



Physiotherapy Assessment and Management of Lumbopelvic Disorders

17 - 20 February 2020

Introduction

Patients with lumbopelvic pain form a significant proportion of the musculoskeletal physiotherapy caseload. Most patients can benefit from conservative management. However, treating this diverse and complex group of patients can be challenging.

Course Objectives

At the end of the course, the participants should be able to:

- 1) Differentiate accurately the possible lumbopelvic disorders commonly seen in the outpatient musculoskeletal clinic.
- 2) Plan, prioritize and perform a thorough physical assessment of the lumbopelvic region.
- 3) Formulate and perform an effective and efficient treatment plan including exercise prescription that addresses the impairments of the lumbopelvic region, using an evidence-based approach.
- 4) Appraise the treatment effect using appropriate outcome measures and patient feedback as necessary.

Target Audience

Physiotherapists with **2 - 5** years of working experience in the Musculoskeletal field.

Course Outline

The course will provide participants with the additional skills and knowledge needed to diagnose, classify and treat this group of patients with lumbopelvic disorders at an intermediate level. Participants will gain skills to differentiate and manage lumbopelvic disorders with sound clinical reasoning. The workshop will have a mix of both theoretical and practical work.

Course Details

Date	: 17 - 20 February 2020
Duration	: 4 half-days
Time	: 1.00 pm – 5.30 pm
Venue	: Therapy Skills Training Lab Academia , Level 1 20 College Road, Singapore 169856
Fee	: S\$455 per pax (SingHealth Staff/SPA Member) (incl of S\$505 per pax (Regular) 7% GST) With VCF Funding*: S\$353.50 per pax (Singaporean/PR) S\$429.25 per pax (Work Permit / Employment Pass/ S Pass Holder)

**For NCSS member SSAs and MSF-funded SSAs only.
Should PGAHI's reimbursement with NCSS be unsuccessful, the balance of course fees will be billed to the participant's organisation.*

Teaching Faculty

Speakers will be from Singapore General Hospital:
Department of Physiotherapy

Ms Chang Shin Yin

Senior Physiotherapist

Dr June Quek Mei Tse

Principal Physiotherapist

Mr Tan Wei Ming John

Principal Physiotherapist

Ms Wong Han Yen

Physiotherapist

Department of Diagnostic Radiology

Dr Chan Lai Peng

Senior Consultant

Registration

Miss Agnes Low | agnes.low.s.m@sgh.com.sg

Quick links

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Registration Slip

Physiotherapy Assessment and Management of Lumbopelvic Disorders 17 - 20 February 2020

Submit your registration form to Agnes Low at agnes.low.s.m@sgh.com.sg by **17 January 2020!**

The information provided for course registration is true and accurate to the best of my knowledge. Submission of any false information will render my application void with no refund of registration fee. Submission of my professional certification or qualifications for auditing purpose may be required.

By registering for the course, you agree to the [Terms & Conditions](#) of PGAHI.

Quick links: [FAQs](#), [PGAHI Programmes](#), [Training Calendar and Directory](#)

PARTICIPANT'S PARTICULARS

Name *(to be reflected on cert)*:

Contact no.:

Email:

Profession:

AHP *(please indicate)*: _____ Doctor Nurse Others: _____

Department:

Organisation:

PRN/ MCR/ Nursing no. *(if applicable)*:

Any cancellation or replacement must be conveyed to PGAHI in writing. A cancellation fee of 50% of course fee will be charged if the cancellation is made before **17 January 2020**. There will be no refund of course fee for cancellation on or after **17 January 2020**. PGAHI reserves the right to cancel the course and fully refund the amount of registration fee paid to the participants should unforeseen circumstances necessitate it.

For **cheque payment**, please issue a **crossed cheque** payable to "Singapore General Hospital Pte Ltd" and mail the cheque attention to **Agnes Low, SGH-PGAHI, 20 College Road, Academia, Level 2, Singapore 169856**.

For **invoice to organisation**, please complete the below billing details:

BILLING DETAILS

Bill to:

Billing address:

Attention invoice to *(name & department)*:

Email of addressee:

Contact no. of addressee:

Participant's Employee no. (if any):

I consent to Singapore General Hospital and its related corporations (collectively 'SingHealth'), their agents and SingHealth's authorised service providers collecting, using, disclosing and/or processing my personal data, in order to send me marketing materials, etc.

I confirm and agree that my consents granted herein do not supersede or replace any other consents which I may have previously provided to SingHealth in respect of my personal data, and are additional to any rights which SingHealth may have at law to collect, use or disclose my personal data.

By providing the information set out in this form and submitting the same to you, I confirm that I have read, understood and consent to the SingHealth Data Protection Policy, a copy of which is available at <http://www.singhealth.com.sg/pdpa>. Hard copies are also available on request.