SGH Alumni Newsletter

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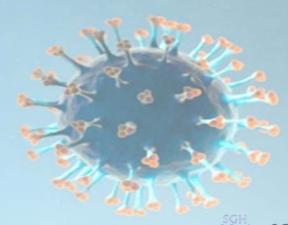
AROUND THE CAMPUS

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UPCOMING EVENTS





NEW APPOINTMENTS

Key & Clinical Leadership Appointments



Professor Hsu Pon Poh Deputy Chairman Medical Board (Surgical Disciplines) Changi General Hospital



Dr Lew EileenChairman
Division of Clinical Support Services
KK Women's & Children's Hospital



Dr Jeremy Tan Tian HuiHead, Department of Upper GI & Bariatric Surgery
Singapore General Hospital



Dr Sonali Ganguly Director, Obesity Centre Singapore General Hospital



Dr Ling Moi LinDirector
Infection Prevention
SingHealth



Dr Goh Min LiongGroup Chief Medical Informatics Officer
(GCMIO)
SingHealth



Dr Gan Wee Hoe Chief Medical Informatics Officer (CMIO) Singapore General Hospital

Nursing Leadership Appointment



Ms Stephanie Teo Swee Hong Director Community Nursing SingHealth Office of Regional Health



The Public Sector Transformation (PST) Awards commends public officers and agencies for excellence in their work and organisational practices. The awards are aimed at encouraging officers and agencies to pursue PST by recognising best practices, as well as desired behaviours and values that undergird their achievements.

Congratulations to our SingHealth winners at the PST Awards – Jan 2020! About the awards:

Dare to Do Award	This award recognises the spirit of risk-taking and perseverance in the public sector. It honours officers or teams that were able to identify new opportunities to do things better, had the courage to take risks, overcame failure and had the perseverance to try and learn iteratively.
Exemplary Service Excellence Award	This award recognises exemplary officers who have consistently demonstrated high standards of service excellence.
Exemplary Innovator Award	This award recognises exemplary officers or teams who have injected innovation in their work, made a real difference to their stakeholders and advocated the spirit of innovation in their teams and agencies.

Follow this link to find out who our winners are!

www.singhealth.com.sg/about-singhealth/newsroom/Pages/Public-Sector-Transformation-Awards-Jan2020.aspx

NEW DEVELOPMENTS

ESTABLISHMENT OF NEW DEPARTMENT OF FUTURE HEALTH SYSTEM

SGH's transformation journey to anticipate and prepare for the changing healthcare needs of our population has already started, with many involved and driving key initiatives.

To oversee the efforts in a coordinated manner and to provide oversight in the overall strategy, the Division of Organisation Planning & Performance (OPP) will be re-organised and a new Department of Future Health System (FHS) had established with effect from 1 January 2020.

This new department will be concurrently helmed by the current Director of OPP and provide the following enablers to drive care delivery transformation:

Innovation & Technology (InT)

InT drives transformational projects with the aim of achieving an efficient and sustainable healthcare ecosystem. With an emphasis of bringing technology to innovate care delivery, the team will establish suitable enablers to support our future patient journeys. These include the use of Internet of Things (IoT), Robotics and Automation, through partnerships and co-development.

Artificial Intelligence & Analytics (AIA)

AIA focuses on bridging our healthcare team with external AI partners – such as technology companies, start-ups and universities – for the purpose of building, validating and deploying AI models in the hospital and community settings. The unit aims to cultivate a vibrant AI ecosystem where projects can flourish and come to fruition. AIA strives to establish the enablers to execute the hospital's AI strategic roadmap.

Future Workforce Development (FWD)

This unit serves to anticipate future workforce needs arising from care re-design and the use of technology. FWD will jointly work with the Human Resource Division to design and implement organization-wide programmes to build future skills and competencies.

RENAMING OF ACADEMIA FACILITIES

In earlier 2019, Ngee Ann Development made a \$40 million gift to support healthcare transformation through Academic Medicine. Two major facilities at Academia have now been renamed in recognition of this gift:



The Discovery Tower, which houses eight research core platforms and state-of-the-art research facilities, is now known as **The Ngee Ann Kongsi Discovery Tower**.



The auditorium on levels 1 and 2 of the Academia has been renamed **The Ngee Ann Kongsi Auditorium**.

NEW DEVELOPMENTS

FORMATION OF THE SGH OBESITY CENTRE AND CLOSURE OF LIFE CENTRE



Photo Credit: SGH Facebook

SGH Obesity Centre is now located at Outram Community Hospital/ SingHealth Tower, our newest building on SGH Campus.

Obesity is a chronic disease and serious public health problem which can lead to metabolic complications, such as Type 2 diabetes mellitus (T2DM), hypertension, obstructive sleep apnoea, cerebrovascular accidents, ischaemic heart disease and depression. Global prevalence of overweight and obesity has risen over the years.

SGH is the first and largest multidisciplinary obesity management service in Singapore, dating back to the 1990s. In the early days, patients were seen by physicians in the Endocrinology clinics and then referred to dietitians and/or physiotherapists on a different day at alternate sites. In 2006, obesity services were consolidated in the Diabetes Centre where patients could have concurrent sessions with an endocrinologist, dietitian and coordinator. In 2008, the Lifestyle Improvement and Fitness Enhancement (LIFE) Centre was opened as a Centre where both obesity and eating disorders services were offered in SGH. Subsequently, with the addition of an endocrinologist trained in lipid disorder and a newly trained bariatric surgeon, the Obesity and Metabolic Unit (OMU) and Bariatric Surgery Service were formed, running out of the LIFE Centre.

With our expertise in the area of obesity management, the OMU has seen a steady increase in its clinical volume and new referrals. It has also become a local and regional training centre, with fellows from Hong Kong, Japan and the Philippines. Active clinical and basic science research work has led to numerous grants and publications. As we strive to be at the forefront of innovative obesity care, it is timely to re-organize the service and to set up an integrated, multidisciplinary obesity centre in SGH for the provision of high quality, evidence-based, affordable and accessible care. This centre will bring together the current OMU, Bariatric Surgery Service, allied health and nursing services, under one roof.

NEW DEVELOPMENTS -

SHORTER STAYS IN HOSPITAL AFTER HIP REPLACEMENT SURGERY

Patients undergoing total hip replacement surgery typically stay in the hospital for a period of 4 to 5 days. But an enhanced recovery programme piloted at SGH last January enabled patients to go home within 23 hours after surgery. We are the only hospital in Singapore to offer same-day discharge for this elective surgery. After the surgery, patients rest in a short-stay ward and, if they do not feel nauseous and can walk after the operation, they will be discharged. They can also opt to rest overnight in the same ward. A proper assessment will be done through the night and they may be discharged by 7am the next morning - all within 23 hours.

30 patients were selected for the pilot programme. They were generally fit, able to perform normal daily activities, and had good family support. Together with their family members or caregivers, they attended a newly introduced Joint Replacement Class where they were given pre-surgery instructions and taught pain management and wound care, diet and nutrition, and rehabilitation exercises from a multidisciplinary team comprising an orthopaedic-trained Advanced Practiced Nurse (APN), Physiotherapist and Occupational Therapist. The class was held on the same day as their pre-operative tests at the Pre-Admission Centre.

About 80 per cent of the patients recruited for the pilot programme were discharged within 23 hours after being reviewed by the care team. Before they returned for follow-up review with the surgeon, home visits by SGH Physiotherapists and Community Nurses were arranged in the first two weeks to assess the patients' recovery progress. Patients were also given a helpline number manned by an APN should the need arise between the visits.

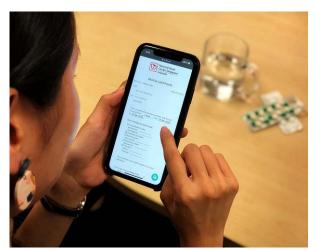
"Same-day discharge after a total hip replacement may sound unbelievable to some patients as they felt they should stay in bed for a few days after a major surgery. We realised the need to help them appreciate the benefits of same-day discharge and to provide a platform to better address their concerns. Hence, the Joint Replacement Class was introduced," said Dr Pang Hee Nee, Consultant, Department of Orthopaedic Surgery, SGH, and programme lead.

Patients are encouraged to get off the bed to walk as soon as the anaesthesia wears off. Doing so lowers their risk of possible post-surgery complications such as blood clots, and patients can go home earlier with a smaller bill. The new programme is made possible by the adoption of a minimally invasive surgical technique which pulls apart the thigh muscles to get to the damaged hip joint, unlike the standard muscle-cutting technique.

An average of 300 patients undergo total hip replacement at SGH each year, and about half of them will be able to benefit from the enhanced recovery programme.

Source: SGH Website

SINGHEALTH GOES PAPERLESS WITH DIGITAL MEDICAL CERTIFICATES



With effect from 31 March 2020, patients visiting hospitals, national specialty centres and polyclinics under SingHealth will receive digital medical certificates (DigiMC) by default, in place of paper medical certificates (MCs). DigiMC, a system that digitalises the issuance and submission of MCs, is a Smart Nation initiative developed by the Government Technology Agency of Singapore (GovTech).

This move comes after a successful DigiMC pilot across all Sing-Health institutions since 1 December 2019, where patients receive digital MCs alongside a hardcopy version. More than 400,000 digital MCs have been issued since the pilot started, with positive feedback from patients and employers. With that, SingHealth and

GovTech are implementing the next phase of the initiative – issuing digital MCs only.

Digital MCs, unlike paper MCs, are less likely to be misplaced, damaged or forged, and are hassle-free for record-keeping purposes. They can also be easily shared among healthcare providers, patients and their employers via an online secure link that will not expire. Patients are encouraged to submit the digital MCs to their employers; should they still require a paper MC, they will be able to request for it within the same day of their clinic visit or hospital discharge at no charge.

EVENTS OVERVIEW –

CELEBRATING SERVICE EXCELLENCE

At the Singapore Health Quality Service Award 2020, SGH bagged 900 awards - 65 Star, 153 Gold & 682 Silver.

Dr Guo Chang Ming, Senior Consultant, Orthopaedic Surgery and Nurse Clinician Ye Li Zhen won the Superstar Clinician and Superstar Nursing respectively. SGH Team Analysis Dialysis also won the Best Team (Merit) Award. All our winners were honoured to receive their awards from our Deputy Prime Minister of Singapore and Minister of Finance, Mr Heng Swee Keat at the award ceremony.



Left to right: Prof Iry Ng, GCEO, Mr Heng Swee Keat, Deputy Prime Minister of Singapore and Minister of Finance, Dr Guo Chang Ming, award winner

Over the past 20 years, Dr Guo has been working on making spinal surgery better and safer. He is a passionate advocate of the minimally invasive lateral approach to spinal surgery. This approach minimises blood loss and post-operative analysesic use, allowing patients to recover faster and be discharged earlier. Besides clinical work, he teaches other surgeons the techniques for minimally invasive lateral surgery.

Dr Guo is also involved in clinical research, often drawing inspiration from unexpected sources such as the shell of a baby crab - it starts off soft and molten but grows into a hard and sturdy shell as an adult - that led him to create injectable bone cement. The bone cement is injected into the human body in a molten state, and hardens when exposed to body temperature.

This innovation has been patented and is being evaluated for further improvements.

"It is important for nurses to step into their patients' shoes and see things from their perspective in order to relieve their anxieties and resolve their issues," said NC Li Zhen.

She brings this philosophy into the SGH Basic Care Assistant (BCA) training programme, which she pioneered in 2016. She tailored her training and communication technique to suit participants from diverse backgrounds; from housewives with no working experience to university graduates.

"I'm proud that my training programme, which combines simulation training and on-the-job training, has groomed 14 batches of competent BCAs who are able to lighten the load of the nurses," she said.



Left to right: Prof Iny Ng, GCEO, Mr Heng Swee Keat, Deputy Prime Minister of Singapore and Minister of Finance, NC Ye Li Zhen, award winner

Best Team Merit Award - Clinical Practice Improvement Project



Team Analysis Dialysis

This is given to projects that improve patient safety and patient care, hence resulting in better clinical outcomes and staff efficiency.

Team Analysis Dialysis consists of colleagues from Surgical ICU, Ward 45 (MICU), Renal Medicine, Speciality Nursing, IPE & DNA.

Analysis Dialysis improved the process of returning blood in CRRT (Continuous Renal Replacement Therapy). For the patient, this helped shorten their procedure time by half, reduce risk of infection and reduce cost. It also lessened the bloodborne exposure risk for our colleagues.

- EVENTS OVERVIEW -

PGMI AFTERNOON TALK

On 20 January, Ms Seah Jing Yi, Senior Exercise Specialist from the National Kidney Foundation (NKF), gave a talk on Health is Wealth. Ms Seah shared the benefits of flexibility, strengthening and cardiovascular fitness and the importance of incorporating these 3 exercise components to our exercise routine for a wholesome workout.



Most attendees would recommend this talk as they felt that it is very informative in promoting a healthy lifestyle and the exercises are simple to follow. Some attendees even feedback that they would like to arrange a similar session for their colleagues who had missed this session!









Photos Credit: Mr Henry Ng

- EVENTS OVERVIEW -

THREE YEAR POST-DISASTER RECOVERY PROGRAMME IN NEPAL



Healthcare teams from SingHealth and Koshi Zonal Hospital with participants of the air crash disaster simulation eversise

A three-year project led by Professor Venkataraman Anantharaman, Senior Consultant, Department of Emergency Medicine, Singapore General Hospital (SGH), in Biratnagar, Nepal came to a successful close with an air crash disaster simulation exercise in October last year. Over 80 government officials as well as medical professionals in Nepal participated in the exercise.

Prof V. Anantharaman said, "The 3-year programme with Temasek Foundation came to a successful close with the disaster simulation exercise in Nepal which focused on testing the disaster response systems and coordination between the various government agencies involved in disaster management, including the

National Health Emergency Operations Centre (Health EOC), Provincial Health EOCs, as well as the hospitals and their cluster command centres."

Importance of Emergency Preparedness Programme In Nepal

Nepal's geographical location makes it prone to both natural and man-made disasters such as earthquakes, floods and aviation accidents. In March 2018, one of the worst aviation disasters hit the country in years. The US-Bangla Airlines Flight 211 crash took 51 lives out of the 71 people onboard. To mitigate the effects and recover quickly from such disasters, it is critical that the government agencies and healthcare workers are equipped with a high level of disaster preparedness.



'Casualties' are triaged at the First Aid Post and sent to appropriate hospitals via ambulances



Project lead Prof Anantha (foreground, in white shirt) speaking with Health Ministry officials and hospital leaders from Biratnagar about the exercise

How Has Singapore Helped?

Funded by Temasek Foundation and jointly developed by the Government of Nepal and SingHealth, the programme has equipped over 700 Nepalese healthcare leaders, doctors, nurses and allied health professionals with the necessary expertise to manage post disaster emergencies till date. This includes ensuring timely response and recovery, as well as developing disaster response systems and protocols to ensure strong governance and preparedness.



Healthcare teams at the Provincial Health Emergency
Operations Centre coordinating the health service response



Photos Credit: SGH Academic Medi

- EVENTS OVERVIEW -

THREE YEAR POST-DISASTER RECOVERY PROGRAMME IN NEPAL

The programme curriculum focuses on key areas such as community first responder training, on-site management of disasters and emergency ambulance system training. Nurses and allied health professionals were trained in trauma management encompassing critical care, orthopaedic, chest and limb physiotherapy, trauma nursing, and post-traumatic stress counselling. Doctors, nurses and allied health professionals from Singapore conducted clinical training in Nepal through three annual trips.



A First Aid Post was set up at the 'disaster site' to triage 'casualties'

Apart from training in Nepal, 20 select participants were brought to Singapore to be trained as master trainers in May 2019. During their week-long visit, they learnt about Singapore's healthcare system and policies as well as SingHealth's governance, organisational structures and workflows in disaster management. They also witnessed a simulated demonstration of how a chemical disaster is managed medically at the Singapore General Hospital.



SingHealth and Temasek Foundation teams with Prime Minister of Nepal, Khadga Prasad Sharma Oli

These master trainers went on to train many other healthcare practitioners back in Nepal, and together with the various training programmes over the past three years, amplified efforts to equip more Nepalese healthcare professionals with the tools to deal with post disaster recovery.

CORONAVIRUS DISEASE OF 2019 (COVID-19)

Covid-19 is the name given by the World Health Organisation (WHO) on 11 February 2020 for the disease caused by the novel coronavirus SARS-CoV2, which started in Wuhan, China in late 2019 and has since spread worldwide.

Since the end of January this year on the development and evolving situation of Covid-19 in China, we have been taking additional heightened measures such as additional screening, management of suspect and confirmed cases, designated wards for Covid-19 management, infection prevention and control practices, extra staff training sessions on the usage of personal protection equipment, visitor policy, movement of staff between healthcare institutions, staff travel advisory and surveillance, staff peer support, handling of preplanned overseas attachments to SGH and many more. We receive updated routine instructions daily since then.

"We worked through the Chinese New Year public holidays to ensure that we are well prepared with resources, manpower and equipment to respond swiftly. I've missed some family gatherings but that's fine. They understand that this is my job and are fully supportive of what I do."

~ Ms Teng Chai Lian, Assistant Director, Nursing, and an avid traveller.



By 30 January, Scientists from Duke-NUS Medical School (Duke-NUS), in close collaboration with clinicians and scientists from SingHealth Duke-NUS Academic Medical Centre, Singapore General Hospital (SGH), National Centre for Infectious Diseases (NCID) and Ministry of Health (MOH), have successfully cultured the coronavirus from an infected patient's clinical sample. This makes Singapore the third country in the world outside China to culture the virus, and the development will certainly aid efforts in diagnosis. This is a ground-breaking research achievement for the country, considering the first Covid-19 case was confirmed only a week ago on 23 January.

The virus, cultured in a Singapore facility, will be used for developing new diagnostic methods, monitoring potential mutation and testing for potential vaccine and drugs.

On 25 February, the MOH announced that Duke-NUS established a link between two Covid-19 clusters in Singapore via serological testing on two cases. Using two different antibody testing platforms (virus neutralisation assay and ELISA assay), the Duke-NUS team proved that these two cases were infected with Covid-19 in late January 2020, as they had very high levels of the virus-specific antibodies in their blood.

CORONAVIRUS DISEASE OF 2019 (COVID-19)

Singapore announced the nation's move to DORSCON (Disease Outbreak Response System Condition) **Orange** on 07 February. That was when additional measures were implemented to keep all of us, including our visitors, safe. These measures may have caused some inconvenience but are definitely necessary (e.g. All staff in clinical and patient-fronting areas are to don surgical masks, all staff are required to take and record their temperatures twice a day and perimeter screening stations with thermal scanners being set up at many of our entrances of our hospital ward buildings.



With the switch from DORSCON Yellow to Orange, our Ministry of Health (MOH) has issued an infographic on precautions that we should take to help contain the spread of Covid-19. Just remember the 5Ms, practise them diligently and stay healthy!

CORONAVIRUS DISEASE OF 2019 (COVID-19)

We are taking the fight to the enemy. Our colleagues play critical roles on various clinical, education and research departments to strengthen our assault.



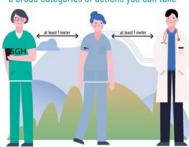


ECMO Simulation Training

For patients who fail to respond to conventional mechanical ventilation support, ECMO (or extracorporeal membrane oxygenation) can be a life-saving option as it takes over the heart and lung functions to allow the underlying disease like infections and injuries to be treated. The patient is connected to the ECMO machine via tubes inserted into his blood vessels. The machine then pumps blood from the patient's body through an artificial lung where oxygen is added and carbon dioxide is extracted before returning the blood into the patient. Patient may be put on ECMO for several days to weeks depending on his medical condition.

As the number of Covid-19 cases increases nationally, we have implemented social distancing measures to keep our patients, our colleagues and everyone safe. These are some of our social distancing guidelines which may be a good reference for your workplace too:

What is SOCIAL DISTANCING? 8 broad categories of actions you can take



Social distancing refers to measures that are taken to increase the physical space between people to slow the spread of the virus.

Social distancing is critical as it:

- · reduces the risk of transmission
- · reduces the number of people who would have to be quarantined should anyone subsequently test positive

Face-to-face communication between

maintain a distance of at least 1 meter.

Telephony or messaging is the preferred

avoid face to face contact.

means of communication between teams to

teams must be minimised. Members must

SMALL TEAMS

We must work in the smallest functional unit. The smaller the team the better.

- · Avoid teams larger than 10 people through the day
- · Consistent teammates throughout
- · Avoid having face-to-face interactions with another team

All staff in patient-fronting areas must wear a surgical mask or the appropriate PPE for the setting they work in. If there are interactions such as meetings or events involving 10 people or more, surgical masks should be worn by all attendees.



HAND HYGIENE

Keeping our hands clean is critical.

We touch many surfaces and our hands can harbour the virus for a long period. Wash your hands with soap and water or perform an alcohol hand rub frequently, and after we touch any surface.





CORONAVIRUS DISEASE OF 2019 (COVID-19)

MEALS

Having meals together make us vulnerable as we tend to talk to one another in close proximity without a mask.

- · Have meals within your team only
- Be seated at least 1 meter apart from each other
- Avoid buffet meals as these increase the social interactions



MEETINGS

- · Minimise face-to-face meetings
- If unavoidable, keep the size of the meetings as small as possible
- If there are more than 10 people attending a meeting, all attendees should don a well-fitted surgical mask
- Use teleconferencing applications such as Zoom and WebEx



SOCIAL ACTIVITIES

The measures we outline above will not be effective unless they are extended into our social lives after work.

- Avoid contact with staff from other teams both during and after working hours
- No physical greetings such as handshakes



LAST, BUT NOT LEAST

Social Distancing is not just for clinical staff in the ED and Isolation Wards.

It is also for all staff regardless of profession or role.

At SGH, it has been all hands on deck since the first Covid-19 patient. At times, it feels overwhelming but we will get there.



FELLOWSHIPS & INTERNATIONAL COLLABORATIONS

Dr S M Rezaul Karim from Bangladesh shares his fellowship experience in SGH, Department of Colorectal Surgery.



Dr Rezaul with colleagues from his training department, having the OT meal.

What were your impressions of Singapore's healthcare industry?

A good number of patients and doctors from Bangladesh visited Singapore to get their treatments and trainings regularly. So I came here with some idea about the advanced treatment facilities of Singapore. But I didn't really know that the overall healthcare system of Singapore is so fantastic!

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

Truly speaking, differences are everywhere! Starting from preventive medicine, screening policy, use of antibiotics, nursing staff, quality and behaviour of healthcare personnel

as well as overall healthcare system. Actually there is no scope of comparing as Singapore is already very developed while we are still trying to do so.

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

As I mentioned, I had some idea about the advanced treatment facilities of Singapore. So I chose Singapore to get exposure to one of the world's best healthcare delivery system. I've chosen SGH specifically as we all know SGH is the world's 3rd best hospital by Newsweek survey. I also came to know that the department of colorectal surgery is quite old, well-established and of course a high-volume centre.

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

Not really, other than the language! Initially I struggled a bit to cope with Singaporean English but it was ok with time. As I don't understand Mandarin, so I really faced difficulty with those patients who speak only Mandarin. Actually I didn't face so much difficulties regarding culture as Singapore is an Asian country and a lot of Bangladeshi people are working here.

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

Typically my day started at 7 o'clock with morning ward round then I will attend clinical session. After that, I will join OT/OPC and finish around 5 o'clock usually. At the end of each



Dr Rezaul sharing his experiences at the Campus Fellow Forum.

day, I like to keep note on what I've done on that day and tried to read something relevant from books before ending the day by chatting with my family.



What were your learning experiences?

Fantastic! I have gained huge experiences regarding overall patient management, participated a good number of colorectal operations, especially MIS, practised regularly in surgical skill lab, participated international surgical conferences, hands-on practice on endoscopy and so much more!

How has the attachment made an impact on you?

I think this one-year clinical attachment made me realise what I would like to achieve in future, a better surgeon and a lifelong learner. This attachment made a great impact on me to do the rational practice in the field of my subject.

Dr S M Rezaul Karim from Bangladesh shares his fellowship experience in SGH, Department of Colorectal Surgery.



Dr Rezaul with colleagues at the 30th Anniversary Dinner of the Department of SGH Colorectal Surgery.

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

Really plenty of memorable events when I was here in Singapore! The best of all was to celebrate 30th anniversary of the department of SGH Colorectal Surgery where I got the opportunity to meet legendary colorectal surgeons of Singapore.

What did you enjoy most during your attachment?

There were a lot of events to enjoy here. I really enjoyed grand ward round on every Thursday and of course attending OT especially all those on laparoscopic procedures and endoscopy. Other than academic, I enjoyed visiting every corner of Singapore.



Photos Credit: Dr S M Rezaul Karim

Would you recommend SGH to interested fellows? Why?

Yes, as SGH is highly-developed, high-volume and one of the world's best hospitals. I definitely recommend SGH to interested international fellows to get training here. I would specially recommend the department of colorectal surgery as it is a well-established department of SGH with full of experienced surgeons. Finally, all the staffs of SGH are cooperative and environment is quite friendly for foreign fellows.

How would you describe your fellowship experience in 3 words?

Excellent! Effective! Fulfilling!



We welcome our new Alumni Member:

NameSpecialtyCountryDr Tan Shu YunFamily MedicineSingapore



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.

FELLOWSHIP

Dr Purvi Haria from India shares her fellowship experience in SGH, Department of Diagnostic Radiology, Breast Imaging

My name is Dr Purvi Haria, I am from Mumbai, India. I was in Singapore for fellowship in breast imaging.

The first thing that impressed me as soon as I came out from the airport in Singapore was the cleanliness and traffic rules. Singapore is a clean country. This was my first overseas learning experience and with my first encounter with Singapore healthcare, I was pleasantly happy that things are so streamlined which makes working more pleasant and effortless.



A collage of Dr. Purvi's fond memories in SGH Photo credit: Dr. Purvi Haria

Even after Covid-19 broke out, everyone got quickly adapted to their new roles and increased responsibilities. Splitting-up and working in two different teams, infection control and daily temperature monitoring for everyone were few of the things to learn and to fight such an infection. Giving a strong fight to this outbreak tells a lot about strength of the healthcare system in Singapore. Things back home are a bit different, as a developing nation with such a high population, there are so many different issues to handle and healthcare is not so advanced in the public sector. In the private sector, there is scope for high end work, but it is not affordable to everyone.

I have always wanted to work in a department which does all advanced imaging and interventional procedures in breast imaging which was why I applied to SGH. The selection process here was very fair and when I applied, I didn't know anyone here. I am glad that I came here. All the consultants were always ready to answer doubts and discuss the clinical cases. These case discussions, monthly meetings and RAD-PATH rounds have helped me a lot. Constant inputs about appreciating tiny details in imaging and correlating with patient's history have helped me to gain more insight.

In the beginning, there were some difficulties in conversing with patients, but as time passed by, the nurses and radiographers are always very helpful and ready to interpret for the patients who could not speak English.

A typical day would start with intervention session in the morning and diagnostic session in the afternoon and each

session would entail case discussion or the consultant sharing their experiences about similar cases in the past. The last six months have definitely been memorable, wonderful and pleasant for me.

Other than learning about breast radiology, I have also seen how systematic and smooth the workflow of the department has been and that has impacted me a lot. I would like to implement some of the best practices back home in order to have a better working environment in the department. I will definitely recommend SGH to anyone who is interested in specializing in breast imaging!

I would like to specially thank Dr Ching, Dr Tammy, Dr Lester and Dr Sim for a wonderful experience in SGH.

Due to the virus outbreak, there were some restrictions about gatherings and large meetings and I regret that I wasn't able to share my experiences personally at the Campus Fellow Forum. ■

In view of the Covid-19 pandemic, all our upcoming events are



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

SGH ALUMNI NEWSLETTER

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Please visit https://www.sqh.com.sg/pqmi/sqh alumnus/Pages/SGH-Alumni-e-Newsletters.aspx for the e-newsletter.



