

Guest Faculty

Professor Henri Colt

Director of Bronchoscopy Education Project
Director of Interventional Pulmonology,
University of California, Irvine, USA

Local Faculty

Dr Lee Pyng, Course Director

Associate Professor,
Yong Loo Lin School of Medicine, NUS
Senior Consultant, Respiratory & Critical Care
Medicine, National University Hospital

Dr Khoo Kay Leong

Senior Consultant, Respiratory & Critical Care
Medicine, National University Hospital

Dr Anne Hsu

Senior Consultant, Respiratory & Critical Care
Medicine, Singapore General Hospital

Dr Yap Wee See

Senior Consultant, Respiratory & Critical Care
Medicine, Tan Tock Seng Hospital

Dr Jagdesan Raghuram

Senior Consultant, Respiratory & Critical Care
Medicine, Changi General Hospital

Dr Pek Wee Yang

Senior Consultant, Respiratory & Critical Care
Medicine, Khoo Teck Phuat Hospital

Steps to Structuring Bronchoscopy for Trainers and Trainees



Course Description

Steps to structuring bronchoscopy for the trainers and trainees begin with a one day introductory course on flexible bronchoscopy. The introductory course aims to set a minimum standard for knowledge as well as provides learners with the necessary cognitive, technical, affective, and experiential skills. By participation attendees will improve upon their knowledge, technical and teaching skills in bronchoscopy. The introductory course is followed by a course designed for program directors where standardized bronchoscopy curriculum and training will be presented. Hands-on experiential learning is the highlight of both courses.

Who should attend

Specialists and Trainees in Pulmonary Medicine, Thoracic Surgery, Anesthesiology and Paediatrics. CME points will be awarded.

NUHS Tower Block Level 10, 1E Kent Ridge Road

13 August 2011 Registration 7:30 am – 8:00 am

INTRODUCTORY BRONCHOSCOPY COURSE

8:15-8:30am	Welcome, Introduction and learning objectives
8:30-9:00am	Pretest and survey of practice experience
9:00-9:20am	Patient safety: Prebronchoscopy evaluation
9:20-9:40am	Patient safety: Bronchoscopy in special populations
9:40-10:15am	Preventing and Managing Airway Complications
10:15-10:30am	Coffee Break
10:30-10:45am	Anatomical relationships
10:45-11:15am	Bronchoscopic airway inspection
11:15-11:45am	Evaluation of central airway obstruction
11:45-12 noon	Basic diagnostic procedures (lavage, brushings, biopsy)
12:00-12:30pm	Transbronchial lung biopsy
12:30-1:00pm	Practical approach to Transbronchial needle aspiration
1:00-2:00pm	LUNCH
2:00-4:30pm	HANDS-ON: airway anatomy, EBBX and brushing, TBNA, Emergency bronchoscopic intubation, diagnostic strategies
4:30-4:45pm	Post-course technical skills learning assessment
4:45-5:15pm	Post-course cognitive learning assessment
5:15-5:30pm	Interactive session: True/false exercises
5:30-6:00pm	Wrap up, certificate of course completion
	Hands-on training with models and simulators

7:30pm GALA DINNER

14 August 2011 Registration 7:30 am - 8:00 am

TRAIN THE TRAINERS COURSE

8:00-8:30am	Introduction to Flexible Bronchoscopy Curriculum
8:30-9:30am	Team Delivery of Practical Approach Exercise
9:30-10:00am	Coffee Break
10:00-11:00am	Individual-Interactive Session on Essential Bronchoscopist
11:00-12:30am	HANDS-ON: Bronchoscopy step-by-step, Techniques on airway inspection, brushing, biopsy, TBLB, TBNA
12:30-1:00pm	Feedback
1:00-2:00pm	LUNCH Symposium on "Becoming an effective trainer"
2:00-3:00pm	Interactive session: True/ false exercises
3:00-4:30pm	HANDS-ON: How to use Bronchoscopy Assessment Tools and Checklists
4:30-5:30pm	Program evaluation
	Hands-on training with models and simulators

7:00pm FACULTY DINNER

Course Registration

Full Name _____

Mailing Address _____

Phone () _____ Fax () _____

Email address _____

Profession _____

Organization Affiliation _____

Registration Fee:

- SGD \$350 Introductory Bronchoscopy Course and Gala dinner
- SGD \$250 STS members/ Fellows for Introductory Bronchoscopy course
- SGD \$350 Train the Trainers Course* and Faculty dinner
- SGD \$250 STS members for Train the Trainers Course

*Trainers have to sign up for 2 courses

Form of payment:

Visa

Mastercard

Credit card number _____ - _____ - _____ - _____

Expiry date ____/____/____

Grand Total: S\$ _____

Name as it appears on card _____

Signature _____

Contact us: Tel: (65) 67726533, Fax: (65)68724101, Email:pynglee16@gmail.com

