# SGH Alumni Newsletter

ISSUE 39 | October — December 2022

INSIDE THIS ISSUE

PG 1
AROUND THE CAMPUS

PG 7
FELLOWSHIPS & INTERNATIONAL
COLLABORATIONS



#### **NEW APPOINTMENTS**

#### **Key Leadership & Clinical Appointments**

#### **Singapore General Hospital**



**Dr Cheng Chee Leong** Head, Anatomical Pathology Singapore General Hospital

#### **SingHealth HQ & SingHealth Institutions**



Mr Lee Choon Keat Chief Information Officer (Designate) KK Women's & Children's Hospital



**Ms Caroline Loy** Chief Financial Officer National Neuroscience Institute



**A/Prof Daniel Ting**Chief Data and Digital Officer
Singapore National Eye Centre



Ms Junaidah Binte Abdul Hameed Chief Communications Officer SingHealth Community Hospitals



**Ms Stephanie Yeap** Chief Nurse SingHealth Community Hospitals

#### **AWARDS RECIPIENTS** —

#### **NATIONAL MEDICAL RESEARCH COUNCIL (NMRC) AWARDS**

Our heartiest congratulations to our SGH winners of the National Medical Research Council (NMRC) awards! The national grant would help us to transform patient care through research. The NMRC awards outstanding clinician-scientists and researchers for their achievements and contributions to better healthcare outcomes.



Singapore Translational Research
Investigator Awards (STaR)
Prof Marcus Ong
Senior Consultant, Emergency Medicine
Director, Health Services Research and Biostatistics Unit



Clinician Innovator Awards

Dr Jasmine Ong

Principal Clinical Pharmacist, Pharmacy



Clinician Scientist Awards (CSA)

Dr Lim Tze Peng

Senior Principal Pharmacist Researcher



Clinician Innovator Awards
Dr Tay Hsien Ts'ung
Consultant, Vascular Surgery



Health Promotion, Preventive Health, Population Health and Health Services Research (HPHSR) Clinician Scientist Awards (HSCA) - Investigator Assoc Prof Low Lian Leng Consultant, Family Medicine and Continuing Care

Director, Population Health and Integrated Care Office



Transition Awards (TA)

Dr Oh Choon Chiat

Senior Consultant, Dermatology

Source: SGH Facebook

#### **NEW DEVELOPMENTS** -

#### **BRINGING HOSPITAL CARE TO SGH@HOME**



Just like a hospital ward round, the care team contacts patients (like this sample list shown on a large monitor) to assess their recovery and address their concerns

Some patients requiring inpatient care can now receive it in the comfort and familiarity of their homes.

The SGH@Home pilot service allows eligible patients to recover at home, usually after a surgical procedure. Launched in May 2022, the two -year project aims to enrol 600 patients to receive hospital standard acute care at home.

Patients monitor their own symptoms and vital signs, and report the results to the SGH care team at stipulated intervals via a smart device

app. Their progress is monitored by phone or video consultation. While this service has benefits for patients, not all are eligible to recover at home.

Patients' home environment must be suitable for recovery, and they must have access to smart devices for communicating data with their care team. If they are living alone, patients must be independent, are able to perform basic daily activities and follow instructions, and have minimal fall risks.

Above all, they have to be clinically stable, so those who undergo orthopaedic procedures like hip fractures and do not suffer from other acute conditions are likely to be suitable for home recovery. Those who had a heart attack or stroke, on the other hand, are unlikely to be suitable.

Patients with infections requiring antibiotic therapy are also often eligible, especially if the source and area of their infection is clear, and the patient is responding to treatment. As patients recovering at home will not have nurses to monitor their vital signs like blood pressure, oxygen level and temperature, they must do so themselves. They are given or loaned items such as hypertension monitors, pulse oximeters and thermometers if they do not have them, said Ms Tang Woon Hoe, Manager, PHICO-Integrated Continuing Care Services, SingHealth, and RHS-Office for Integrated Care, SGH.

"Patients need to download the app on their smart devices, which will regularly remind them to monitor their vital signs and to send the clinical team their readings. These will then be auto-calculated onto a dashboard for the team's review," said Ms Tang.

Although they are at home, patients will still have access to medical care round the clock, as the service works with private medical care service providers for out-of-office-hours care.

With close and regular monitoring, the team is usually able to tell when patients start to show signs of deterioration. "For example, if the patient has a fever that does not respond to antibiotics, the blood pressure starts to drift downwards, or the heart rate climbs very high, the team would arrange for transport to send the patient back to SGH," said Dr Tan.

SGH@Home is supported by the Ministry of Health (MOH) under its two-year MOH Office for Healthcare Transformation (MOHT) sandbox programme, which also includes virtual home pilots by the National University Hospital and Yishun Health Medical Home. Data from the programme, expected to end in March 2024, will help MOH decide if this virtual ward pilot should become a mainstream service and be offered to patients widely.

Read more at: <a href="https://www.sgh.com.sg/news/singapore-health/bringing-hospital-care-to-sghhome">https://www.sgh.com.sg/news/singapore-health/bringing-hospital-care-to-sghhome</a>

#### **NO MORE COUNTERS? GO CONTACTLESS!**

With new online technologies, Singapore General Hospital is providing greater convenience to patients visiting its Specialist Outpatient Clinics.

To reduce waiting time and queues at its clinics and pharmacies, Singapore General Hospital (SGH) has made changes to the process for appointments, consultations and medication collection at its Specialist Outpatient Clinics (SOCs).

Patients at selected clinics no longer have to wait to register for their appointments when they arrive for their consultations, or to pay and collect their medications after. Almost all prescriptions will be paperless by the end of 2022. Patients can easily keep track of what they have collected and the balance amount of medications via their mobile apps — SingHealth's Health Buddy or the national HealthHub.

The aim is to enhance a patient's journey to the SOC to be as contactless as possible to reduce the potential risk of infections.



For the less tech-savvy, SGH staff and Infocomm Media Development Authority officers will be onsite to help. The Patient Financial Services' 24-hour self-service lobby at Block 4 is also available for bill payment and other online services.

Self-service kiosks for bill payment, similar to registration machines, will be set up around SGH in the coming months, to enable greater payment flexibility following feedback from patients.

#### **SOC APPOINTMENT**

When the SGH call centre staff receive a referral or appointment request, they will call the patient within two working days to arrange an appointment, and send an SMS or Push Notification (PN) for Health Buddy users to confirm the appointment details. They will also send SMS or PN reminders seven days and one day before the appointment. On the appointment day, patients register at the self-service station or pre-register online. For clinics that offer the mobile registration option, patients will receive an SMS or PN to pre-register on the Health Buddy app 90 minutes before the appointment time, as well as real-time updates of the queue situation via their devices.

#### MEDICATION DELIVERY

Instead of waiting at the SGH pharmacy, patients can opt to have their medications delivered on a preferred date, at least three working days after their SOC appointment. The service is free, but there is a fee for urgent or bulky item delivery, or re-delivery if no one is around to receive it. Collection can also be made from PILBOX (Prescription In Locker Box) or selected bluPORT lockers and at selected SingHealth's polyclinics. Medications can also be collected at selected pharmacies at the patient's preferred time, date and outlet.

#### VIDEO CONSULTATIONS

Patients may be offered video consultations. This reduces the number of SOC visits to once or twice a year, with a couple of video consultations in between. Patients only need to visit the hospital to undergo periodic lab tests or radiological scans. To date, video consultation is available at 34 departments in SGH.

Read more at: https://www.sgh.com.sg/news/singapore-health/no-more-counters-go-contactless

#### **NEW DEVELOPMENTS –**

#### **SGH SURGERY STANDARDS RECOGNISED**

Singapore General Hospital is among the world leaders in achieving meritorious outcomes for surgical patient care.



Singapore General Hospital's (SGH) improvements to its surgical quality standards have been recognised by the American College of Surgeons under its renowned National Surgical Quality Improvement Program (ACS NSQIP). This places SGH among the world's top hospitals for surgical treatments and care.

Just 90 out of 706 hospitals worldwide made the 2020 list of meritorious hospitals, after various data, such as the outcomes of inpatient and outpatient surgical procedures, were analysed.

"We wanted to have a methodology that uses robust, actionable data to measure and improve the quality of our patient care. Taking part in the NSQIP is an important way to safeguard the well-being of our patients," said Associate Professor Tan Hiang Khoon, Deputy Chief Executive Officer (Future Health System), SGH, and former Chairman, Division of Surgery and Surgical Oncology, SGH.

The NSQIP uses evidence-based measures developed by surgeons to evaluate clinical data from patients' medical charts 30 days after surgery. The hospitals were assessed and commended based on their composite score in eight clinical areas, including mortality, unplanned intubation and surgical site infection.

Read more at: <a href="https://www.sgh.com.sg/news/singapore-health/sgh-surgery-standards-recognised">https://www.sgh.com.sg/news/singapore-health/sgh-surgery-standards-recognised</a>

#### **NEW DEVELOPMENTS**

#### A STEP FORWARD FOR PAEDIATRIC CANCER PATIENTS

Collaborative effort led to the success of this radiation treatment administered on children for the first time in Singapore.



Ms Kristal Yong (middle) and her mother, Mdm Lim Hwee Ping, with her care team (from left) Clinical Associate Professor Sunny Shen, Clinical Associate Professor Kiatissa Sommat and Associate Professor Joyce Lam.

Both patients had a rare type of cancer (rhabdomyosarcoma) that affects muscle tissue, mostly in children and adolescents, and had their tumours in uncommon, delicate locations. Eleven-month- old Nguyen Hai Dang had embryonal rhabdomyosarcoma of the prostate. The other patient, Kristal Yong, 11, had an orbital rhabdomyosarcoma in the right eye socket.

Conventional treatments, such as surgically removing the tumour and the surrounding tissues, and conventional external beam radiotherapy, were not the patients' and their parents' treatments of choice.

"Surgery would be very invasive and may possibly result in loss of function and affect

the patients' quality of life," said Clinical Assistant Professor Jeffrey Tuan, Head and Senior Consultant, Department of Gastrointestinal, Hepato-Pancreato-Biliary and Urology, Division of Radiation Oncology, National Cancer Centre Singapore (NCCS)

Similarly, conventional external beam radiotherapy, which delivers radiation to the tumour from external sources, comes with its set of trade-offs. "Radiation energy delivered to the tumour scatters into regions beyond, which in these cases contained sensitive and delicate structures of the eye (for Kristal) and urinary tract (for Hai Dang)," explained Dr Enrica Tan, Senior Consultant, Haematology/Oncology Service, Department of Paediatrics, KK Women's and Children's Hospital (KKH)

Eventually, the care team decided to use a radiation treatment known as 'interstitial brachytherapy'. Unlike conventional external beam radiotherapy, interstitial brachytherapy delivers a more targeted and precise dose of radiation into the tumour through delivery devices, such as plastic needles or catheters.

According to Clin Asst Prof Tuan, this treatment results in less radiation dose to the surrounding tissues and potentially fewer side effects in the long term. "Interstitial brachytherapy achieves organ preservation, retains quality of life and reduces the possibility of late radiation effects," he said.

It would be the first time that interstitial brachytherapy on paediatric patients was performed in Singapore, so naturally there were many concerns. One priority, Dr Tan shared, was building rapport with the patients and their parents, and gaining their trust to carry out the treatment.

The planning process was extensive with consultations across the many departments and specialities involved. Various considerations were taken into account, such as the availability of specialised skills, good workflow and standard operating procedures among the teams from Singapore General Hospital (SGH), NCCS and KKH, Clin Asst Prof Tuan said.

SGH and NCCS have jointly performed interstitial brachytherapy in more than 40 adult patients with prostate cancer before, and each patient case was unique and posed various challenges.

Read more at: https://www.singhealth.com.sg/news/singapore-health/a-step-forward-for-paediatric-cancer-patients

#### **EVENTS OVERVIEW**

#### **SGH ANNUAL SCIENTIFIC MEETING 2022**



The two-day Annual Scientific Meeting, titled "Call to Action: Future Proof Healthcare", include presentations and discussions on COVID-19 related topics amongst many others, for healthcare professionals across SGH Campus to learn and foster collaboration that best address the needs of our population. The Guest-of-Honour was Senior Minister of State for Health, Dr Janil Puthucheary.

Associate Professor Kenneth Mak, Director of Medical Services at the Ministry of Health, outlined key policy shifts that the Singapore healthcare sector will be embarking on as Healthier SG is rolled out to address these challenges in his keynote lecture: "At the cusp of change: Transforming care for better population health and sustainability"

ASM 2022 has also attracted over 220 abstract submissions from SGH and across the Campus for the 15 different award categories.

Source: SGH Facebook

#### FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

# Dr Amber Haseeb from Malaysia shares her fellowship experience in SGH, Department of Orthopaedic Surgery, Foot and Ankle Service

#### What was your impression of Singapore's healthcare industry?

Well integrated system amongst the SingHealth hospitals that makes referrals and patient management seamless. Technologically advanced in several aspects such as robotics, availability of implants, equipments. Overall SGH is giving good support to the patients and things are more accessible. It is a well-developed industry.

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

The healthcare system in Singapore is more efficient and advanced in terms of technology and overall management and integration. Equipment and implants are more readily available. Patient's financial affordability is also superior, making it easier to plan surgeries. SGH has better facilities and right from the pre-operative planning to different types of admissions catering to an array of cases is better developed e.g. same day admissions. The turnover rate of each elective list is faster and efficient. The healthcare industry in Singapore has a better support system for both the medical personnel and patients, making it more harmonious and progressive.

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

Doing a fellowship at Singapore had never been an option simply because of the cost as I would be funding my own training. However due to circumstances created by pandemic most centres had low volume and I genuinely wanted a hands on clinical experience so I could train and confidently set up foot and ankle service at my centre. A friend who was doing fellowship in AR at SGH recommended based on the volume of cases and expertise available. I got in touch with Dr. Nicholas Yeo who is the Director of Foot & Ankle Service at SGH and the rest is history.

#### **FELLOWSHIPS & INTERNATIONAL COLLABORATIONS**

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

Singapore is a diverse society culturally so I did not face much difficulties. It's a country that does not impose its culture and accepts everyone for their backgrounds. Everyone was so helpful and welcoming. Occasionally I did have Mandarin speaking patients who were not fluent in English but the clinic staff and my trainer Dr. Nicholas were readily available to translate. Overall Singapore is an extremely friendly place, both at SGH and outside the hospital. I do have to say the application process was smooth and PGMI staff had been helpful every step of the way.

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

There was daily online departmental teachings from 0700H to 0730H i.e. subspecialty rounds, trauma rounds or morbidity and mortality. My day at work would typically start around 0720-0730H with daily ward rounds followed by



Hands on experience at Foot & Ankle Cadaver Course

either clinic or surgery (OT). Each week of the month had a different schedule panned out over 4-5 weeks depending on the duration of the month. There was always something running during AM and PM, so either AM clinic followed by PM OT or vice versa. There were days where there was full day clinic or full day OT. OT consisted of both major theatre cases and day care local anaesthesia cases depending on days. Apart from this fixed schedule there were evening theatres that usually began after 1700H and Saturday mornings. There were free PM slots once a month which gave time for research work/paper writing. There was time allocated for teaching and case discussions with Dr. Nicholas during clinics and OTs. He was always encouraging questions and discussions. I am an early riser so my day begins at 0500H, which I utilised to read up on the cases planned. During my free times in between at work I would also go through the radiographs and case notes for the surgeries planned. On top of all this, I was lucky to have a trainer that understood my passion and need to workout therefore, I managed to train CrossFit ever so often.



Dr Amber (middle) and the Foot & Ankle team completed a 10K charity run for SGH.

#### What were your learning experiences?

I have learnt how to manage and run my own foot and ankle unit. My aim is to take this knowledge and set up a good foot and ankle service at my institution. I have also learnt a lot of new surgical skills e.g. minimally invasive surgeries around the foot and ankle region, complex foot deformities and neglected chronic injuries. I would have to say I did learn communication skills by just observing Dr. Nicholas. He is extremely compassionate and understanding towards his patients. His level of dedication is commendable. I did get a better insight on registry data collection, which will be an invaluable

experience for my own practice. Post operative wound care, rehabilitation and patient compliance are crucial for a good outcome especially for my area of subspecialty. It requires a little more dedication compared to other Orthopaedic subspecialties.

#### FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

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Dr Amber with supervisor, Dr Nicholas Yeo (in white, wearing tie), at the end of her fellowship training.

# How has the attachment made an impact on you?

The attachment has made me a more matured surgeon overall. It has given me the confidence to try out new surgical techniques. My trainer, Dr. Nicholas Yeo has inculcated in me to always strive to get better, learn new skills and keep evolving. His favourite quote is, "Never do the same thing for 10 years" but working with him I have noticed he constantly improves eve-

ry week, which is inspiring. I feel I have learnt a better approach to evaluating foot and ankle patients, deducing the main pathology and offering an appropriate management at the right time. Foot and ankle pathologies can be complex, therefore the timing of surgery makes a difference. Dr. Nicholas always says, "For certain cases and pathologies the patient has to have earned the surgery". A good surgeon is one who knows when not to operate. Doing research and translating it into publications is a crucial trait that every surgeon should have. It is not just a way of immortalising your work but it makes you a world renowned surgeon as well as aids your practice. I have encountered several patients who have better confidence in well published surgeons. Showcasing your hard work into papers is very rewarding and becomes a tool for others to learn from too.

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

It would be difficult for me to put a finger on just one experience because every day was interesting and there was something new to learn. I would have to say it was quite enlightening to see minimally invasive surgery for severe, complex hallux valgus deformities, reconstruction of the fibula for a patient that wished to be active in sports and restoration of the ankle joint for a chronic, neglected ankle fracture. The team and people around me have just made this whole experience memorable. It's humbling to have so many patients that were grateful. This training and Singapore has given me so much more than I could have ever imagined. The friends I have made on this journey are invaluable and I am filled with gratitude to have been given this opportunity.

#### What did you enjoy most during your attachment?

The learning experience has been amazing and invaluable in more ways than one. The aspect I enjoyed was a balanced work-life experience. My trainer is a very conscientious person but he also advocates a good outside work life to strike a balance and maintain sanity. I was very appreciative of all the team building activities and outings. When you are surrounded by good people everything becomes enjoyable.

#### Would you recommend SGH to interested fellows? Why?

Yes, without a doubt. The Orthopaedic department at SGH is well established with skilled Consultants. They have the expertise and patient load required for proper training. Overall, for me it has been an intriguing experience. Going through my logbook, I can confidently say that we covered every aspect of orthopaedics pertaining to foot and ankle; ranging from acute trauma, infection, chronic neglected injuries, deformities, degenerative, inflammatory and benign tumors. Fellowship at SGH is definitely worth the experience.

#### How would you describe your fellowship experience in 3 words?

Memorable, educational, enjoyable!

# UPCOMING EVENTS

### **January 2023**

**05TH** 

**GPCME Webinar: Current Diagnostic and Treatment Strategies for Liver** 

Cancer

Presented by Clin Asst Prof Lee Jie Xin Joycelyn & Clin Asst Prof Tan Ek Khoon Division of Surgery & Surgical Oncology & Division of Medical Oncology

**SGH & NCCS** 

**11TH** 

**SGH Lunchtime Q+A with GPs** 

Presented by Dr Swee Du Soon, Department of Endocrinology, SGH

Dr Apoorva Gogna & Dr Sivanathan Chandramohan, Department of Vascular

**Intervention, SGH** 

**18TH** 

**GPCME Webinar: Updates in Viral Hepatitis** 

Presented by Dr Rajneesh Kumar & Dr Liou Wei Lun,

Department of Gastroenterology and Hepatology, SGH

February 2023

**08TH** 

SGH Lunchtime Q+A with GPs

Presented by Dr Shaun Loh, Department Otorhinolaryngology- Head and Neck Surgery, SGH
Dr Eugene Lim Kee Wee, Department of Upper Gastrointestinal & Bariatric

Surgery, SGH

**16TH** 

GPCME Webinar: Nasopharyngeal Carcinoma - Screening and Diagnosis

Presented by Dr Kimberley Kiong and Dr Isabelle Jang,

Department Otorhinolaryngology- Head and Neck Surgery, SGH

**21ST** 

**GPCME Webinar: Approach to Neck Lumps!** 

Presented by Dr Cheong May Anne, Department of Hematology, SGH

Dr Natascha Ekawati Putri, Consultant, Department of Head & Neck Surgery,

SGH/NCCS

**March 2023** 

**02ND** 

GPCME Webinar: Current Advances In The Management of Pancre-

atic Cancer

Presented by Dr Koh Ye Xin & Dr Lee Suat Ying

Division of Surgery & Surgical Oncology & Division of Medical Oncology

SGH & NCCS

**08TH** 

**SGH Lunchtime Q+A with GPs** 

Presented by Dr Khor Shao Nan, Department of Colorectal Surgery, SGH

Dr Liew Ian Tatt, Department of Renal Medicine, SGH

**24TH** 

**GPCME Webinar: Urology\*** 

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# UPCOMING EVENTS

**April 2023** 

**12TH** 

**SGH Lunchtime Q+A with GPs** 

Presented by Dr Chong Chew Wei, Department of Hand & Reconstructive Microsurgery, SGH Dr Chen Xuanxuan, Department of Pain Medicine, SGH

**19TH** 

**GPCME Webinar: Emergency Medicine\*** 

**26TH** 

**GPCME Webinar: ENT-HNS\*** 

\*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://for.sg/sgh-lunchtime-gp-qna-2023-registration





# 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 <a href="mailto:alumni@sgh.com.sg">alumni@sgh.com.sg</a>



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