

SGH Alumni Newsletter



ISSUE 32 | JANUARY — MARCH 2021

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SGH PGMI
Postgraduate
Medical Institute

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A/Prof Lim Chwee Ming
Director
Clinical Translational Research
Singapore General Hospital



Ms Geraldine Ong
Chief Financial Officer
Finance
National Cancer Centre Singapore



Dr Loh Yet Hua
Head
Department of Dietetics
Singapore General Hospital



Ms Wai Sue Lea Charity
Chief Operating Officer
Sengkang General Hospital



A/Prof Ruban Poopalalingam
Deputy Group Chairman Medical Board
SingHealth



A/Prof Chong Tze Tec
Head
SingHealth Duke-NUS Vascular Centre
SingHealth Duke-NUS Academic Medical Centre



A/Prof Low Lian Leng
Chief Medical Informatics Officer
SingHealth Office of Regional Health
SingHealth



Mr Vincent Lim Tian Ka
Chief Communications Officer
Changi General Hospital

AWARDS RECIPIENTS

AM•EI GOLDEN APPLE AWARDS 2020

The AM•EI Golden Apple Awards 2020 recognise the following 12 outstanding educators for their excellence in education!

Their passion, dedication and innovation have transformed teaching and helped raise standards of healthcare education for better patient care.

Read more at: <https://www.singhealth.com.sg/news/tomorrows-medicine/meet-the-amei-golden-apple-award-2020-winners>



NEW DEVELOPMENTS

KEEPING DIABETES IN CHECK

Diabetic patients will no longer have to worry about remembering what to do before their appointment. Neither will they have to be pressured over trying to recall all the advice and instructions given by the doctor during a consultation.

The MyVisit app, launched by Singapore General Hospital's (SGH) Endocrinology Department, keeps track of all these and more, making the outpatient journey a less stressful experience. It helps the patients to not only plan their visit, but also allows them to take charge of their own health.

"Our goal is to empower patients, and give them greater knowledge and confidence in managing their own health," said Dr Amanda Lam, Consultant, Department of Endocrinology, SGH.

A one-stop app

Piloted in July 2019, the MyVisit app is embedded within SingHealth's HealthBuddy app. Designed specifically with diabetes patients' needs in mind, it includes features such as a pre-appointment questionnaire, a consultation summary, and test results history. "Giving patients easy access to this information allows them to monitor their condition better.

Previously we explain what the test results and trends mean, but now patients can view them on their personal devices at their own time," said Dr Lam.

The app has more than 3,000 active users, and the department is hoping to get more patients on board.

Diabetes is a chronic illness that has a significant degree of complexity and requires a good deal of patient involvement, said Dr Lam.

"It affects nearly every aspect of a patient's life — the activities you do, what you eat, and what time you eat. A lot of self-management is involved, so we felt that this is the group that would benefit most in terms of being empowered," she added.

With all the information about their care at their fingertips, patients will become more conscious of their health management.

"Even the simple act of answering the questionnaire makes them realise what aspects of care they should pay attention to, and they look out for those things as they go about their daily lives," said Dr Lam.

Doctors also find the questionnaire handy. A quick look at the responses before the patient visits the clinic helps them zero in on issues of concern, maximising face-to-face interaction time, and making the consultation more meaningful and efficient.

The digital way

The team anticipated that not all patients would experiment with an unfamiliar app on their own. So staff known as digital ambassadors were stationed at the clinics to assist patients who were open to trying it.

"The ambassadors download the app in front of the patients and give them a visual walkthrough. When patients realise they can get more out of their consultation through the app, it becomes a bit easier to convince them," said Dr Lam.

As the app requires patients to log in via the SingPass portal, the team even set up password reset stations on-site for patients who have forgotten their login details.

Dr Lam foresees the app can eventually be custom-built for conditions other than diabetes. But for now, the team is working on improving the app for diabetes patients.

"We are doing patient surveys to better understand the remaining unmet needs so that we can tailor add-ons in future iterations of this app," she said.

NEW DEVELOPMENTS

SAFER, FASTER SURGERY FOR A CURVED SPINE

Two to four out of 100 people are affected by scoliosis, a sideways curvature of the spine. It occurs most often among adolescents aged 10 to 16. At KK Women's and Children's Hospital (KKH), nearly eight out of 10 newly diagnosed cases belong to this group. With increased health literacy, more cases are also showing up with early onset of scoliosis, including those under three years old.



Managing scoliosis

Having scoliosis can undermine one's quality of life as it can cause chronic back pain, particularly in more severe cases. It can also cause noticeable differences in one's physical appearance, such as uneven hips and shoulders or prominent ribs. This can result in some children becoming selfconscious about their appearance and affect their emotional development, and more so as they move toward their teenage years.

Milder scoliosis may be controlled with less invasive or non-surgical methods, including orthoses such as a spinal brace.

In severe or late scoliosis where the spinal curve is more than 45 degrees, surgery is recommended to correct the condition and prevent it from worsening.

"When early detection or other means to correct the condition is not possible, surgery is encouraged as early as possible. After surgery, young patients can look forward to many years of developmental growth and greatly benefit from an improved quality of life," said Clinical Associate Professor Kevin Lim, Chairman, Division of Surgery and Senior Consultant, Department of Orthopaedic Surgery, KKH.

Young patients with severe scoliosis can benefit greatly from an improved quality of life after surgery, said Clinical Associate Professor Kevin Lim.

No radiation exposure

After acquiring new technology in July 2020, KKH doctors have been able to conduct spinal fusion surgeries for scoliosis in a safer and more efficient way without the use of radiation.

In spinal fusion surgery, rods and screws are implanted in the spine to realign and fuse together the vertebrae so that they heal into one solid bone mass.

Previously, x-rays had to be taken during the surgery to guide surgeons in placing the screws and implants accurately. This exposes the patient and healthcare team in the operating theatre (OT) to radiation.

The new technology — the 7D Machine-vision Image Guided Surgery (MvIGS) system — uses visible light in place of radiation. With the system's patented surgical light placed above the patient, built-in camera technology and light sensors are linked to computing resources in the OT to provide real-time 3D images. The system is based on technology similar to that used in self-driving cars.

KKH is the first hospital in Asia to install the MvIGS system developed by Toronto-based 7D Surgical. Within six months of using the system, 30 patients have been successfully treated.

"Like a Global Positioning System (GPS) for surgery, the MvIGS system, aided by machine vision technology with real-time positioning and guidance, helps paediatric spinal surgeons perform intricate procedures with greater accuracy and certainty," said Prof Lim.

The technology is advantageous for spinal deformity surgery as it has the ability to quickly and accurately navigate very small, deformed, or even absent anatomy. Doing away with x-rays also elevates the safety of those involved, and eliminates the need for costly lead insulation in the OT.

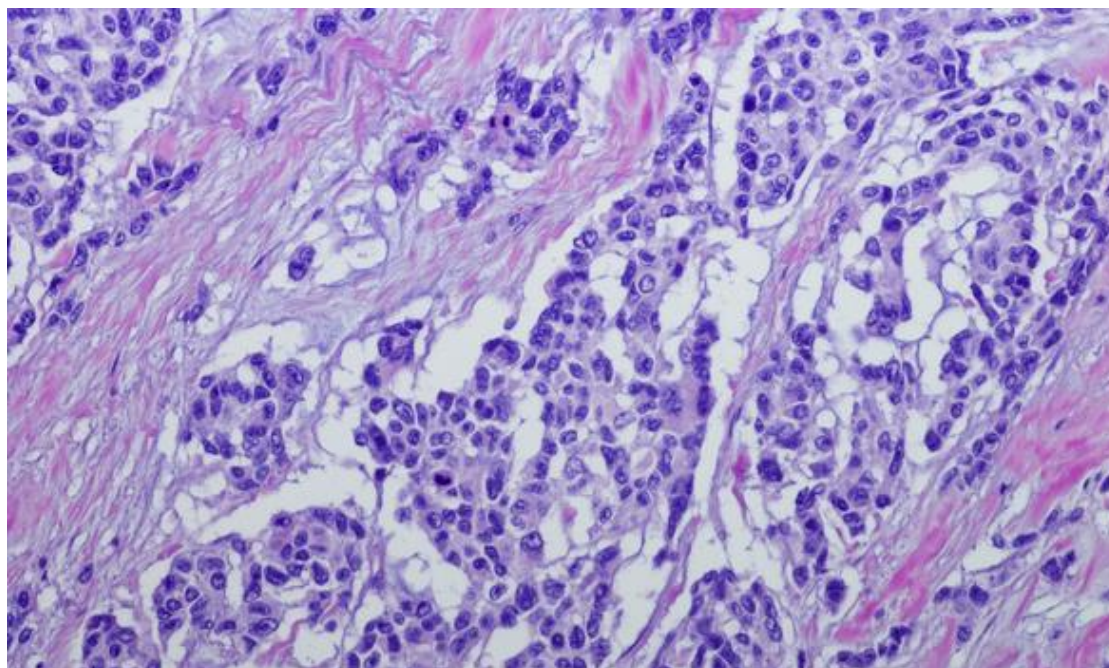
Efficient surgeries

Surgery now takes a shorter time, with reduced blood loss and improved workflow productivity in the OT. Patient spinal identifier registration is a process where a patient's scan images, taken before the operation, are matched with his or her anatomy in the OT. This takes mere seconds, unlike previously where manual imaging had to be done and can take up to 30 minutes.

Read more at: <https://www.sgh.com.sg/news/singapore-health/safer-faster-surgery-for-a-curved-spine>

NEW DEVELOPMENTS

PROVIDING HOLISTIC CARE FOR ADVANCED AND RARE TUMOURS



The Department of Sarcoma, Peritoneal and Rare Tumours (SPRinT) at the National Cancer Centre Singapore (NCCS) specialises in the management of sarcomas, peritoneal disease, gastrointestinal and advanced intra-abdominal malignancies, and skin cancers.

ABOUT THE DEPARTMENT OF SPRinT

The Department of SPRinT was formed in November 2019 to focus on the treatment and research of rare cancers. The team comprises surgical oncologists, who work closely with medical oncologists and specialists from various subspecialties, to provide individualised and holistic care for patients.

Besides clinical care, the Department of SPRinT is committed in collaborative research, clinical trials and translational laboratory research. The SPRinT team co-founded the Asian Peritoneal Surface Malignancy Group (APSMG) and hosts the annual Peritoneal Surface Malignancy Course in Singapore.

In addition, the team is active in curriculum planning and clinical teaching for students at the Duke-NUS Medical School and Yong Loo Lin School of Medicine. They also contribute to the teaching and training of surgical residents.

SHARED CARE WITH GPs

Due to the rarity and heterogeneity of sarcomas, peritoneal diseases, gastrointestinal and advanced intraabdominal malignancies, and skin cancers, the SPRinT team works closely with healthcare providers in the community to centralise care for these potentially complex cases. Patients will be seen by a multidisciplinary team of specialists at NCCS who are well-versed in the diseases.

Based on assessment by the general practitioner, cases with the following features may be referred to the Department of SPRinT for further review:

Suspicious lumps that are increasing in size, are painful or more than 5 cm in size.

Skin lesions that are rapidly growing in size and/or are bleeding.

Unusual symptoms suggestive of abdominal malignancy such as rapid loss of weight, loss of appetite, abdominal distension or change in bowel habits.

Read more at: <https://www.sgh.com.sg/news/defining-med/providing-holistic-care-for-advanced-and-rare-tumours>

NEW DEVELOPMENTS

AN INFUSION OF CARE FOR PATIENTS WITH HIGH BLOOD PRESSURE IN THE LUNGS

Pulmonary Arterial Hypertension is a rare and challenging condition, but there are ways to effectively manage it. The clinicians at the National Heart Centre Singapore are specially trained to offer a comprehensive array of treatment options, making it a centre of excellence for South East Asia.

For patients with Pulmonary Arterial Hypertension (PAH), daily medications and lifelong treatment have become the reality of their lives. One form of treatment is a continuous intravenous (IV) infusion. It may be a better way to manage their condition, but it comes with its own set of challenges. With strong support from their healthcare team and caregivers, patients can see improvement in their symptoms.

Supporting IV Therapy

PAH is a condition where the smallest arteries in the lungs are narrowed, causing an increase in blood pressure in the lungs. This chronic condition can weaken the heart muscles over time and lead to premature death. Between the two main treatments of oral medication and IV therapy, the latter is proven to have better outcomes in suitable patients.

Assoc Prof Jonathan Yap, a Consultant at the Department of Cardiology, National Heart Centre Singapore (NHCS) said, “The use of IV epoprostenol for the treatment of PAH has one of the strongest base of evidence for improvement of symptoms and survival. However, it is a practical challenge for patients to manage and live with a continuous IV



A multi-disciplinary team is key in providing timely care for patients with PAH (L-R): Senior Staff Nurse Sumathy D/O Perumal, Nurse Clinician Aidila Bte Ismail, Assoc Prof Jonathan Yap, Assoc Prof Lim Soo Teik, Assoc Prof Tan Ju Le and Senior Staff Nurse Lim Chee Lan.

infusion 24 hours a day, for seven days a week.”

PAH affects approximately 200 patients in Singapore. Currently, NHCS has a dedicated healthcare team treating patients with various forms of pulmonary hypertension and is the only local centre to offer IV therapy for PAH patients. Although IV therapy has more promising outcomes, it is not an easy journey for patients who opt for it.

Nurse Clinician Aidila Binte Ismail, who specialises in IV therapy for PAH patients, said, “Months of planning, counselling and teaching need to take place before the patient embarks on this journey. It requires lifelong commitment, not just from the patients but also their caregivers, who have to step in to help if patients are unable to administer the treatment at times.”

Ms Aidila went for training in London to learn about IV therapy from the healthcare team and PAH patients, and she is the only trained local nurse handling IV therapy. Besides teaching patients how to self-manage the treatment, she has to provide the needed support and reassurance to help them overcome any hurdles.

“A lot of times, I have to convince patients and their family the benefits of this treatment, and help them manage their fear of handling the equipment and drugs. Some patients may also need help to seek financial support from medical social service,” she explained.

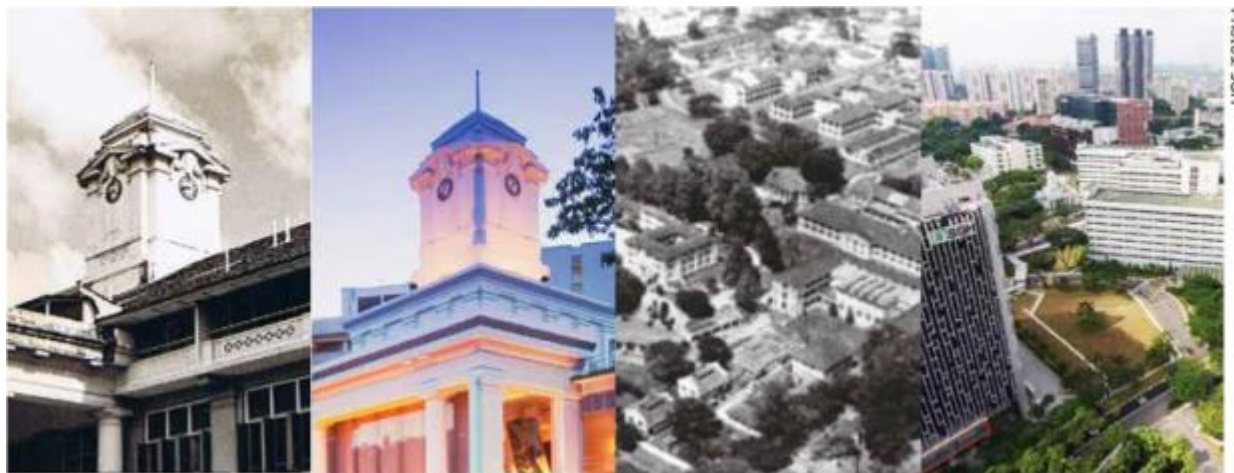
Apart from the healthcare team, NHCS also runs a patient support group to link up patients and their caregivers with others on the treatment. This helps to put their minds at ease and boost their confidence in managing the journey.

Read more at: <https://www.singhealth.com.sg/news/tomorrows-medicine/an-infusion-of-care-for-patients-with-high-blood-pressure-in-the-lungs>

NEW DEVELOPMENTS

200 GLORIOUS YEARS!

Singapore's flagship hospital celebrates her 200th birthday amidst further regeneration and renewal of SGH Campus.



(from left) Bowyer Block in the 1960s and today; SGH Campus in 1940s and today.

The Singapore General Hospital (SGH) that is known today is a far cry from its beginnings in 1821. Formed shortly after Sir Stamford Raffles landed on Singapore soil, that first hospital was largely for the military, with sections for European soldiers, sepoys (Indian soldiers serving under the Europeans) and poor locals.

Sited around the Bras Basah and Stamford Road areas, the hospital was rebuilt and moved several times before eventually settling down in the Outram area. The SGH that started to bear some resemblance to the present complex can be traced to 1926, when three large building blocks were erected.

When the hospital, including its Upper, Middle and Lower Blocks, opened, 500 of the 800 beds were already occupied. It took in trainee doctors, the first batch of whom included Dr Benjamin Henry Sheares and Professor Edward S Monteiro. Dr Sheares, who was to become Singapore's second President, joined the government service after his final examinations in 1929. In pre-independent Singapore, non-British doctors were appointed as Assistant Medical Officers at a starting salary of \$250 per month, versus double that for their British counterparts.

The three buildings were later renamed Bowyer, Stanley and Norris, after Dr John Herbert Bowyer, Dr Cuthbert Stanley and Dr Victor Norris — doctors who perished during World War II. Norris and Stanley Blocks were demolished in the 1970s and only part of Bowyer Block remains. The two-storey block, built in the neoclassical style, features a distinctive clock tower and was gazetted as a national monument on 11 November 2009.

On 31 March 2000, following a major reorganisation of the public sector healthcare services, SGH came under the management of Singapore Health Services. SingHealth now includes four hospitals, five national specialty centres and eight polyclinics.

Today, new and larger buildings on SGH Campus are being built to accommodate a growing population that includes a rapidly ageing segment. On 5 February 2016, Prime Minister Lee Hsien Loong unveiled the SGH Campus Master Plan to redevelop the 43-hectare campus into three interconnected zones for patient care, research and education.

The Master Plan will be implemented in two key phases over the next two decades, including relocating SGH closer to MRT stations. By 2026, the Campus will house a new Elective Care Centre and National Dental Centre Singapore; National Cancer Centre Singapore, and a new Emergency Medicine Building. Other institutions on SGH Campus, including Outram Community Hospital, Duke-NUS Medical School, Academia, and National Heart Centre Singapore, were completed in the past decade.

Read more at: <https://www.sgh.com.sg/news/singapore-health/200-glorious-years>

NEW DEVELOPMENTS

A GIFT OF HOPE FOR ASIAN WOMEN WITH BREAST CANCER



SINGAPORE - More than for any other sector, Covid-19 has been a trial by fire for the healthcare industry.

Determined to help other breast cancer patients, a family made a generous gift to SGH to set up the Kathy Goh Professorship in Pathology in her memory.

“How can we help the next generation of women to find targeted treatment, so that having breast diseases such as triple negative breast cancer will no longer be a death sentence?”

That was the motivation that prompted the family of the late Mrs Kathy Goh to set up the Kathy Goh Professorship in Pathology Academic Clinical Programme (ACP), in memory of Mrs Goh who passed away in 2018 from the disease. The family founded Meiban Group Pte Ltd, a homegrown plastics and electronics manufacturer.

“There were so many young girls!, Mum would say, of her fellow patients at chemotherapy sessions. It was very heart wrenching for her,” said her daughter Ms Carol, CEO of Meiban Group.

This is the first named Professorship for Pathology in SGH and is an endowed fund which will support long term research in breast diseases.

In her search for treatment options, Mrs Goh was introduced to the research work of the Division of Pathology in SGH, to use biomarkers to predict the biological behaviour of breast cancer, which can lead to more targeted treatment and improve the survival rates for patients in Singapore and Asia.

“When mum was first diagnosed, the cancer was at Stage 1. We were of course worried, but thought she would be fine after surgery to remove the tumour. But a few months later, the cancer spread to her lymph nodes and she had to go for radiation therapy. It was only then that we found out she had triple negative breast cancer, which had no cure. It was like receiving a death sentence,” recalled Ms Carol.

The family started seeking alternative opinions, especially treatment options that would also take into consideration Mrs Goh’s strong desire to maintain quality of life. That was when they got to know of SGH Pathology’s work on breast diseases in the Asian population.

At SGH Pathology, the research on breast cancer aims to identify biomarkers that can predict and prognosticate the disease, as well as stratify treatment options. In the field of triple negative breast cancer, the team focuses on how the tumour immune micro-environment can influence disease progression and response to therapy. SGH has a large tissue archive of breast cancers which enables researchers to investigate and compare differences between local patients and those from published studies conducted overseas.

Mrs Goh became interested in the research work that was being carried out by SGH Pathology, and even attended one of its public forums. She went on to support their research work in triple negative breast cancer with a donation.

“We knew that there was little chance of a cure, but we held on to that little bit of hope. It became very important to have options that would help Mum have quality of life. In particular, she wanted to keep her hair, to maintain her self-esteem and dignity,” shared Ms Carol.

“In her final year, as the doses of chemotherapy increased, Mum lost her hair. The cancer spread to her bones, and then her liver. Three years after her first diagnosis, Mum passed away, in September 2018. When Mum passed on, we asked ourselves, what would she have wanted? Mum had a kind and charitable spirit, so we were sure she would want to help others in their cancer journey. That’s when we decided to set up the Professorship, to help other cancer patients,” said Ms Carol.

With the generous gift, the family hopes to boost discovery on breast cancer, the second most common cancer in the world. In Singapore, it is the most common cancer among women, and has been so since 1968 when the Singapore Cancer Registry was formed. “There are many types of cancer, but we want to do more for breast cancer, and for Asian patients in Singapore and Southeast Asia,” Ms Carol explained.

Read more at: <https://www.sgh.com.sg/news/lighternotes/a-gift-of-hope-for-asian-women-with-breast-cancer>

NEW DEVELOPMENTS

MANY HANDS TO GET THE VACCINE TO YOU

With just 3 weeks' notice, SGH brought the COVID-19 vaccine to our staff and kick-started a nationwide vaccination.

From the time it was announced that a first COVID-19 vaccine was approved for use in Singapore, it took just 3 weeks for SGH and SingHealth to launch the start of the nation-wide vaccination on 8 January 2021 by inoculating our Prime Minister and staff. Healthcare workers were among the first to be vaccinated given the exposure to COVID-19 inherent in our work.



Frozen vials of vaccine for the healthcare industry.

Getting the Pfizer-BioNTech COVID-19 vaccine into arms in that short a time was no easy feat. It involved complex logistics and careful and detailed planning of work processes to ensure the safety of all staff being vaccinated. As vaccination was voluntary, staff were provided with the latest information to help them decide whether to receive the vaccine.

Capacity

SGH runs the biggest vaccination operation for staff in SingHealth, catering also to those from the National Dental Centre Singapore, National Neuroscience Institute in SGH, SingHealth Headquarters and the Singapore National Eye Centre. We also take care of staff of our service partners who work on our premises

in areas such as housekeeping, security and IT.

Leading the operation were Senior Consultants Dr Limin Wijaya from Infectious Diseases and Dr Lim John Wah from Occupational & Environmental Medicine, with doctors from their departments.

Nurses were deployed from the Travel Clinic, wards as well as ambulatory areas of SGH to administer the vaccinations. “We deployed 11 nurses, of which one is a Nurse Clinician, for this operation. We started with 6 nurses and had 5 on standby for ramp up, especially when we start vaccinating staff with their 2nd dose as well,” said Deputy Director Nursing, Elena binte Mohamed Ayob.

Completing the team at the Vaccination Centre at Deck on 9 are colleagues from various Divisions who took care of administrative processes, data collation and safe distancing measures, led by the team from Preparedness & Response (PRD).

Read more at: <https://www.sgh.com.sg/news/lighternotes/many-hands-to-get-the-vaccine-to-you>

Source: LighterNotes (SGH)

WEEKLY LUNCHTIME Q+A SESSION

SGH Patient Liaison Services (PLS) department has started the Weekly Lunchtime Q+A Session with GPs in end of February 2021 as part of SGH continuous engagement with GPs. The sessions help to address some of the burning questions pertaining to patient's medical care. Together with the support from SGH Postgraduate Medical Institute, PLS piloted the collaboration with specialists from Department of Orthopedic Surgery and Otorhinolaryngology and will continue to bring in other disciplines to the sessions. We welcome you to join our Q&A session on every Wednesday at 1pm to 2pm.

Please click on the below link (internet access required) for more information on the upcoming sessions and to register & submit your questions:

<https://ihis.zoom.us/j/9876543210>

FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

Dr John N. Hermosisima from Philippines shares his fellowship experience in SGH, Department of Adult Reconstruction.



Dr John N. Hermosisima (2nd from the right) during his fellowship programme with department of Adult Reconstruction.

What was your impression of Singapore's healthcare industry?

I was impressed on how efficient the healthcare system is in Singapore. Singaporeans are very fortunate to have such healthcare system.

Are there any differences compared to the healthcare industry in your country?

Since I graduated in a government institution, there are a lot of differences, like availability of resources, implants, hospital supply and the likes. There is also a significant delay in surgeries in our institution compared to the ones we had in SGH wherein we can operate on the patients immediately.

Why did you choose to apply to Singapore/SGH for your attachment?

I chose to apply my fellowship with SGH as I was influenced by one of my mentors who was also a fellow in SGH. I was fortunate enough to join one of the workshops in SGH and I was impressed with the facilities and the place was just amazing! I was able to talk to some of the previous fellows and they told me nothing but praises about the training and experiences during their attachment.

Did you face any difficulties (e.g. culture, language) during your attachment? What were they?

Yes! I had a hard time expressing myself to patients and colleagues because of the language barrier, especially with my older Chinese patients who doesn't speak English. Good thing, the staff and the other residents were patient enough to interpret some words for me.

During your attachment, what was a 'typical' day like?

My day would start at 7am, and we will have conferences for about an hour. After that, we just get a cup of coffee with my colleagues and start OT at around 8:30am and finish around 5-6pm. We would do 3-4 adult reconstruction cases and I was so amazed on how efficient and effective the OT staff were. And the turnaround time for each operation was fast. After hospital hours, I would hit the gym or train jiu-jitsu at Clarke quay. Before my day ends, I will get dinner and just list some of the key learning points I learned during surgery.

What were your learning experiences?

Inside the hospital, I was able to learn different operative techniques. For hip and knee replacement, I was introduced to the state of the art equipment, wide array of implant available, and treatment options for the patients. But outside those walls, I was exposed to the diversity of the multi-cultural race of Singapore. The people I was going along with my everyday events, their beliefs, traditions and of course the food!

How has the attachment make an impact on you?

I was blessed for the opportunity to be one of the fellows in adult reconstruction, it wasn't an easy process but everything was worth it! It made me realize that there are still so many things I can improve on as an orthopaedic surgeon. During my attachment, I strived to be better everyday, to maximize my learning experience for each day passing. I was thirsty for knowledge and experience in the operating theatre. I took advantage of the limited amount of time I was with the department.

FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

Do you have any interesting/memorable experience during your attachment that you would like to share?



Dr John N. Hermosissima (3rd from the right)

(Photos were taken before the issuance of government advisories on COVID-19)

Everything was coming as expected, the daily routine of conferences, OT's, outpatient consults, until pandemic struck the country! And everything came into a pause. There came into a point where I was about to be sent back to my country because of the fear of the pandemic, but we kept our composure and stayed vigilant. I will always have this feeling that I was not able to maximize my fellowship program, but still I was able to make the most out of it! Hey! Things could've gotten worse!

What did you enjoy most during your attachment?

The camaraderie among the adult reconstruction team the OT nurses and the rest of the SGH healthcare staff! They really made me feel at home during my attachment! My professors, Prof. Yeo Seng Jin and Prof. Chia Shi Lu were very welcoming.

Would you recommend SGH to interested fellows? Why?

Definitely! It's a once in a lifetime experience! The level of competency, learning experience. It would just bring out the best in you!

Photo Credits: John N. Hermosissima

WELCOME!

We welcome our new Alumni Member:

Name	Specialty	Country
Dr Enagala Rajesh	Diagnostic Radiology	India



**TELL US
WHAT YOU WANT!**

We are always looking for ways to improve and engage our alumni members. If you have any suggestions or ideas for newsletter contents or alumni events, know anyone who would like to contribute to the newsletter, please let us know!

Email your suggestions and contributions to alumni@sgh.com.sg

UPCOMING EVENTS

APRIL 2021

10TH

SGH Gastroenterology & Hepatology GPCME

Presented by SGH Department of Gastroenterology & Hepatology

Registration Link: https://ihis.zoom.us/webinar/register/WN_X4148flUS4eakXvynIM0eg

15TH

SGH Renal Medicine GPCME

Presented by SGH Department of Renal Medicine

Registration Link: https://ihis.zoom.us/webinar/register/WN_066pBFfJRMao1B9a2e5tgw

22TH

SGH Vascular Surgery GPCME

Presented by SGH Department of Vascular Surgery

Registration Link: https://ihis.zoom.us/webinar/register/WN_tvHtH2A6T3KTuGZbM0JrFg

28TH

Obstetrics & Gynaecology GPCME

Presented by SGH Department of Obstetrics & Gynaecology

Registration
Opening Soon

MAY 2021

8TH

Respiratory and Critical Care Medicine GPCME

Presented by SGH Respiratory and Critical Care Medicine

Registration
Opening Soon

14TH

SGH Mentoring Lunchtime Webinar Series: Humility: Why it matters in mentoring nurses

Presented by: Learning & Career Development Department

Registration Link: <https://form.gov.sg/5fffb6353c3e1b0011603867>

19TH

Plastic, Reconst & Aesthe Surgery GPCME

Presented by SGH Plastic, Reconstructive & Aesthetic Surgery

Registration
Opening Soon

29TH

ENT - Otology GPCME

Presented by SGH Otorhinolaryngology - Head & Neck Surgery

Registration
Opening Soon

Please refer to our website <https://www.sgh.com.sg/pgmi> for events updates.



SGH — PGMI

***Wishes all Alumni Members
Happy Lunar New Year!***

SGH ALUMNI NEWSLETTER

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the e-newsletter