

SGH Alumni Newsletter

ISSUE 36 | January — March 2022

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SGH PGMI
Postgraduate
Medical Institute

NEW APPOINTMENTS

Key Leadership & Clinical Appointments

Singapore General Hospital



A/Prof Goh Boon Bee George
Director, Clinical Trials and Research Centre
Singapore General Hospital



Dr Geoffrey Sithamparapillai Samuel
Head, Rehabilitation Medicine
Singapore General Hospital



Ms Kala Adaikan
Head, Dietetics
Singapore General Hospital

SingHealth HQ & SingHealth Institutions



Prof Wong Tien Yin
Senior Advisor
SingHealth Board of Advisors



Dr Adrian Ee Guan Liang
Senior Advisor
SingHealth Board of Advisors



Prof Lim Soon Thye
Deputy Group Chief Executive Officer
(Research & Education)
SingHealth



Mr Lawrence Loke Wen Haur
Deputy Group Chief Information Officer
(Acute Care)
SingHealth



Ms Koh Lin Lin
Deputy Group Chief Information Office
(Continuing Care)
SingHealth



Ms Cheah Chew Kuan Kathryn
Chief Communications Officer (Future &
Digital Communications), SingHealth
DGCCO (Marketing Communications),
SingHealth



Ms Wee Mei Ling Jennifer
Chief Communications Officer (Strategy
Communications), SingHealth
DGCCO (Communications), SingHealth
CCO, Singapore General Hospital



Mr Lim Tian Ka Vincent
Chief Communications Officer
(Communications Preparedness & Readiness), SingHealth
CCO, Changi General Hospital



Mr Tan Ewe Kin Melvin
Chief Communications Officer (Capability
& Professional Development), SingHealth
CCO, KK Women's and Children's Hospital



Ms Pang Siew Keng Cecilia
Chief Communications Officer
(Stakeholder Engagement & Stewardship),
SingHealth
CCO, Sengkang General Hospital

NEW APPOINTMENTS

Key Leadership & Clinical Appointments

SingHealth HQ & SingHealth Institutions



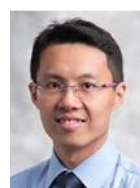
Ms Then Chye Kin Yvonne
Chief Communications Officer (Patient Experience), SingHealth
CCO, National Heart Centre Singapore



Ms Ann Yong
Chief Information Officer, Specialty Centres
SingHealth



Prof Julian Thumboo
Director for the Centre for Population Health Research and Implementation
SingHealth



A/Prof Low Lian Leng
Co-Director for the Centre for Population Health Research and Implementation,
SingHealth Office of Regional Health



Mr Sulaiman Mohamed Arish
Chief Information Officer
Changi General Hospital



A/Prof Melvin Chua Peng Wei
Chairman, Division of Medicine and Inpatient Care
Sengkang General Hospital



A/Prof Aaron Wong Sung Lung
Deputy Medical Director (Cardiac Care Network)
National Heart Centre Singapore



A/Prof Yeo Khung Keong
Deputy Medical Director (Data Science and Innovation)
National Heart Centre Singapore



Prof Aung Tin
Medical Director, SNEC & Academic Chair, EYE ACP
Group Director, Research (Scientific)
SingHealth



Dr David Ng Chee Chin
Chief Executive Officer
SingHealth Polyclinics
Academic Chair
SingHealth Duke-NUS Family Medicine
Academic Clinical Programme



Dr Derek Tse Wan Lung
Deputy Chief Executive Officer
SingHealth Polyclinics



Prof Jodhbir Mehta
Executive Director
Singapore Eye Research Institute
Deputy Medical Director (Research)
Singapore National Eye Centre
Academic Vice Chair (Research)
SingHealth Duke-NUS Ophthalmology and Visual Sciences Academic Clinical Programme

SINGAPORE STUDY SHEDS LIGHT ON ANTIBIOTICS-ASSOCIATED DIARRHEA

A joint study by the Singapore General Hospital (SGH) and Singapore-MIT Alliance for Research and Technology (SMART), MIT's research enterprise in Singapore, may have found the reason why some patients experience diarrhea after taking the antibiotic, amoxicillin-clavulanate, commonly known as Augmentin. It is a widely prescribed antibiotic used to treat many infections including pneumonia and urinary tract infections.



The team of researchers found that the level of gut *Ruminococcaceae*, a family of bacteria that plays an important role in maintaining an individual's gut health, strongly impacts diarrheal outcomes following antibiotic treatment.

"The problem is very real for patients who are unable to take amoxicillin-clavulanate because it gives them diarrhea, even though it is an effective and affordable antibiotic for their infection. Knowing why may help us identify those at risk of antibiotic-associated diarrhea, and devise treatment strategies in the future to minimise or avoid such adverse effects," said Dr Shirin Kalimuddin, Consultant, Department of Infectious Diseases, SGH, and Principal Investigator of the study.

A total of 30 healthy volunteers were recruited for the study. They each received a three-day oral course of amoxicillin-clavulanate. Their stool samples were collected on stipulated days over a period of four weeks and analysed using gene sequencing to look for changes in the gut microbiome during the study period.

Results showed that *Ruminococcaceae* levels in the stools of study volunteers who developed diarrhea were significantly lower when compared to those who did not, both before and during treatment with amoxicillin-clavulanate. This suggests that individuals may, depending on their gut composition, be predisposed to antibiotic-associated diarrhea. The team further devised a simple polymerase chain reaction (PCR) test based on levels of *Faecalibacterium prausnitzii*, a species within the *Ruminococcaceae* family, that could potentially be used in clinical settings to quickly determine an individual's risk of developing diarrhea with amoxicillin-clavulanate treatment.

"People respond differently to medication. Understanding this response and the ability to predict those at risk will help guide the development of point-of-care diagnostics," said Professor Eric J. Alm, Professor of Biological Engineering at MIT, Principal Investigator at SMART Antimicrobial Resistance (AMR) interdisciplinary research group, and co-corresponding author of the study.

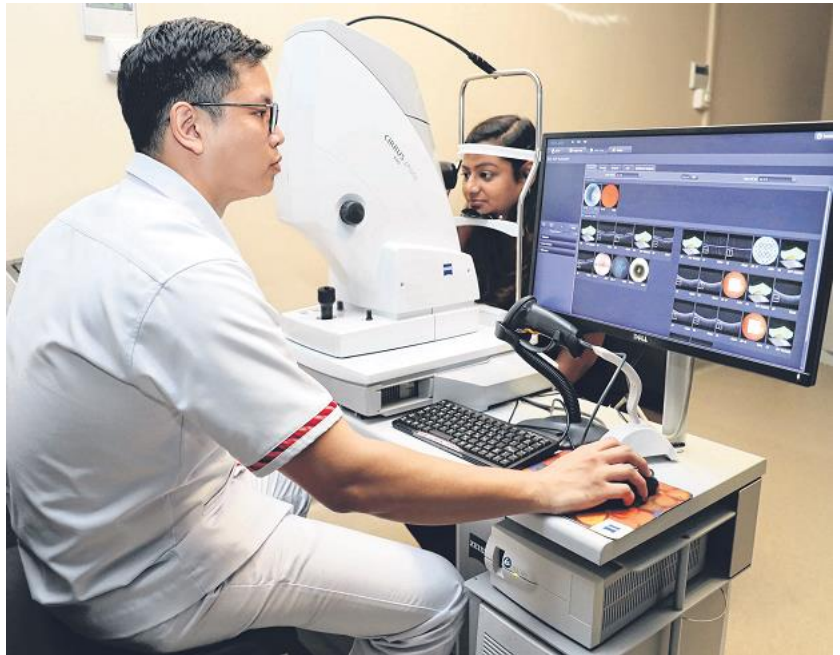
Read more at: <https://www.sgh.com.sg/news/patient-care/singapore-study-sheds-light-on-antibiotics-associated-diarrhea>

NEW DEVELOPMENTS

TRANSFORMING HEALTHCARE WITH ARTIFICIAL INTELLIGENCE

Healthcare in Singapore will get a technological boost through a partnership inked between SingHealth and SGInnovate in November last year. The three-year collaboration will leverage artificial intelligence (AI) as well as other emerging technologies to advance health science innovations and further deep technology adoption in healthcare.

“Globally, AI has penetrated many industries. With Singapore having set its sights on becoming a world-class, technology-driven Smart Nation, this collaboration will accelerate the growth of healthcare in the innovation and technological space,” said Associate Professor Daniel Ting (pictured below), Director, AI Programme, SingHealth. He is also a Consultant in the Surgical Retina Department at Singapore National Eye Centre (SNEC).



The Singapore Eye Lesion Analyser (SELENA+) is an AI-powered image reader used to analyse eye scans and identify signs of diabetic eye diseases.



Prof Ting has been an avid advocate of AI adoption to improve healthcare systems. He has been actively involved in successful healthcare innovation projects, such as the Singapore Eye Lesion Analyser (SELENA+), an AI-powered image reader used to analyse eye scans and identify signs of diabetic eye diseases.

This system was jointly developed by a research team from SNEC’s Singapore Eye Research Institute (SERI) an Singapore’s School of Computing, and alleviates the manpower needed to tackle diabetes, which is currently the world’s fastest growing chronic disease.

Recognising the need for healthcare to adapt and leverage the benefits of technology, Prof Ting emphasised the urgency for AI adoption. “The digital revolution is upon us. If we do not keep up, as a small nation, we run the risk of being left behind, to the detriment of our future generations,” he said.

Benefits of partnership

In a nutshell, the tie-up between SingHealth and SGInnovate brings together healthcare professionals who have the clinical and research expertise with companies who have the technological proficiency and resources, and eventually with commercial partners who have the business know-how to catalyse the process of translating novel ideas from bench to bedside.

The partnership will focus on three main areas. Firstly, it aims to advance AI thought leadership in healthcare and innovation communities.

Read more at: <https://www.singhealth.com.sg/news/singapore-health/transforming-healthcare-with-artificial-intelligence>

FUSS-FREE CHOLESTEROL TEST



Fasting for a blood test to check your cholesterol levels may soon become a thing of the past.

To determine cholesterol levels, patients typically fast for eight to 12 hours before a blood test. Tests are usually done in the early morning to avoid or minimise causing low blood sugar or dehydration. As SingHealth Polyclinics (SHP) sees more than 100,000 patients with dyslipidemia (cholesterol level that is too high), it is challenging to cater to large numbers of patients in the early morning. The good news is, many patients may no longer need to fast before their tests in the near future.

A study in Denmark found that in a select pool of patients, the cholesterol levels from their tests were similar regardless whether they fasted. Due to the growing number of people with dyslipidemia in Singapore, SHP conducted its own research to evaluate the effects of non-fasting cholesterol tests on Asians.

A paradigm shift

The study compared the fasting and non-fasting cholesterol levels of 470 patients with high cholesterol and type 2 diabetes who were on statins, a class of cholesterol-reducing drugs. It showed little difference in the total cholesterol, high-density lipoprotein (HDL) and low-density lipoprotein (LDL) levels between the non-fasting and fasting results, though there was a slight increase in the triglycerides component for most of the non-fasting tests.

Read more at: <https://www.sgh.com.sg/news/singapore-health/fuss-free-cholesterol-test>

EVENTS OVERVIEW

OFFICIAL OPENING OF SINGHEALTH TOWER AND OUTRAM COMMUNITY HOSPITAL

Minister for Health, Mr Ong Ye Kung, officially opened the SingHealth Tower and Outram Community Hospital (OCH) today. Located on the Singapore General Hospital (SGH) Campus with SGH and SingHealth's national specialty centres, the building houses the Campus' first community hospital, as well as administrative offices, and key operational and support facilities that facilitate the delivery of care. It has been progressively operational since the last quarter of 2019.

OCH, which is managed by SingHealth Community Hospitals, enables patients who require rehabilitative, sub-acute or palliative care to be seamlessly transferred from an acute care setting to the next step of their recovery journey.



Photo Credit CLAP

The building houses a Campus Logistics Hub which supports the day-to-day operations of all SingHealth institutions on SGH Campus, as well as other supporting facilities and services such as a central kitchen, Environmental Services, and a Sterile Supplies Unit. Several outpatient clinics are also located there, such as the SGH Rehabilitation Centre, Orthopaedic Sports & Joint Centre and Sleep Centre. Part of the SingHealth HQ sits in the administrative wing of the building along with SGH and OCH staff, bringing the SingHealth family closer together under one roof.

The SingHealth Tower and OCH building is part of the Phase 1 redevelopment of the 20-year SGH Campus Masterplan, and a key pillar in SingHealth's commitment to delivering a seamless continuum of care to patients and meeting our population's healthcare needs.

"At SingHealth, we have the capabilities to look after the most complex conditions, integrate care for patients as they move from one setting to the next, and journey with them every step of the way. Our community hospitals play a crucial role in this, as they help patients transit from an acute care setting to rehabilitate and recover so that they can return home and back to the community. The opening of the SingHealth Tower and Outram Community Hospital heralds the start of a new chapter where we evolve in terms of healthcare infrastructure, keep pace with the way we provide care across the entire continuum, and establish the processes and physical support framework that will enable this transformation," said Prof Ivy Ng, Group CEO, SingHealth.

The building is also one of two winners of the Building and Construction Authority's (BCA) Universal Design Mark Awards 2021, under the highest-tiered Platinum category which recognises the building's remarkable development to incorporate user-friendly features.

Dedicated, seamless and holistic care

OCH, one of three Community Hospitals managed by SingHealth Community Hospitals (SCH), provides continuing inpatient medical care for patients who require a longer period of recovery after receiving treatment at the acute hospital, and inpatient rehabilitation care to help patients reintegrate back home and in the community, as well as palliative care. This continuation of care offers patients an environment well-suited to their needs and focuses on their wellbeing and health goals.

Read more at: <https://www.singhealth.com.sg/news/announcements/official-opening-of-singhealth-tower-and-outram-community-hospital>

EVENTS OVERVIEW

SMS KOH POH KOON LAUNCHES SINGHEALTH DUKE-NUS INSTITUTE OF MEDICAL SIMULATION (SIMS) i3 HUB

SIMS i3 (Inspire, Innovate and Incubate) Hub leverages the latest immersive technologies in serious games to transform training in healthcare.

18 January 2022 – Dr Koh Poh Koon, Senior Minister of State, Ministry of Health & Ministry of Manpower, unveiled the new SingHealth Duke-NUS Institute of Medical Simulation (SIMS) i3 Hub today.

Leveraging Serious Games and Simulation in Healthcare Education

The SIMS i3 Hub is a healthcare simulation training facility which houses a wide array of Extended Reality (XR) solutions and cutting-edge gaming equipment to hone the clinical skills and competencies of healthcare professionals.

Evolution in learner demographics and digital literacy, coupled with the need to facilitate remote and virtual learning amidst the ongoing COVID-19 pandemic, has given fresh relevance to serious games and simulation in healthcare education.

“A key benefit of incorporating serious games in healthcare training is the ability to simulate challenging scenarios for learners to practise critical thinking, decision making and hone practical skills in a safe learning environment. By translating complex topics into immersive stories that draw on the learner’s emotional, cognitive and social motivations, serious games fuel high levels of engagement through immersive game play. This results in prolonged retention of knowledge,” said Professor Chan Choong Meng, Group Chief Education Officer, SingHealth.

Enhancing patient care through inter-professional learning

Through the i3 Hub, SIMS aims to **inspire** collaborations and **innovations** in healthcare simulation by bringing together like-minded healthcare professionals, while fostering the **incubation** of new ideas to enhance patient safety. The name i3 reflects the focus on these three key areas: Inspire, Innovate, Incubate.

The SIMS i3 Hub offers valuable opportunities to advance inter-professional collaborations, across domains and specialties, to foster more cohesive healthcare teams. By partnering healthcare educators from different professions, the SIMS i3 Hub offers the platform to deepen inter-professional learning and maximise the potential of gamification in healthcare training.

“Gamification techniques leverage individuals’ natural inclinations towards mastery, competition and achievement in engaging and interactive ways. With rapid technological advances, the application of serious games across different healthcare settings has also increased exponentially. The games in the SIMS i3 Hub are developed by SingHealth educators who are also experienced healthcare professionals. Each customised game, therefore, incorporates scenarios that are developed from rich personal insights, extensive clinical know-how and deep expertise that aim to expose and immerse learners to real life situations that they may face in the course of their career,” said Professor Fatimah Lateef, SIMS Co-Director (SingHealth).

Read more at: <https://www.singhealth.com.sg/news/academic-medicine/sms-koh-poh-koon-launches-singhealth-duke-nus-institute-of-medical-simulation-sims-i3-hub>

FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

Dr Glen Purnomo from Indonesia shares his fellowship experience in SGH, Department of Orthopaedic Surgery, Adult Reconstruction

My name is Glen Purnomo. I am an orthopedic and traumatology specialist from St. Vincentius a Paulo Catholic Hospital in Surabaya, Indonesia. From February to August 2021, I underwent hands-on clinical fellowship training in Adult Reconstruction (AR) at the Department of Orthopaedic Surgery under the direct supervision of Prof. Yeo Seng Jin. I am very grateful to be able to learn directly from one of the world's renowned arthroplasty surgeons.

I chose SGH as my training ground in AR because of the advice of my consultants during my residency training at Philippine Orthopedic Center, Dr Edsel Arandia and Dr Joel Baron. They also did fellowship training at SGH. Based on their experience, I learned that SGH has a very high volume of arthroplasty cases and provides hands-on training that allows clinical fellows to not only assist, but also perform surgeries. As in my view being an operator during surgery is very different from just observing and assisting, I decided to apply for this training programme.

Another reason is that Singapore is the closest developed country to Indonesia. When I applied for this fellowship few years ago, I thought that I could easily fly back and forth between Surabaya and Singapore on a long weekend or that my family could easily visit me in Singapore during the fellowship period. Turns out, I went to Singapore during the Covid-19 pandemic and had to stay in Singapore for 6 months. I even had to serve 14 days of Stay Home Notice (SHN) when I was in Singapore. I would like to thank Ms. Cynthia Tan from SGH Post-graduate Medical Institute for helping me very well not only in the administration of my fellowship but also in all matters related to my SHN.

Typically, my day would start with a conference at 7.00 am. After that, I go to operating theatre (OT) or clinic,

depending on my schedule that day. Most of the time, I spend my time in OT. I could participate in 4-5 cases per day on average. On certain days, there are evening operations that I could also participate in. Joining surgeries is what I enjoy most during this attachment as I can always pick up some new things I wasn't aware of before, even in the same type of procedure. That's why I always offer myself to take part in the evening and Saturday surgeries. Fortunately, I also had the opportunity to join several consultants from other services and learn many things from them. On Saturday, after participating in some surgeries in the morning, I went to Academia Library to do my research projects.

As part of a holistic fellowship program, I also see patients in the clinic. At Prof Yeo's private clinic, I learned how to explain to patients, perform a proper physical examination, prescribe treatment, select good candidates for surgery, and examine imaging for pre-operative or follow-up patients. Then, I could apply what I had learnt when I run subsidized clinics. These clinics are usually run by fellows, medical officers, or residents. Prof Yeo also kept an eye on us when we ran this clinic. Whenever I came across an interesting case while I was at the clinic,



Dr Glen Purnomo (2nd from right) with Prof Yeo Seng Jin (2nd from left) and colleagues in SGH MOT

FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

(continued from previous page)

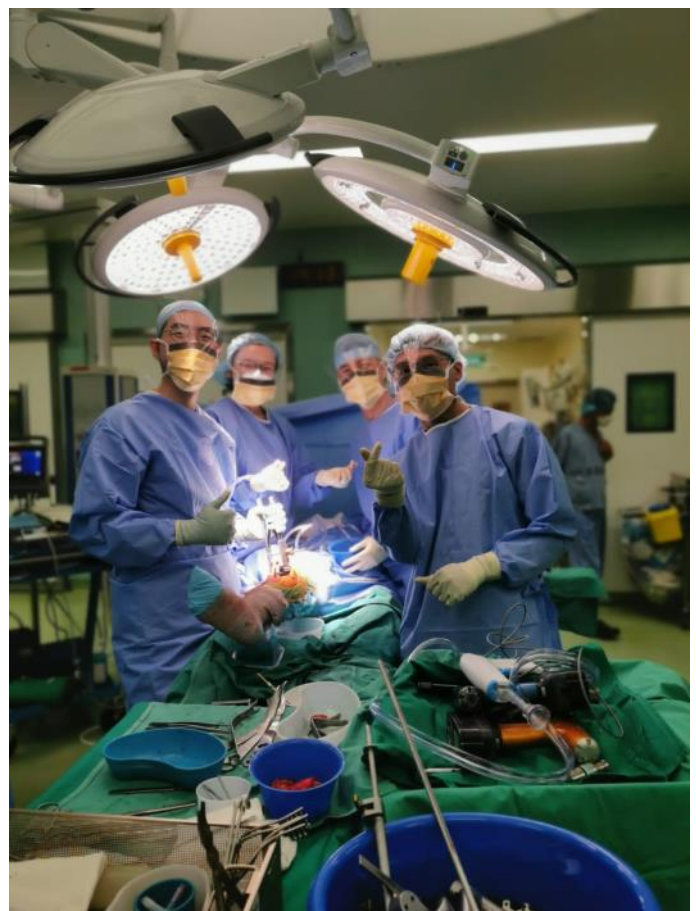
I could immediately discuss it with my supervisor.

I had some memorable experiences during my fellowship. The most memorable moments were the first time I did total knee arthroplasty (TKA), unicondylar knee arthroplasty (UKA), and total hip arthroplasty (THA) under the guidance of Prof Yeo Seng Jin and when I did my first direct anterior approach (DAA) THA under the guidance of A/Prof Pang Hee Nee. I remember very well how patient they were in guiding me back then. I also vividly remember when A/Prof Chia Shi Lu, Dr Lincoln Liow, Dr Jerry Chen, Dr Jason Lim, and Dr Lee Kong Hwee let me do their cases for the first time. All of them gave me valuable tips and tricks in performing each specific step of a certain procedure. It was a privilege and truly an unforgettable experience.

For sure, the AR clinical fellowship at SGH was an effective experience for me as I learnt various procedures during the fellowship. There are really a lot of cases in SGH. I was amazed that there are about 1,800 TKA performed every year at this hospital. Through this training and with the help of all AR consultants, I gained confidence in performing AR procedures such as cruciate-retaining TKA, UKA, DAA THA, and some arthroscopic procedures. This attachment helped me understand AR to a deeper level as I learnt not only surgery but also perioperative measures and management for early recovery. Under the enhanced recovery program, patients can go home within 23 hours of surgery instead of an average four-day hospital stay. I also learnt how to use several different types and brands of implants since I was given the opportunity by Prof Yeo Seng Jin to choose which implant I would like to use for my case. Hence, I highly recommend the clinical fellowship program at SGH. During my attachment, I also faced some difficulties. Difficulties do not come from the new culture and environment, but from the language barrier.

Although most of the patients speak English, it is sometimes difficult to communicate with some elderly patients who can only speak Chinese. Thankfully, my colleagues, hospital staff, or the patient's family will translate the conversation for me. Living away from my family in another country was not much of a problem for me as I had previously undergone residency training in the Philippines and fellowship training in Germany. My supervisor, Prof Yeo Seng Jin, along with other consultants and Medical Officers in the AR team took great care of me during my stay in Singapore. They help me adapt quickly to my job and environment.

I am very impressed with Singapore's healthcare system. Singapore offers state-of-the-art technology and facilities with a well-organized healthcare delivery system. During my fellowship, I could see the most advanced healthcare service that is considered one of the best in the world.



Dr Glen Purnomo (on the left) during his fellowship programme with Department Orthopaedic Surgery

FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

(continued from previous page)

The availability of various internationally used arthroplasty implants, including a wide selection of revision implants as well as robotic and navigation assisted devices combined with the ability to pay for them makes for an excellent standard of care for patients. In addition to international service quality standards and advanced technology, government regulations and strategies play a very important role in the health sector. I noticed that the healthcare system in Singapore emphasizes a shared responsibility, a co-payment system, between the government and people where patients can use their money in their compulsory saving accounts to offset the costs of various treatments partially covered by government subsidies depending on the ward class the patient chooses.

In contrast, the introduction of a universal health program called JKN or BPJS only started in Indonesia in 2014. This program is actually one of the largest in the world, covering over 200 million people. The implementation of this program has resulted in increased access to health. However, not all Indonesians pay premiums regularly. Many of them register only at times of illness and then after recovering, stop paying premiums. Another problem is that there is no co-payment system. The government guarantees that those registered with the BPJS program do not have to incur additional costs when seeking treatment while the payment packages given to hospitals are considered low. This causes the quality of health services provided cannot be optimal because hospitals must save costs so as not to lose money. In addition, there are not many types of arthroplasty implants available in Indonesia, especially revision implants. This may be due to high import and customs fees coupled with the inability to afford the implants so that they are considered not profitable by distributors. I really hope that there will be a breakthrough in government policies that support the health sector so that one day Indonesia will have a

good health system and infrastructure like Singapore that can also encourage well-off Indonesian people to seek treatment within the country rather than abroad.

This fellowship program is very impactful for me. Now, I can confidently carry out all the procedures I was taught and share what I have learned with my colleagues in my home country. I really want to contribute to the development of orthopedics in Indonesia. I am very grateful to all orthopaedic consultants who were kind in teaching and sharing their knowledge with me. I would also like to thank all the hospital staff who have helped me during my training. I will always cherish the memories of my clinical fellowship at SGH.

Photo Credits: Dr Glen Purnomo

For information on SGH Fellowship and clinical attachment programmes, please visit our website:

https://www.sgh.com.sg/pgmi/fellowship_attachments

UPCOMING EVENTS

April 2022

02ND What You Need To Know About Inflammatory Bowel Disease - Public Forum

Presented by Department of Gastroenterology & Hepatology, SGH

Registration Link: <https://ihis.zoom.us/webinar/register/2016468963317/>

13TH SGH Lunchtime Q+A with GPs

Presented by Dr Kenny Tan, Department of Orthopaedic Surgery, SGH

Dr Mark Cheah, Department of Gastroenterology & Hepatology, SGH

25TH GPCME Webinar: SingHealth Duke-NUS Cell Therapy Centre*

27TH SGH Lunchtime Q+A with GPs

Presented by Dr Lin Xufeng, Department of Pain Medicine, SGH

Prof Tan Hiang Khoon, A/Prof Gerald Tay, A/Prof Rena Dharmawan &

Dr Szymon Mikulski, Department of Head & Neck Surgery, SGH

May 2022

11TH SGH Lunchtime Q+A with GPs

Presented by Dr Eugene Lim, Department of Upper GI & Bariatric Surgery, SGH

Dr Tan York Kiat, Department of Rheumatology & Immunology, SGH

20TH GPCME Webinar: Andrology*

25TH SGH Lunchtime Q+A with GPs

Presented by Dr Julie Liana Bte Hamzah, Department of Breast Surgery, SGH

Dr Suresh Ramachandran, Department of Endocrinology, SGH

June 2022

08TH SGH Lunchtime Q+A with GPs

Presented by Dr Chan Jing Jing & Dr Gayathri Devi Nadarajan, Department of Emergency Medicine, SGH

Dr Aaron Tong Kian Ti, Department of Nuclear Medicine, SGH

22ND SGH Lunchtime Q+A with GPs

Presented by Dr Joella Ang, Department of Obstetrics & Gynaecology, SGH

A/Prof Lee Shu Yen, Singapore National Eye Centre

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

SGH LUNCHTIME Q+A WITH GPs

Have burning questions pertaining to medical care?

Join our clinicians at the SGH Lunchtime Q+A with GPs that takes place on Wednesday from 1pm to 2pm. Each session, we have our specialists from 1-2 disciplines online to take your questions live.

For more information on the upcoming sessions and to register and pre-submit your questions, please click on the below link (internet access required):

<https://ihis.zoom.us/join/tJErfu-trDMjHtQ7m2fzvF0dXdCS6u3hXtnn>



WELCOME!

We welcome our new Alumni Member:

Name	Specialty	Country
Dr Purnomo Glen	Orthopaedic and Traumatology	Indonesia
Dr Safiullah ABM	Gastroenterology	Bangladesh



**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

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6 May 2022

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For more information, scan the QR code or visit

www.singhealthdukenus.com.sg/SDEC2022

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