

SGH Alumni Newsletter

ISSUE 44 | Jan — Mar 2024

INSIDE THIS ISSUE

PG 2
AWARDS

PG 5
NEW DEVELOPMENTS

PG 10
FELLOWSHIP

PG 12
UPCOMING EVENTS



SGH PGMI
Postgraduate
Medical Institute

This e-newsletter is also available online at:

https://www.sgh.com.sg/pgmi/sgh_alumnus/Pages/SGH-Alumni-e-Newsletters.aspx



NEW APPOINTMENTS

Key Leadership & Clinical Appointments

Singapore General Hospital



A/Prof Ong Hock Soo
Director, Operating Theatres (OT)
Singapore General Hospital



A/Prof Darren Koh Liang Khai
Education Director, SGH Education Office
Singapore General Hospital
Education Director, SGH Campus
SingHealth



Dr Lim Chee Hooi
Clinical Director
Clinical Analytics and Insights (CAI)
Singapore General Hospital



A/Prof Prakash Kumar Manharlal
Head, Neurology, NNI@SGH
Singapore General Hospital



A/Prof Ng Chin Teck
Head, Rheumatology & Immunology
Singapore General Hospital



A/Prof Denny Lie Tjauw Tjoen
Research Enabler Lead, Biomechanics
(Cell & Tissue Engineering)
Singapore General Hospital



A/Prof Javed Iqbal
Research Enabler Lead, Pathology
Singapore General Hospital



Prof Chan Ling Ling
Research Enabler Lead, Radiological Sciences
Singapore General Hospital

SingHealth HQ & SingHealth Institutions



Prof Brian Goh Kim Poh
Director
SingHealth Liver Transplant Programme
SingHealth



Ms Wong Sook Thow
Deputy Group Chief Nurse
(Nursing Transformation)
SingHealth



Ms Christina Lim Poh Ying
Deputy Group Chief Nurse
(Crisis Planning, Nursing Operations and
Nursing Informatics)
SingHealth



Dr Aaron Lee Kwang
Deputy Group Chief Medical Informatics Officer
(Acute Care)
SingHealth



CI Professor Luke Low
DCEO (Clinical Services)
SingHealth Community Hospital



Dr Aw Junjie
CDDO (Chief Data and Digital Officer)
SingHealth Community Hospital

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NEW APPOINTMENTS

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Key Leadership & Clinical Appointments

SingHealth HQ & SingHealth Institutions



Prof Tan Ban Hock
Deputy Group Director
SingHealth Duke-NUS Institute for Patient
Safety and Quality (IPSQ)



Dr Ng Wai May
Director, Nursing (Nursing Quality and Safety)
SingHealth
Co-Director,
SingHealth Duke-NUS Institute for Patient Safety &
Quality (IPSQ) (Clinical)



Dr Diana Chan Xin Hui
Head
SingHealth Duke-NUS Pain Centre



Dr Chua Hong Liang
Head
SingHealth Duke-NUS Pelvic Disorders Centre



Dr Sharifah Zainah Alsagoff
Deputy Chief Executive Officer,
(Clinical Services)
Singapore National Eye Centre



Ms Julia Eng Chui Lee
Director, Nursing (Designate)
National Cancer Centre Singapore

AWARDS

PROF TAN BIEN SOO'S REMARKABLE ACHIEVEMENT!



Join us in celebrating Prof Tan Bien Soo's remarkable achievement! He was honored with the prestigious Gold Medal from the Society of Interventional Radiology (SIR) at their Annual Meeting in Salt Lake City.

Notably, Prof Tan Bien Soo has made history by becoming the first Interventional Radiologist to receive the highest honors from all three major Interventional Radiology societies worldwide. His journey of excellence began with the Distinguished Fellow Award from CIRSE (Cardiovascular and Interventional Radiology Society of Europe) in 2013, followed by the Gold Medal from APSCVIR (Asia Pacific Society of Cardiovascular and Interventional Radiology) in 2022. Now, with the SIR Gold Medal in March 2024, he has achieved an extraordinary 'hat trick' of accolades!

Source: SGH Facebook

SGH CEO SERVICE AWARDS

Big cheers to this year's winners of the SGH CEO Service Awards! Celebrating the cream of the crop among our staff, this prestigious award honors those who set the bar high in service excellence. Drive into the heartwarming surprises and touching testimonials in this special video tribute. <https://for.sg/sghceosvcaward>

Source: SGH Facebook

AWARDS

DISTINGUISHED SENIOR CLINICIAN AWARDS



Associate Professor Loo Chian Min, Senior Consultant, Respiratory & Critical Care Medicine, and Professor Tay Kiang Hiong, Head & Senior Consultant, Vascular & Interventional Radiology, and Professor Tan Hak Koon, Senior Consultant Obstetrics & Gynaecology, have been honoured with the Distinguished Senior Clinician Award, and it's truly well-deserved. This award started by the Ministry of Health, is a nationally recognized symbol of excellence. It celebrates specialists in the public sector who've gone above and beyond in clinical practice, education and research. What an incredible achievement!

Source: SGH Facebook

SINGAPORE HEALTH QUALITY SERVICE AWARDS 2024



Organised by the SingHealth Duke-NUS Academic Medical Centre since 2011, the Singapore Health Quality Service Awards is Singapore's first dedicated platform to honour outstanding healthcare professionals who have delivered quality care and excellent service to patients.

This year's Awards celebrate over 4,400 healthcare professionals and partners from 45 public and private healthcare institutions, community hospitals as well as agencies from the Community Care sector for their indomitable spirit and perseverance despite the challenges they face, and their outstanding contributions to healthcare.

Of the awards presented, there were 2288 awards in the Silver category, 1775 in the Gold category and 359 in the Star category. 16 Superstar awards were also presented to the top winners from the Clinician, Nursing, Allied Health, Administration and Ancillary categories. Six teams who championed innovative and sustainable initiatives that demonstrated impactful results and tangible benefits to patients, staff and the public were recognized with the Best Team Award. The booklet can be found here: <https://for.sg/qualityserviceawardbooklet>

Source: SGH Facebook

AWARDS

DOCTORS AND DENTISTS LONG SERVICE AWARDS 2024



Warmest congratulations to Associate Professor Agnes Tan and Professor Ang Chong Lye for being conferred to the Emeritus Consultant titles in recognition of their remarkable contributions to healthcare! Their unwavering commitment and exceptional service to patients have undeniably left a significant impact. We take great pride in honouring their accomplishments and express our gratitude for their invaluable contributions to healthcare.

Source: SGH Facebook

MASTER ACADEMIC CLINICIAN INDUCTION CEREMONY

We're elated to celebrate the esteemed appointment of our Master Academic Clinicians at Duke-NUS Medical School!

- Prof Hwang Nian Chih, Senior Consultant Anaesthesiology
- Clin Prof Ng Heng Joo, Head and Senior Consultant, Haematology
- Prof Marcus Ong, Senior Consultant, Emergency Medicine
- Assoc Prof Ong Hock Soo, Senior Consultant, Upper Gastrointestinal & Bariatric Surgery & Deputy Chairman (General Surgery Group)
- Prof Tay Kiang Hiong, Head and Senior Consultant, Vascular and Interventional Radiology



These exceptional individuals are not just masters of their craft but also pillars of professionalism and scholarly excellence. As ambassadors and role models, their multifaceted contributions are shaping the future of medicine and significantly impacting lives. Join us in applauding their achievements as they continue to inspire and lead in our quest for medical transformation.

Source: SGH Facebook

WORLD'S BEST HOSPITALS 2024



We're thrilled to share that Singapore General Hospital has been ranked #11 in Newsweek's World's Best Hospital list for 2024! It's our sixth consecutive year among the top ranks, a true testament to our dedication to healthcare excellence. A heartfelt thank you to our team, patients, and community for making this possible!

Source: SGH Facebook

NEW TREATMENT FREEZES CANCER CELLS

When tests showed that his early-stage prostate cancer had begun growing more aggressively, Mr Tan Kok Wee faced the prospect of having the whole gland removed—and possible permanent side effects of urinary and sexual dysfunction as a result.

This was because the cancer, like 40 per cent of men with the disease, was found too near the urethra—within 1 mm—and other vital structures for him to undergo more traditional methods of treatment. However, Mr Tan, in his late 60s, was unable to undergo a treatment known as irreversible electroporation, or IRE, which was recently introduced at Singapore General Hospital (SGH).

“IRE allows us to bring treatment to around and including the urethra area,” said Dr Tay Kae Jack, Senior Consultant, Department of Urology, SGH and National Cancer Centre Singapore (NCCS). “IRE spares all the critical structures around the prostate, such as erectile function nerves, the urine passage, the rectum, and the bladder. These will be preserved without damage.”

Mr Tan was only the third patient to undergo the treatment at SGH. About a month after the procedure, his prostate specific antigen (PSA) level had fallen to 0.11 from 4.1 before surgery. When the PSA, the standard test for prostate cancer, records a reading of more than 4, it is an indication of a high risk of prostate cancer.



Mr Tan Kok Wee and Dr Tan Kae Jack, Senior Consultant, Department of Urology, SGH.

Performed under ultrasound guidance, IRE involves inserting two or more thin probes through the skin between the anus and scrotum to reach the tumour in the prostate. A generator is then connected to the probes, which sends 80 to 90 short electrical pulses to kill the cancer. The electric current causes irreversible pores to form in the cell membrane. These cells will die and be removed from the body via a process called apoptosis, allowing new cells to grow in their place.

The IRE procedure is performed under general anaesthesia and takes around an hour. In most cases, patients are discharged on the same day. As the prostate will swell for a few days after the procedure, patients will be fitted with a catheter to help them urinate.

IRE is a form of therapy that precisely targets small prostate cancers for destruction without damaging surrounding structures that govern sexual and urinary function. It is suitable for treating not just cancers near the urethra, but also selected early-stage prostate cancer patients with a tumour not bigger than 1.5cm.

Being able to offer a wider spectrum of treatments means that SGH is able to customise treatment to the disease, which can be diagnosed at different stages and with cancers of different sizes and locations. Prostate cancer can be treated with surgery to remove the whole gland, radiotherapy, and focal therapy, which uses very high or very low temperatures to kill specific areas of cancerous cells. All these methods, however, risk damaging tissues, nerves and organs around the urethra.

For instance, focal cryotherapy, which freezes the cancer at -40°C , is more suitable for the outer area of the prostate, but up to half of cancers occur in the central area of the prostate, said Dr Tay. “With focal IRE, there is more comprehensive treatment for cancer in all locations within the prostate to provide personalised care for our patients,” he added.

Prostate cancer is the leading cancer among men. According to the latest Singapore Cancer Registry numbers, there were about 7,000 newly diagnosed cases of prostate cancer between 2017 and 2021, up from about 5,000, between 2013 and 2017.

Source: SGH website

JOINT SERVICE BY SGH & NKF ELIMINATES DIALYSIS DISRUPTION

When kidney failure patients' dialysis catheter is blocked, they usually visit hospitals for treatment. This can take three to six days of hospitalisation, with dialysis disrupted as well.

However, a new service by Singapore General Hospital (SGH) and the National Kidney Foundation (NKF) allows patients to have their catheter unblocked at NKF dialysis centres — and to resume dialysis on the same day.

Dr Tan Ru Yu, Senior Consultant, Department of Renal Medicine, SGH, and the project's co-lead, said: "With the right-siting of care, patients can receive treatment for their blocked catheters at the dialysis centre they go to and proceed with dialysis at the centre right after without having to make their way to the hospital. Our partnership with NKF has also enabled SGH to focus on complex cases requiring immediate attention."

The other project co-lead is Associate Professor Jason Choo, Medical Director, NKF, and Senior Consultant, Department of Renal Medicine, SGH.

In Singapore, over 300,000 patients suffer from chronic kidney disease, but another 200,000 cases may be undetected as the patients have not undergone the blood tests needed to confirm that they have a kidney problem. Nationwide, about 8,700 kidney failure patients are on dialysis, with six new patients diagnosed every day.

The kidneys are important organs that remove excess fluids and toxins, control blood pressure, and encourage the production of red blood cells. When the kidneys fail and cannot do their work properly, dialysis can perform the function of removing excess fluids and toxins from the body. Fluid and toxin buildup can lead to death.

In haemodialysis, an access has to be created for the blood to be drawn. Some patients use a central venous catheter inserted into a large vein in the neck, chest, or groin for dialysis to be done. The catheter can become blocked due to the formation of blood clots.

When this occurs, patients are usually referred to hospitals' emergency department. They are then admitted to a ward and administered with thrombolytic agents to break up or dissolve the blood clots. These patients would then need to wait for an available slot for dialysis at the hospital. If dialysis is successful, the patient is discharged the following day, which means an average hospital stay of three days.

If the blood is still not flowing smoothly through the catheter after the procedure, the patient will have to undergo a catheter replacement and dialysis before being discharged. With the waiting times for the various procedures, the patient's hospital stay can be as long as six days.

In addition to delayed haemodialysis and disruption to a patient's routine, a trip to the hospital means additional travel time and hospitalisation costs. For the hospital, such cases add to congestion and care demands at the emergency department. SGH sees about 100 patients yearly for blocked catheters.

The SGH-NKF Catheter Flow Restoration with Lytic Dwell at Community Dialysis Centre project (CLEAR) was launched in December 2022. Since then, SingHealth nephrologists have trained more than 100 NKF nurses to administer the treatment, said Ms Lucy Lu, Senior Nurse Manager, NKF. The doctors training the nurses include Dr Tan, Dr Pang Suh Chien, Senior Consultant, Department of Renal Medicine, SGH, and Dr Charles Ng, Associate Consultant, Renal Medicine Department, Changi General Hospital (CGH).



Since NKF nurses were trained on CLEAR procedures, Mdm Mesum Reswat, 71, has had her dialysis catheter unblocked at Marsiling Dialysis Centre at least twice of having to travel to SGH to have the procedure done. Photo: Vernon Wong.

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NKF, the largest dialysis provider in Singapore, operates 41 centres for some 4,642 patients, or 60 per cent of all haemodialysis patients in Singapore. Of these, more than 700 patients undergo dialysis via a central venous catheter. Before the implementation of CLEAR, some 50 patients were referred to a hospital every month for catheter flow issues.

Patients keen to participate in the project are screened for eligibility based on criteria like risk of bleeding. Patients not on the programme will continue to be referred to emergency departments for catheter blockage.

Other public hospitals — CGH, Alexandra Hospital, Khoo Teck Puat Hospital, National University Hospital, Ng Teng Fong General Hospital, Sengkang General Hospital and Tan Tock Seng Hospital — have joined the service, which is supported by the Ministry of Health.

Source: SGH website

T-CELLS THAT FIGHT CANCERS

A type of white blood cell, gamma delta T-cells (GDT cells), derived from cord blood, may be able to prevent or delay some cancer relapses, early studies by a team of Singapore General Hospital (SGH) researchers have shown. The team also found that a platform they developed was able to generate these cells on a large scale.

The team is looking to put their findings to further test in a phase 1 clinical trial for leukaemia and lymphoma treatments. “We are working closely with the Advanced Cell Therapy and Research Institute (the national cell therapy facility, ACTRIS) to validate and finalise Good Manufacturing Practices workflows,” said Dr Alice Cheung, Junior Principal Investigator, Department of Haematology, SGH, and senior author of the study. The findings of the study were published in a peer-reviewed journal, *Science Advances*, in June 2023, she added.

T-cells are a type of white blood cells that help the body’s immune system fight germs and protect it from disease. GDT-cells, a subtype T-cell useful in cancer immunotherapy, have antiviral and anti-tumour properties that allow them to keep a look out for signs of biological stress, like cancerous or infected cells in the body, and are one of the first lines of defence against disease. GDT-cells can be found in the blood of an adult. However, umbilical cord blood has greater enrichment of specific, more cytotoxic, subsets of GDT-cells, said Dr Cheung.

“Most initial efforts have been focused on exploring the use of GDT-cells in adults as cancer treatment. Unfortunately, response rates in early clinical trials were generally low and treatment efficacies were sub-optimal. This was why we decided to turn our attention to umbilical cord blood instead,” said Dr Cheung.

The team from the Haematology and Molecular Pathology departments used more than 20 clinical grade umbilical cord blood samples from the Singapore Cord Blood Bank to produce and validate the GDT-cells on the platform, she said.

According to Associate Professor Goh Yeow Tee, Senior Consultant, Department of Haematology, SGH, “Umbilical cord blood-derived GDT-cells are akin to young warriors, potentially having longer-lasting effects and being more adaptable to take on additional functions.” However, Assoc Prof Goh, also an author of the study, noted that the cord blood cells “are currently under-utilised, with the main concern that there may not be enough of these T-cells for clinical application, but our study has shown that it is potentially feasible”.

The study found that the cord blood GDT-cells that were manufactured on the platform were “potent cancer killers that were able to target a variety of solid and liquid cancers”, said Dr Cheung. “These cell products are highly versatile, and can be combined with different existing cancer drugs such as small molecule drugs and antibodies to induce much higher cancer cell kill,” she added.

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The platform, which uses the team's proprietary technology, is able to produce massive amounts of various cancer targeting GDT-cells quickly — in under two weeks. The cell products can then be frozen for storage, and thawed when needed for cancer treatment. "Such cost-efficient production of off-the-shelf cancer immunotherapeutic cell products has the potential to deliver effective and affordable cancer treatment to patients in a timely manner," added Dr Cheung.

Source: SGH website

AI MODEL TO SORT EMERGENCY ROOM PATIENTS

A predictive model that can flag patients at risk of death, as well as those who are safe for discharge, has been developed to aid healthcare professionals in sorting emergency department (ED) patients more accurately according to the severity of their conditions.

Currently, assessing and sorting patients is performed by a triage nurse, who will ask about the patient's condition and assess their vital signs before assigning a Patient Acuity Category (PAC) Scale.

PAC 1 is the most severe and requires resuscitation, while PAC 4 is the least severe and often a non-emergency.

But it can be difficult to gauge the risk of death accurately based on the triage nurse's initial assessment, which could also vary depending on the nurse's experience, said Ms Yvonne Wong, lead author of the project and a third-year medical student at Duke-NUS Medical School.

To help tackle this, the team led by Duke-NUS developed an artificial intelligence (AI) model known as PAC+ that uses data from more than 300,000 ED patients from 2016 to 2018 to predict whether a patient is at higher risk of death, based on their vital signs and medical history.

"They may generally look well, but if their risk of death is high based on the AI, then the clinician may reassess – should they actually be triaged to a higher priority level and be seen within a shorter period of time?" Ms Wong said.

PAC+ is one of nearly 220 project abstracts submitted for Singapore General Hospital's (SGH) Annual Scientific Meeting awards in 2024. The two-day meeting held at the SGH Campus will end on April 13.

The PAC+ team hopes that their model can also help identify patients who are suitable for Mobile Inpatient Care at Home (MIC@Home), a programme that provides hospital-level care to patients in their homes.

Senior Minister of State for Health Janil Puthuchery, who was guest of honour at the Annual Scientific Meeting, said the advent of AI presents new opportunities for using digital technology to derive more accurate, efficient and timely treatments.

With initiatives to ensure the safe implementation of AI services in the healthcare industry, such as the development of guidelines in 2021, Dr Janil said it is hoped that AI can be safely adopted to complement the healthcare workforce.

For instance, it could reduce the administrative workload, freeing front-line healthcare workers to focus on face-to-face conversations and develop "stronger therapeutic alliances" with their patients, he said.

In another project, a team led by SGH pharmacists developed a method that can halve the time needed to test which antibiotic works best against a specific kind of bacteria, allowing patients to receive treatment in a more timely fashion.

Currently, it takes at least two days to determine the best antibiotic to use against a bacterial infection – with at least one day needed to culture the bacteria in a patient's blood sample and another or several days to test which antibiotic stops its growth. Click here for full article: <https://for.sg/aimodel>

Source: SGH website

SGH 25TH ANNUAL SCIENTIFIC MEETING 2024

The Singapore General Hospital Annual Scientific Meeting is a biennial event that brings together the 9 institutions in the SGH Campus to showcase the latest developments in the respective disciplines, reflecting the spirit of collaboration and interdisciplinary interactions in SGH and in its partner institutions within the SGH Campus. With invitations extended to all local hospitals, medical centres and institutions in Singapore and around the region.



The highly anticipated Singapore General Hospital Annual Scientific Meeting took place on 12-13 April 2024 (Friday and Saturday) at the SGH Campus. The theme for this year's meeting is 'Thinking Local To Go Global – Creativity in Patient Care, Education and Research'. Through this meeting, the focus on creativity in patient care, education and research will hopefully evolve our local healthcare and research efforts to have significant impact beyond our shores.



(L-R) GCEO, Prof Ng Wai Hoe, Organising Chairperson Dr Khor Li Yan, Guest of Honour Dr Janil Puthucheary, CMB, A/Prof Ruban Poopalalingam, and CEO, Prof Kenneth Kwek.



We are honoured to have Dr Janil Puthucheary, Senior Minister of State, Ministry of Health, to grace the opening ceremony of the 25th SGH Annual Scientific Meeting (ASM). Dr Janil also officiated the launch of the SingHealth Duke-NUS Pain Centre, which aims to integrate care for patients with pain conditions. Through partnership across SingHealth institutions, community partners and primary care providers, the patient care journey is streamlined end-to-end, ultimately improving patients' pain outcomes.



Guest of Honour Dr Janil Puthucheary delivering his speech during the opening ceremony.



The biennial ASM seeks to inspire healthcare professionals to advance our delivery of patient care, and enrich our education and research culture.

Source: SGH Facebook

Dr Saiduzzaman B M from Bangladesh shares his fellowship experience in SGH, Department of Urology.

What was your impression of Singapore's healthcare industry?

My impression of Singapore's healthcare industry is that it is one of the best in the world. The system is known for its high quality, efficiency, and affordability. Here are some of the reasons why I am impressed with Singapore's healthcare industry- Strong Government support, strong focus on preventive care, leading adopter of technology, and well-trained workforce.

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

Firstly, it is very different from our country in many ways. Our government uses free-of-charge systems, so we have limited resources such as a lack of robotic system here in Bangladesh. Because of this limitation, we can only do a portion of what Singapore has. Meanwhile, in Singapore, patients can have optimal health care both in diagnosis and treatment.



Dr Saiduzzaman B M and Prof Foo Keong Tatt.

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

First of all, the Department of Urology at SGH is one of the best Urology Centres in Asia. I have heard the names of legendary urology Professors like Prof. Foo Keong Tatt and Prof. Christopher Cheng. This allows me to have the opportunity to view a wide range of urological diseases and operations. My aim was to have hands-on training experience in robotic surgery. Singapore is also near to my country as it is only a 3.5-hour flight from Bangladesh. These are the reasons why I chose to apply to SGH.

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

One difficulty I had was the fact that there was a language barrier between me and the patients. For example, it was hard to communicate with some elderly patients as they only spoke Chinese which I do not understand. The culture in Singapore is more or less the same in my country with main cuisines such as rice, noodles and many more. I do feel bored and homesick without my family from Bangladesh.

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

My day usually begins at 7am, starting with ward rounds followed by morning sessions such as Medical Officer presentations or pre-post case discussions. Depending on the schedule, I'll either be in the clinic or the operating theatre. After the afternoon exit round, I typically go for a walk or run in nearby parks.

What were your learning experiences?

At SGH, I encountered numerous learning opportunities. I gained proficiency in urological operative techniques such as robotic and laparoscopic surgery. Additionally, I acquired skills in utilising newer technology and devices, as well as navigating an extended healthcare computerised system. An invaluable aspect of my learning experience was interacting with individuals from diverse cultural backgrounds and countries.



Dr Saiduzzaman B M and the rest of his colleagues.

How has the attachment made an impact on you?

The attachment has changed the way I look at adult urological surgeries in a good way. It has opened my mind on new techniques and skills and also inspired me to further my knowledge and continue to upgrade my skills to bring the best possible treatment for my patients in my country and to continuously strive for better patient outcomes and satisfaction.

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



Dr Saiduzzaman B M and Dr Tay Kae Jack , Senior Consultant, Dept of Urology, SGH

My most memorable experience was the day that I assisted a robotic-assisted radical prostatectomy. It was a totally different experience performing the surgery with the new techniques that I learned as well as the adrenaline rush to be using robotic technology. It was just amazing and unforgettable. (Thanks Dr Tay Kae Jack). My training was made even more memorable with the support and guidance from my supervisor and colleagues and also when I won 2nd prize for a video abstract presentation in Urofair'2023.

What did you enjoy most during your attachment?

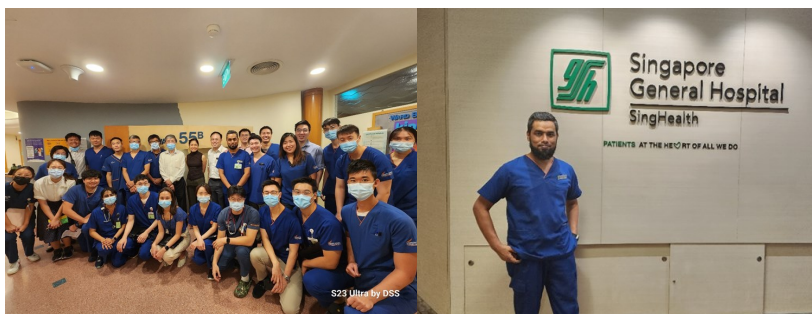
I enjoyed being present and involved in the department and of course, the state-of-the-art equipment that was available to perform the surgeries.

Would you recommend SGH to interested fellows? Why?

100% most definitely yes! SGH is an excellent training centre for fellows with world-class trainers and a well-organized system in place which helped to ease the whole process. The hospitality and the warmth of the staff and support staff also helped to ease my transition.

How would you describe your fellowship experience in 3 words?

Amazing , Memorable, Inspiring.



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

May 2024

2ND

GPCME Webinar: Department of Infectious Disease

Presented by Dr Shirin Kalimuddin, Department of Infectious Disease, SGH
Prof Jenny Low, Department of Infectious Disease, SGH

8TH

SGH Lunchtime Q+A with GPs

Presented by Dr Bryon Teo, Department of Rheumatology & Immunology, SGH
Clin Asst Prof Lee Phong Teck, Department of Cardiology, NHCS

15TH

GPCME Webinar: Obstetrics & Gynaecology

Presented by Dr Joella Ang, Department of Obstetrics & Gynaecology, SGH
Dr Joshua Tan Zhi-En, Division of Medical Oncology, NCCS

Jun 2024

12TH

SGH Lunchtime Q+A with GPs

Presented by Dr Tan Hwee Leong, Department of Hepatopancreatobiliary and Transplant Surgery, SGH
Dr Fong Hui Chai, Department of Plastic, Reconstructive & Aesthetic Surgery, SGH

22ND

GPCME Webinar: Dermatology*

*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-2024-registration>



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Infectious Diseases and Global Health

Understanding the infectious disease landscape to inform practice, policy, and preparedness

The Infectious Diseases and Global Health course takes learners from epidemiology through to policy, preparedness, and response. While engaging with experts in the field, they will be introduced to key transnational and cross border concepts and issues such as One Health, global health security, diagnostics, surveillance and vaccines.

Scenario-based learning

Through simulation exercises, learners will take on roles as scientists, policy-makers, private entities, and various local and regional stakeholders. They will understand how knowledge of infectious diseases lends a hand to designing evidence-based prevention, preparedness, and response strategies.

Learn more through our graduate certificate electives

Registrations open from 13 May - 30 June 2024

Course Number	Course Title	Course Dates
GMS 5152	Infectious Diseases and Global Health	12 - 16 August 2024
GMS 5153	Non-Communicable Diseases: Building Health System Capacity	2 - 6 September 2024
GMS 5155	Planetary Health: From Analysis to Action	23 - 27 September 2024
GMS 5154	Adolescent Health in Asia	11 - 15 November 2024

FOR MORE INFO

To find out more, visit www.duke-nus.edu.sg/sdghi

CONTACT

For enquiries, connect with us at sdghi.education@duke-nus.edu.sg

GRADUATE CERTIFICATE IN
Global Health Practice in Asia

SGH ALUMNI NEWSLETTER

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