

ASSESSMENT OF 15 MCQs

FPSC No : 87

MCQS ON PERSON CENTRED DIABETES CARE AND MEAL PLANNING
FOR THE OLDER PERSON

Submission DEADLINE: 8 December 2020, 12 NOON

INSTRUCTIONS

- To submit answers to the following multiple choice questions, you are required to log on to the College Online Portal (www.cfps2online.org)
- Attempt ALL the following multiple choice questions.
- There is only ONE correct answer for each question.
- The answers should be submitted to the College of Family Physicians Singapore via the College Online Portal before the submission deadline stated above.
- There will be NO further extension of the submission deadline

1. Which of the following could help to improve insulin sensitivity and beta-cell function in older adults?
- Aerobic exercise
 - Insulin glargine therapy
 - Intermittent fasting
 - Linagliptin
 - Protein supplement
2. A 70-year old male presented to your clinic with polyuria and nocturia for the past two weeks. Random blood glucose is 23 mmol/L. The HbA1c was 6.5 percent. What would you do next?
- Advise lifestyle and review in three months
 - Perform fasting blood glucose the following day
 - Perform oral glucose tolerance test the following day
 - Repeat HbA1c in two weeks
 - Start treatment for diabetes mellitus
3. A 65-year old male presented to your clinic with polyuria and nocturia for the past two weeks. Random blood glucose is 23 mmol/L. The HbA1c was 10.5 percent. He has no past medical illness. What would you do next?
- Advise lifestyle and review in three months
 - Start Metformin 250 mg twice daily
 - Start Glipizide 5 mg daily
 - Start Metformin 250 mg twice daily and Glipizide 5 mg daily
 - Start full insulin replacement therapy
4. A 70-year old female has type 2 diabetes mellitus for the past 10 years. Her HbA1c level was 10.5 percent. She has hypertension and hyperlipidaemia. Her current medications are metformin 850 mg TDS, glipizide 10 mg bd, atorvastatin 20 mg on and amlodipine 10 mg daily. On examination, the blood pressure 140/90 mmHg, pulse rate 80 per minute, BMI 28.5 kg/m². The rest of the examinations are unremarkable. Which of the following might help the patient to achieve the treatment goal?
- Refer the patient to a dietician
 - Start basal insulin
 - Self-monitoring blood glucose
 - Start SGLT2 inhibitor
 - Increase glipizide to 10 mg TDS
- I, ii, iii
 - I, iii, iv
 - I, iii, v
 - Ii, iii, iv
 - All of the above
5. A 70-year old female has type 2 diabetes mellitus for the past 10 years. Her HbA1c level was 8.5 percent. She has hypertension and hyperlipidaemia. Her current medications are metformin 850 mg TDS, glipizide 10 mg bd, atorvastatin 20 mg on and amlodipine 10 mg daily. On examination, the blood pressure 140/90 mmHg, pulse rate 80 per minute, BMI 34.5 kg/m². The rest of the examinations are unremarkable. Which of the following would affect his treatment plan?
- Chronic kidney disease stage 4
 - Left hemiparesis
 - Living alone
 - Macular edema
 - Right lower extremity amputation
- I, ii, iii
 - I, iii, iv
 - I, iii, v
 - Ii, iii, iv
 - All of the above

6. What is one of the main problems of the current care model with respect to chronic disease care?

- A. It does not take into account that chronic diseases are difficult to manage
- B. It requires patients to self-manage their diseases most of the time
- C. It is prescriptive rather than collaborative, so patients' goals, concerns and challenges are mostly not taken into account
- D. It has been in use for a very long time
- E. It is not based on clear evidence

7. Which of the following is NOT an element of the Chronic Care Model?

- A. The health system
- B. Decision support
- C. Delivery system design
- D. Shared decision making
- E. Clinical information systems

8. Which Chronic Care Model element does NOT apply to the "Conversation" step of the Year of Care person-centred care programme?

- A. Self-management support
- B. Decision support
- C. Health system
- D. Delivery system design
- E. All of the above apply

9. Which of the following best describes "person-centred care"?

- A. Care that gives patient enough information and whatever they want
- B. Care that is respectful and responsive to individual patient preferences, needs and values, and ensuring that patient values guide all clinical decisions
- C. Care where multidisciplinary services that are thought to be most appropriate for the condition are arranged and coordinated around the patient
- D. Care that is safe, effective, efficient, evidenced-based and up-to-date
- E. Care that requires actions by the patient

10. Person-centred care has been associated with which of the following?

- A. A reduction in HbA1c
- B. An increase in self-efficacy
- C. A decrease in diabetes-related anxiety
- D. Increased patient and HCP satisfaction
- E. All of the above

11. Which of the following are components of structured lifestyle approach?

- I. Low-calories diet prescription**
- II. Incorporation of meal replacements**
- III. Physical activity recommendations**

IV. Menu plans with meal ingredients and nutrition facts

- A. I and II only
- B. I and III only
- C. I, II and IV only
- D. I, III and IV only
- E. I, II, III and IV

12. Which of these individuals are more likely to benefit from structured lifestyle intervention?

- I. Individuals with weight loss and weight maintenance struggles**
- II. Individuals who are not ready to make lifestyle changes**
- III. Individuals who make impulsive food choices when hungry**
- IV. Individuals with poor glycaemia control but ready for lifestyle changes**

- A. I and II only
- B. I and III only
- C. I, II and IV only
- D. I, III and IV only
- E. I, II, III and IV

13. Overweight/obese patients with T2DM tend to improve their cardiovascular risk factors with just modest _____.

- A. Maintenance of their current weight
- B. Weight loss of <5 percent from their initial weight
- C. Weight loss of 5-10 percent from their initial weight
- D. Weight loss of at least 15 percent from their initial weight
- E. All of the above

14. The following measures could help to prevent diabetes complications EXCEPT?

- A. Controlling blood glucose and HbA1c level
- B. Eliminating all carbohydrates from the diet
- C. Controlling blood pressure and blood lipids
- D. Consuming snacks within the calorie recommendations
- E. Achieving the desired weight loss and maintenance goal

15. Which of the following are benefits of structured lifestyle approach?

- I. Improvement in food quality and quantity**
- II. Prescribed diet plans simplify decisions to eat**
- III. Meal patterns become more regular**
- IV. Decreased meal preparation time and effort**

- A. I and II only
- B. I and III only
- C. I, II and IV only
- D. I, III and IV only
- E. I, II, III and IV