



**SGH  
PGAHI**

POSTGRADUATE  
ALLIED HEALTH INSTITUTE

# SGH - UIC Ambulatory Care Course: Shining the Light on Caring for Adults with Mental Health Conditions 17 November 2019

## Introduction

Mental illness is prevalent in Singapore but social stigmatism prevents prompt diagnosis, treatment and social support.

To care effectively for individuals with mental illness, health professionals should understand the various aspects of the condition including recognition, diagnosis, therapies, its chronic and relapsing nature and available support structures. Mental illness may co-exist with other chronic diseases and adds to the complexity of care. Taking steps to de-stigmatize mental illness will ensure holistic management of these adults.

## Course Objectives

- Recognise the various assessment tools in detecting and diagnosing common mental illnesses.
- Discuss the drug and non-drug therapies and latest updates.
- Overcome challenges faced when managing adults with mental illness.
- Using a multidisciplinary approach to optimize medication therapy for adults with mental illness.

## Target Audience

Pharmacists and All Allied Health Professionals

## Course Outline

- Clinical assessments in the diagnosis of common mental illnesses and updates on drug and non-drug therapies.
- Local community resources to support mental health.
- Sharing experiences: the collaborative approach to the management of adults with mental illness.
- Case discussions: optimizing medication therapy.

## Course Details

Date	: 17 November 2019 (Sunday)
Duration	: 1 day
Time	: 8.30 am – 5.30 pm
Venue	: Academia 20 College Road Singapore 169856
Fee	: S\$130 per pax (SingHealth) (incl of 7% GST) S\$145 per pax (Regular)

## Teaching Faculty

### Dr Shiyun Kim

Clinical Assistant Professor and Clinical Pharmacist  
Ambulatory Pharmacy Services  
University of Illinois Chicago

### Assoc. Prof Leslie Lim Eng Choon

Senior Consultant  
Department of Psychiatry  
Singapore General Hospital

### Mr Ng Boon Tat

Specialist Pharmacist  
Institute of Mental Health

### Ms See Yen Theng

Director  
Agency of Integrated Care

## Registration

Ms Carlyn Wee

Email: [carlyn.wee.g.p@sgh.com.sg](mailto:carlyn.wee.g.p@sgh.com.sg)



## Quick links

[FAQs](#)

[PGAHI Programmes](#)

[Training Calendar and Directory](#)



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## Registration Slip

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**Submit your registration form to Carlyn Wee at [carlyn.wee.g.p@sgh.com.sg](mailto:carlyn.wee.g.p@sgh.com.sg) by 16 October 2019!**

The information provided for course registration is true and accurate to the best of my knowledge. Submission of any false information will render my application void with no refund of registration fee. Submission of my professional certification or qualifications for auditing purpose may be required.

By registering for the course, you agree to the [Terms & Conditions](#) of PGAHI.

**Quick links:** [FAQs](#), [PGAHI Programmes](#), [Training Calendar and Directory](#)

### PARTICIPANT'S PARTICULARS

Name *(to be reflected on cert)*:

Contact no.:

Email:

Profession:

AHP *(please indicate)*: \_\_\_\_\_  Doctor  Nurse  Others: \_\_\_\_\_

Department:

Organisation:

PRN/ MCR/ Nursing no. *(if applicable)*:

Any cancellation or replacement must be conveyed to PGAHI in writing. A cancellation fee of 50% of course fee will be charged if the cancellation is made before **16 October 2019**. There will be no refund of course fee for cancellation on or after **16 October 2019**. PGAHI reserves the right to cancel the course and fully refund the amount of registration fee paid to the participants should unforeseen circumstances necessitate it.

For **cheque payment**, please issue a **crossed cheque** payable to "Singapore General Hospital Pte Ltd" and mail the cheque attention to **Ms Carlyn Wee, SGH-PGAHI, 20 College Road, Academia, Level 2, Singapore 169856**.

For **invoice to organisation**, please complete the below billing details:

### BILLING DETAILS

Bill to:

Billing address:

Attention invoice to *(name & department)*:

Email of addressee:

Contact no. of addressee:

I consent to Singapore General Hospital and its related corporations (collectively 'SingHealth'), their agents and SingHealth's authorised service providers collecting, using, disclosing and/or processing my personal data, in order to send me marketing materials, etc.

I confirm and agree that my consents granted herein do not supersede or replace any other consents which I may have previously provided to SingHealth in respect of my personal data, and are additional to any rights which SingHealth may have at law to collect, use or disclose my personal data.

By providing the information set out in this form and submitting the same to you, I confirm that I have read, understood and consent to the SingHealth Data Protection Policy, a copy of which is available at <http://www.singhealth.com.sg/pdpa>. Hard copies are also available on request.