

CME Credit Application Form

(1 CME credit)

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1. Educational questions. Answer by marking the correct answer.

1. Which of the following statements regarding trichloramine is false?

It is a volatile disinfection by-product with irritant properties. It accumulates in the air of indoor swimming pools. The WHO recommends not to exceed the value of $0.5 \text{ mg} \cdot \text{m}^{-3}$ in swimming pool air. The levels found in this study were higher than observed in previous published studies.

2. Which of the following sentences on swimming pool attendance is false?

Almost all children in the study had ever attended a swimming pool. Around 20% of children had regularly attended swimming pools during the summer and winter in the last year. Swimming pool attendance differed by sex but not by parental socioeconomic position. Chlorinated pool attendance was more common than brominated pool attendance.

3. Which of the following health outcomes was found to be positively associated with swimming pool attendance?

Asthma. Rhinitis symptoms. Allergic rhinitis symptoms. Eczema.

4. Which of the following reasons is not a likely explanation for the observed protective effect of swimming pool attendance on respiratory health?

Benefit of physical activity during swimming. Residual confounding by other physical activity. Reverse causation: those with symptoms avoid swimming. Protective respiratory effect of trichloramine exposure.

5. Which of the following limitations would be improved if the study was repeated with a longitudinal design?

Potential reverse causation. Sample size. Potential misclassification. Response rate.

Please turn the page and fill in your details

CME Credit Application Form (continued)

2. Applicant personal details.

Reference No: ERS Membership No. (if known):

Date of Birth (DD/MM/YYYY):

Family Name: First Name:

Mailing Address:

.....

Postal Code: City: Country:

Telephone: + E-mail:

3. Payment details.

I agree for payment of £30 (pounds sterling) to be taken from my credit card (MasterCard and Visa only). Details are as follows:

Card Type: MasterCard / Visa (please circle) Cardholder Name:

Cardholder Number:

Start date: Expiry date:

*CV2 No: Signature:

Cardholder Address:

(if different from above address)

*CV2 No: this is the number on the back of your card - without this number we are unable to process payments through the system

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