



16th April 2016

Refresher Course

Venue : York Hotel, Carlton Hall, Level 2

Time : 8:30am - 15:30 hrs

2016 Refresher Programme

08:00 – 08:30	Registration
08:30 – 08:35	Opening Address Speaker : A/Prof Ti Lian Kah President , College of Anaesthesiologists, Singapore
08:35 - 09:30	Topic : Dollars and sense and relevance to anaesthesia Speaker : TBA
09:30 – 10:00	Topic : TBA Speaker : A/Prof Ti Lian Kah
10:00 – 10:30	Morning Tea Break
10:30 - 11:00	Topic : Intraoperative Hypotension (IOH), Acute Kidney Injury (AKI) and the Syndrome of Rapid Onset End Stage Renal Disease (SORO-ESRD): The Role of the Anesthesiologist in the Prevention of Hospital Acquired AKI Speaker : Dr Macaulay Onuigbo Nephrologist & Hypertension Specialist, Mayo Clinic Eau Claire, Wisconsin, USA Associate Professor, Mayo Clinic Rochester, Minnesota, USA Health System
11:00 – 11:45	Topic : New insights into the problem of PONV Speaker : TBA
11:45 – 12:30	Lunch
12:30 – 13:30	Annual General Meeting College of Anaesthesiologists, Singapore
13:30 – 14:15	Topic : Sleep and Oblivion Speaker : Dr Edwin Seet Khoo Teck Phuat Hospital
14:15 – 15:00	Topic : Echocardiography for the occasional users Speaker : Dr Shital Shah Singapore General Hospital
15:00 – 15:30	Afternoon Tea Break

End of Programme

Registration Form

Title	
Surname	
First Name	
Designation	
Institution/Organisation	
Email Address	
MCR Number	
Contact Number	
Mailing Address	
Postal Code	
Country	
Contact Number	
Mobile Number	
Fax Number	

Includes Morning Tea, Lunch and Afternoon Tea

Complimentary Registration for FAMs and SSA members.

Non-FAMS and Non-SSA Members are subject to \$100 Registration Fee

Registration closes on 23rd March 2016

Cancellation Policy :

Cancellation received within 14 days of registration may be eligible to receive full refund less \$30 Admin fee. Cancellations received after the stated deadline will not be eligible for refund. Cancellation will be accepted only in writing by email or fax and must be received by the stated cancellation dateline.

Agreement to Terms and Conditions:

I wish to register for the Refresher Course 2016 and acknowledge the registration terms including the cancellation policy.

Signature _____

Date _____

Please return this form and send your cheques to :

College of Anaesthesiologists, Singapore

81 Kim Keat Road , #11-00 NKF Centre,
Singapore 328 836

You can contact **Ms Pearly Gan** at cas@ams.edu.sg or
fax your form to 6593 7880

College of Anaesthesiologists, Singapore
81 Kim Keat Road, #11-00, NKF Centre,
Singapore 328836

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