ost), MPT, DPT; Andrew Kusinski, DO; Julianne L. Bemski, OMS III; John R. Luksch, DO; and Lacy G. Knowles, DO

- (b) According to previously published literature, a functional shorter leg can lead to an anterior innominate rotation on the shorter leg; however, this finding was not consistent with this study's findings.
- (b) The current and most reliable method of assessing structural leg length discrepancies is standing anteroposterior computed radiography. Tape measurement, while widely used clinically, has not been shown as reliable; the supine-to-long sitting test is for functional shorter legs; and the palpatory measurement is subjective and the least reliable method.
- (a) In relation to the authors' findings, an ipsilateral shorter leg was found to be caused by a superior shear. An ipsilateral longer leg was found to be associated with an anteriorly rotated innominate, although historically in the literature, a shorter leg is known to create an anteriorly rotated innominate (but not vice versa). An inflare is a transverse plane somatic dysfunction of the pelvis and was not shown to create an ipsilateral shorter leg.
- (b) The authors found that somatic dysfunctions of the sacrum and lumbar spine followed the common compensatory pattern.

Burnout Among Osteopathic Otolaryngology Residents: Identification During Formative Training Years

Morgan G. Yost, DO; Jane C. Johnson, MA; Michael M. Johns III, MD; and Kelly D. Burchett, DO

- (c) Impostorism is not a component of burnout included in the Maslach Burnout Inventory–Human Services Survey; it is a syndrome wherein students, residents, or physicians who are objectively competent feel the opposite and therefore fear being unmasked as “fake.”
- (c) Although the rate of overall burnout was lower among osteopathic otolaryngology residents, only the difference in rates of low personal accomplishment reached statistical significance.
- (d) Reporting performance of a major medical error has been linked to high rates of physician burnout.

Nonmedical Use of Stimulants Among Medical Students

Jason Adam Wasserman, PhD; Jennifer E. Fitzgerald, MA, DO; Merlin A. Sunny, MA, DO; Maria Cole, PhD; Richard R. Suminski, MPH, PhD; and John J. Dougherty, DO

- (c) Nonmedical use of stimulants by osteopathic medical students differed from other studied undergraduate populations in the rate of nonmedical use of stimulants.
- (b) A negative factor associated with nonmedical use of stimulants is identified in osteopathic medical students who reported religious attendance.

- (e) Osteopathic medical students who were categorized as nondiagnosed nonusers, diagnosed users, nondiagnosed users, and undergraduate users perceived that nonmedical use of stimulants was an accepted practice.

Multitasking Behaviors of Osteopathic Medical Students

Ankit V. Shah, OMS III; Dustin J. Mullens, OMS III; Lindsey J. Van Duyn, OMS III; and Ronald P. Januchowski, DO

- (d) Studies have defined multitasking as the ability of a person to simultaneously perform 2 or more functions and as quickly exchanging focus back and forth between 2 or more tasks through “context switching.”
- (c) Examination schedule was the most influential factor causing students to multitask during lecture.

Use of Osteopathic Manipulative Treatment to Manage Recurrent Bouts of Singultus

Benjamin Seidel, DO, and Gina Benaquista Desipio, DO

- (c) In this article, intractable singultus was defined as lasting longer than 1 month.
- (b) Chlorpromazine is the drug of choice in empiric therapy of patients with idiopathic singultus.