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Anesthesiology's journal-based CME program is open to all readers. Members of the American Society of Anesthesiologists participate at a preferred rate, but you need not be an ASA member or a journal subscriber to take part in this CME activity. Please complete the following steps:

- 1. Read the article by Schreiber *et al.* entitled "Prevention of succinylcholine-induced fasciculation and myalgia: A meta-analysis of randomized trials" on page 877 of this issue.
- 2. Review the questions and other required information for CME program completion (published in both the print and online journal).
- When ready, go to the CME Web site: http://www. asahq.org/journal-cme. Submit your answers, form of payment, and other required information by December 31 of the year following the year of publication.

The American Society of Anesthesiologists is approved by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians.

The American Society of Anesthesiologists designates this continuing medical education program for a maximum of 1 hour of Category 1 credit toward the AMA's Physician Recognition Award. Each physician should claim only those hours of credit actually spent in the activity.

Purpose: The focus of the journal-based CME program, and the articles chosen for the program, is to educate readers on current developments in the science and clinical practice of the specialty of Anesthesiology.

Target Audience: Physicians and other medical professionals whose medical specialty is the practice of anesthesia.

Learning Objectives: After reading this article, participants should have a better understanding of succinylcholine-induced fasciculations and myalgias and the risks and benefits of their pretreatment.

Disclosure Information:

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CMD Article Ouestions

Based on the article by Schreiber *et al.* entitled "Prevention of succinylcholine-induced fasciculation and myalgia: A meta-analysis of randomized trials" in the October issue of ANESTHESIOLOGY, choose the one correct answer for each question:

- 1. Pretreatment with which of the following is *least* likely to reduce the incidence of succinylcholine-induced fasciculations?
 - A. Lidocaine
 - B. Nondepolarizing muscle relaxants
 - C. Magnesium
 - D. Nonsteroidal antiinflammatory drugs

- 2. Which of the following statements concerning succinylcholine-induced myalgias is *most* likely true?
 - A. They occur in less than 20% of patients receiving succinylcholine.
 - B. They are short-lasting, disappearing by 24 hr after surgery.
 - C. They are strongly correlated with succinylcholine-induced fasciculations.
 - D. They can persist for more than 2 days.

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- 3. Succinylcholine-induced myalgias are *most* likely to be prevented by which of the following?
 - A. Pretreatment with a nondepolarizing muscle relaxant
 - B. Administration of a smaller dose of succinylcholine
 - C. Administration of opioids during induction
 - D. Anesthetic induction with propofol
- 4. Pretreatment with an appropriate dose of nondepolarizing muscle relaxant to reduce succinylcholine-induced fasciculations and myalgias is *least* likely to cause which of the following side effects prior to the induction of anesthesia?
 - A. Diplopia
 - B. Swallowing difficulties
 - C. Breathing difficulties
 - D. Voice disorder

- 5. Which statement concerning the incidence of succinylcholine-induced myalgias is *most* likely true?
 - A. It is significantly decreased by pretreatment with nonsteroidal antiinflammatory drugs.
 - B. It is consistent across numerous randomized controlled trials.
 - C. It is positively correlated with increased blood levels of creatine kinase.
 - D. It is positively correlated with increased blood levels of free myoglobin.

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If you have any questions regarding the Anesthesiology continuing medical education program, please contact Jennifer Braun at (847) 825-5586 or via e-mail at j.braun@asahq.org.