



**MEDICAL
PROGRESS
INSTITUTE**

Dedicated to Advancing CME

presents

*The Masterclass Skills
Programme 2010*

Join us as we master the skills to manage Paediatric problems in primary care. Helmed by **Distinguished Professor Tan Hock Lim, Associate Professor Dr Bilkis Banu and their team from UKMMC**, the Paediatric Care Workshop brings to you a specially designed and acclaimed Masterclass interactive programme to challenge your daily practice.

Paediatric Care Workshop

Topics include:*

Paediatric Medicine

- The Child with a Murmur
- Associate Professor Dr Bilkis Banu
- Management of Childhood Obesity
- Professor Wu Loo Ling
- Asthma, Eczema and Other Allergies
- Associate Professor Dr Hasniah Abdul Latif
- Update on Vaccinations
(Pneumococcal, Rotavirus, HPV etc)
- Dr Yong Junina Fadzil
- Speech and Learning Problems
- Dr Juriza Ismail

Paediatric Surgery

- Hernias, Undescended Testicles and Hypospadias
- Distinguished Professor Tan Hock Lim
- Modern Burns Management; Management of Birth Marks and Vascular Malformations - Dr Faizal Ali
- Management of Abdominal Pains in Children - Dr Dayang Anita Abdul Aziz & Common ENT Problems

** subject to change*

Date : 4th April 2010
Time: 8.30 am – 5.00 pm
Venue : Armada Hotel, Petaling Jaya

Places are limited to 50 participants. CME points will be awarded.



REGISTRATION FEE

- RM250 per course (includes light breakfast, lunch and tea)**
Please indicate your preference: Vegetarian Non-vegetarian

Payment Details:

- Cheque no. _____ totaling RM _____ payable to **UNITED MEDICA SDN BHD.**
- Credit card Mastercard Visa
- Card no: _____
- Card expiry date: _____
- Cardholder's name: _____
- Cardholder's Signature: _____

An official receipt will be issued along with a letter of confirmation.

Please complete the registration form (original or photocopy) and return it along with payment to **UNITED MEDICA SDN BHD 5/F, Tower 2, Wisma MCIS Zurich, Jalan Barat, 46200 Petaling Jaya, Selangor.** Credit card payments are accepted via fax **03 7958 7853.** For further information, please contact Ms Sarah at **03 7954 2910.**

Personal Details

- Name (Dr/Mr/Mrs/Ms): _____
- IC number (New): _____
- Practice Address: _____
- Mailing Address: _____
- Phone number (Mobile/Home/Office): _____
- Fax number: _____ Email: _____
- Type of practice: GP Specialist Other (Please specify) _____

Terms and conditions:

1. All payments must be made in Malaysian Ringgit.
2. Payment is non-refundable.
3. Registration forms and payments must reach **UNITED MEDICA SDN BHD** by **31st March 2010.**
4. Registration is confirmed upon participants' receipt of confirmation letter issued by **UNITED MEDICA SDN BHD.**
5. Certificate of attendance will be awarded upon completion of the course.

Masterclass Paed 4th April 2010 MT



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