



# Hong Kong College of Paediatricians NEWSLETTER

## August 1999

Editors: Drs Patricia Ip, Anselm Lee, Betty Young, Yu Chak Man

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## Message from the President

Starting from this month, the College newsletter will be published bimonthly instead of quarterly. Credit must go to the Editorial Board for making this possible. We aim at providing more timely information to our members. Members can of course have access to our College Homepage any time for more updated information on College matters.

In this issue of the newsletter you will find the response of our College to the Harvard Consultancy report on healthcare. Our emphasis is on the role of the College as child advocate, protecting the interests and rights of children. The responsibility to provide preventive and rehabilitative health care services for children should be borne by the Government. We put forth our views on the organization of child health services, professional accountability, quality improvement and professional development. Health care professionals must take up the key responsibility of ensuring health care safety and quality. Thus it is gratifying to note the enthusiastic participation of our Fellows in CME activities. Within 2 years of enrolment into the programme 110 Fellows have already satisfied the requirement of the whole 3-year CME cycle. I hope all the other Fellows will be able to meet the requirements by the end of 3-year cycle, i.e. December 1999. Otherwise they may face sanction from the Hong Kong Academy of Medicine, and the Hong Kong Medical Council, with a possibility of their fellowship and specialist status being removed.

My congratulations go to the 13 Members who passed the Exit Assessment held in June 1999. Since October 1998, all Members undergoing higher training or additional training must undertake and pass the Exit Assessment before they become eligible for the Fellowship of the College. With the experience accumulated in the last two assessment exercises, the Examination Committee has come up with a set of guidelines on exit assessment. All trainees and trainers should familiarize themselves with the guidelines.

Thanks to the generous support of our Fellows, the Hong Kong College of Paediatricians Foundation has received over 1.5 million dollars from the membership drive. It still falls short of our target of 2 million dollars. Membership subscription and donations from Fellows are most welcome.

Our next Annual General Meeting will be held in the Hong Kong Academy of Medicine Building on Saturday 4 December 1999 at 6 p.m. Please mark your diary and reserve the date for this important event. I look forward to seeing you at the AGM and the Annual Dinner on that day.

Dr. LEUNG Nai-kong  
President

## **IMPORTANT**

### **Evidence of Attending Overseas CME Activities Needed**

In line with the Hong Kong Academy of Medicine policy, Fellows are requested to submit evidence of participation of approved CME activities together with the CME Annual Return Form (ARF). This would take effect from January 2000 onwards (i.e. for CME annual return for the year 1999). As the College keeps the records of attendance of locally accredited CME activities, Fellows need only to submit proof of attendance of CME activities overseas.

### **CME Annual Return Form (ARF) for Fellows Admitted During Mid-Year**

Fellows who have been admitted during the middle of the year are reminded to submit their ARF to the College secretary as soon as possible.

### **Mark Your Diary**

College AGM on Saturday, 4th December 1999 at 6:00pm at the Hong Kong Academy of Medicine Building.

# Report of 1998 CME Programme

## Introduction

On the 1st January 1997, the College started to implement our Continuing Medical Education (CME) programme. In accordance with "The Guidelines of Continuing Medical Education", each Fellow, irrespective of his/her place of residence, is required to acquire, in a 3-year cycle, at least

- ◇ a total of 90 CME points, including at least
- ◇ a total of 30 Category A CME points.

In addition, the College has further recommended each Fellow to acquire no less than 20 CME points (including 10 Category A points) annually.

## Overall Performance

- ◇ At the start of the cycle, 285 Fellows had registered to participate in the programme.
- ◇ Up till 30<sup>th</sup> March 1999, a total of 266 Fellows (93.3%) had submitted their Annual Return Forms.
- ◇ Results: 100% of these Fellows had satisfied the minimum requirement (more than 40 CME points in 2 years). Among them, 110 Fellows (42%) had already acquired more than 90 CME points – the requirement of the whole 3-year cycle.

## CME Activities

- ◇ The College, in collaboration with the Hong Kong Paediatric Society and 8 paediatric subspecialty societies, has been organising a variety of educational activities for our Fellows to choose and participate. A total of 152 Category A credit hours of activities were organised in 1998.
- ◇ A total of 90 applications to attend international and overseas meetings were submitted by Fellows. A total of 760 credit points were accredited.
- ◇ A total of 75 applications for accreditation were submitted by educational organisers of the Hong Kong Academy of Medicine and her constituent Colleges. A total of 346 credit points were allocated.
- ◇ Selected educational activities in recognised public institutions were open to all Fellows (including those in private sector). A total of 817 credit hours of activities were accredited.
- ◇ Three study groups (two local and one overseas) were formed by Fellows in the private practice. A total of 49 credit points of activities were organised.
- ◇ Many Fellows had published their activities in various journals and books, but very few of them applied for accreditation because all of them were flooded with CME points. In addition, a total of 42 Fellows had participated in self-study

programmes and were allocated appropriate points.

## Annual Random Review of CME Records

The CME subcommittee had requested 5% of the Fellows to submit their CME records for perusal and review. All submitted records were found to comply with the College CME Guidelines.

## Summary

- ◇ The overall performance of our Fellows in 1998 is excellent – 100% of Fellows who had submitted their return forms had achieved beyond the baseline requirement.
- ◇ This year we have provided a record high of more than 2000 credit hours of activities to our Fellows.

So far, our CME programme is running smoothly under the supervision of the Education Committee and the CME Subcommittee. We have full confidence that most Fellows could achieve the targets at the end of the 3-year cycle.

# Report of the First Pediatric Advanced Life Support Course

The first Pediatric Advanced Life Support course was successfully held on 2-6 June, 1999. It was organized jointly by the College and the Heart Institute for Children, Hope Children's Hospital, Illinois, USA. The course was conducted according to the PALS program jointly developed by the American Heart Association and American Academy of Pediatrics. The objectives of the course were to provide participants with information needed to recognize infants and children at risk of cardiopulmonary arrest, to acquire knowledge to resuscitate, and stabilize infants and children with severe trauma, shock, respiratory failure, or cardiopulmonary arrest.

Dr. Alfred HuYoung, who is one of the original national faculties starting the initial PALS courses in USA, was invited to be the course director. The faculty also included 4 experienced paediatric cardiologists and intensivists from USA and our college, namely Drs. Phillip Ow, Anthony Chang, Maurice Leung and KL Cheung. Eight local instructors were also invited to assist in teaching at skill stations in the second provider course.

The format of the course is very interactive. Besides lectures delivered by faculty members, there were skill stations covering basic life support, bag-valve-mask ventilation, advanced airway management and vascular access and teaching

stations covering newborn resuscitation, respiratory failure, shock, cardiopulmonary arrest and rhythm disturbance.

The response to the course was overwhelmingly good that we were forced to turn down some applications. A total of 119 participants (67 doctors and 52 nurses) took the 2 provider courses, and 17 took the instructor course. All participants enjoyed the experience sharing and hand-on practice in various skill stations. Feedback from course participants on the course evaluation was very positive. A letter has been received from a Fellow to the College President giving his personal views and recommendations on the PALS course (enclosed). All participants passed the required cognitive test and were awarded certificates. A press conference was also held on 2 June to publicize the course and there was good press coverage in two leading Chinese newspapers.

It is the intention of our College to run such courses in the future. The aim is to provide knowledge and practical training for all child workers to recognize and resuscitate sick infants and children. The next course will tentatively be held in **April 2000**. Look out for further information.

## Response to the ‘Harvard Report’

The release of the Harvard Report on ‘Improving Hong Kong’s Health Care System: Why and For Whom?’ has created a lot of interest and concern among the public and in particular, the medical profession. The report has put a lot of emphasis on options to improve financial sustainability of the health care system in Hong Kong, instead of addressing the more important issues of improving equity, quality and efficiency of the health care delivery system. The Report also has not addressed issues relating to children who have no income and cannot insure for themselves. Hence, the College, acting as child advocate, has submitted our views on the report, to ensure that quality health service must be provided to children in need. Please refer to [appendix 1](#) for the full text.

## Examinations

### Application and Guidelines for Exit Assessment

The next Exit Assessment of the College will be held in December 1999. Deadline for application will be on 15 October 1999. Application forms are available from the Secretary of the College at Tel 28718871 or Fax 27851850. Please see [appendix 2](#) for detailed requirements and guidelines for assessment.

## Congratulations!

The following members have passed the Exit Assessment in June 1999:

Dr Chan Hoi Shan, Sophelia	Dr Chan Siu Man
Dr Chan Tsz Wang, Louis	Dr Ho Vincent
Dr Hui Henry	Dr Lau Shing Chi
Dr Lee Kwok Wai	Dr Lee Tsz Leung
Dr Leung Chung Yin	Dr Leung Ting Fan
Dr Wong Ming Sum	Dr Yau Ping Wah
Dr Yiu Wai Lim	

## Membership News

### Useful Links on the College Homepage

The College Homepage (<http://www.medicine.org.hk/hkcpaed/>) has been updated with a new column of Useful Links. Here members can surf at their fingertips to resourceful websites providing useful clinical information from neonatal to adolescent medicine and covering basic matters such as immunizations and use of anti-pyretics to sophisticated issues like treating the HIV infected child. Links to other important professional bodies like Hong Kong Academy of Medicine, Department of Health, Royal College of Paediatrics and Child Health and American Academy of Pediatrics are also available.

## Working Group on Clinical Practice Guidelines

A working group has now been formed under the Professional and General Affairs Committee to look into the feasibility of setting up clinical practice guidelines for more uniform practice and evidence-based medicine. Members of the group consist of Dr. Barbara Lam, Dr. Roxy Lo, Dr. Tony Nelson, Professor Louis Low, Dr. Alfred Tam and Dr Betty Young. Anyone who wish to contribute your expertise in this area, please call Dr. Betty Young at Tel 25956409, Fax 29045371 or drop her an e-mail at [bwyyoung@ha.org.hk](mailto:bwyyoung@ha.org.hk).

## The College Foundation

The Executive Committee of the College Foundation wishes to thank the following Fellows for so amiably contributing to the Foundation:

Dr Cheng Chun Fai  
Dr Chiu Cheung Shing  
Dr Stephen Leung Wing Chiu  
Dr Albert Kong Yim Fai  
Dr Leung Nai Kong  
Dr Tsao Yen Chow  
Dr Joseph Y.S. Pang  
Dr Vincent Chau  
Dr Sin Wai Kee  
Dr Huen Kwai Fun

Dr Leo Chan  
 Dr Daniel D.Y. Lau  
 Dr Alan Ng Kwan Wai  
 Dr Edwin Yu Chau Leung  
 Dr Patricia Ip  
 Dr Chiu Man Chun  
 Dr George Hwang Shui Woo  
 Dr Jane Chang Kan  
 Dr Jennifer W.L. Yu  
 Dr Wong Yat Kwong  
 Dr Natalie Lee Ngar Yee  
 Dr Anita Li Ming Chun  
 Dr Ha Shau Yin  
 Dr Chan Kwok Chiu  
 Dr Chan Chi Sik  
 Dr Helen Tinsley  
 Dr Tong Tak Cheung  
 Dr John Lee Yiu Kan  
 Dr Simon Wong Kam Kee  
 Dr Osmond Kwok Tze Leung  
 Dr Robert Tseng Ying Mei  
 Dr Barbara Lam Cheung Cheung  
 Dr Victor Ho Sai Fai  
 Dr Yau Fai To  
 Dr Henry Yeung Chiu Fat  
 Dr Tang Pak Sang  
 Dr Jones Fok Kin Chung  
 Dr Dominic Sinn Lai Hong

The College and the Foundation would like to thank these colleagues who have contributed over 1.5 million HKD to the Foundation. Your good deeds will be permanently remembered on the Rolls of Honour in the College Chamber.

For others who wish to contribute, please note that:

- ◇ Your may contribute any sum of money from HKD10,000 to 250,000.
- ◇ You may pledge to give a designated sum of money by instalments. Please liaise with the College Executive Secretary, Christine, at 2871 8871.
- ◇ Please remember all moneys so donated will be tax-deductible.
- ◇ Those who want to contribute some more may always call the College Executive Secretary.

So please show your concern and support of the College the practical way, give to the Foundation!

The Foundation is actively engaged with the education of the public. A Post-graduate Course in Childhood Asthma was jointly organised by the Foundation and The Hong Kong Society of Paediatric Respiriology. A sum of HKD10,000 has been donated to the to the Foundation. Starting September, the Certificate Course on Pre-school Medical and Health Problems will begin for a total of 6 weeks. This is a course jointly run by the Foundation and the Federation of Medical Societies. We thank those Fellows who will be teaching in the Course.

## Other Announcements

### ISPCAN 5<sup>th</sup> Asian Conference on Child Protection

This multi-disciplinary meeting will be held in Hong Kong from November 25-27, 1999 by the Social Welfare Department, International Society for Prevention of Child Abuse and Neglect and Against Child Abuse. Please contact the Secretariat, The Federation of Medical Societies of Hong Kong, 4/F Duke of Windsor Social Services Building, 15 Hennessy Road, Wanchai, Hong Kong for further information. Tel 852-25278898, Fax 852-28667530, Email: [sigfmshk@netvigator.com](mailto:sigfmshk@netvigator.com)

### The 10<sup>th</sup> Asian Congress of Pediatrics

The 10<sup>th</sup> ACP will be held in Taipei from March 26-30, 2000. The main theme is "Child Health at the Millenary – 2000 AD". Please contact the Congress Secretariat for further details. Address: General Innovation Service, 6F, 400, Kee Lung Rd., Sec. 1, Taipei 110, Taiwan. Tel 886-2-2722-1227, Fax 886-2-2723-4187, Email: [pcogis@ms14.hinet.net](mailto:pcogis@ms14.hinet.net), Website: <http://www.pediatr.org.tw/10thacp>

## Letter to the President

23rd June 1999

Dr NK Leung  
 President  
 Hong Kong College of Paediatricians  
 Rm 808, HK Academy of Medicine Bldg.,  
 99 Wong Chuk Hang Road, Aberdeen,  
 Hong Kong

Dear NK,

As I told you last Saturday, I was most impressed by the Paediatric Advanced Life Support Course organized by the College. The course would be extremely useful for doctors facing paediatric emergencies when minutes and seconds count. I highly recommend the course to all paediatric colleagues especially those who have been in private practice for a long time without having to deal with emergencies on a regular basis. I also recommend it to family physicians who have to take care of babies and children in their daily practice. It should be a 'must' for all young paediatricians who want to join our College as fellow.

Please extend my thankfulness to Professor Maurice Leung and Dr KL Cheung and all others who have made this course possible.

With personal regards,  
Yours sincerely,

Dr Michael HH Mak



## Appendix 1

# Response of the Hong Kong College of Paediatricians to the Report on ‘Improving Hong Kong’ Health Care System: Why and For Whom?’ by the Harvard Team

The Hong Kong College of Paediatricians would like to express our appreciation to the Government of Hong Kong SAR for commissioning a team of economists, physicians, epidemiologists, and public health specialists from Harvard University to conduct a study on Hong Kong’s health care system in November 1997. This reflects the Government’s determination to review the strengths and weaknesses of the current system of financing and health care delivery and to propose strategic options for improving the system in Hong Kong.

The Hong Kong College of Paediatricians is one of the 15 constituent specialty colleges of the Hong Kong Academy of Medicine. The main objects for which the College is established are:

- ◇ to promote for the *public benefit* the advancement of knowledge of the science and art of Paediatrics;
- ◇ to act as a body for the purpose of consultation in matters of educational or *public interest* concerning Paediatrics; and
- ◇ to develop and maintain the good practice of paediatrics by ensuring the highest *professional standards* of competence and ethical integrity.

Hence, the College, acting as child advocate, is obliged to express our views on the Harvard Report, to ensure that quality health service must be provided to all children in need without any barrier, be it financial, administrative or otherwise.

The Harvard Report has put much emphasis on options to improve financial sustainability of the health care system; however, the College would like to focus on the more important issues of improving equity, quality and efficiency of health care delivery for children in Hong Kong.

## What the ‘Harvard Report’ did not address

- ◇ The report did not address *issues relating to children*. Children cannot speak for themselves. Children have no income and cannot insure for themselves. They are most vulnerable to adverse influences. They need their family and

the society to nurture and protect them during this vulnerable period of growth and development.

- ◇ The report did not address the important issues of *promotive and preventive health care* for children. Health of children has a great effect on productivity and output of a society, as it will influence a child’s ability and motivation to learn. These effects, in turn, influence adult productivity and advancement of a society. The protection of health and improvement of health status of children must be of paramount importance and priority. Actions must be taken principally by health services to promote child health and development and prevent childhood illness and handicap.
- ◇ The report did not address *rehabilitation service* to children with chronic illnesses and disabilities. There is no well defined policy for rehabilitation service and the Government has relied heavily on voluntary agencies for the provision of such services. These children are at greatest risk to suffer from adverse influences if they are not provided with a comprehensive, accessible, equitable quality health service.

## Our proposals

### Preventive Paediatrics

The College is of the opinion that the Government should take up the responsibility to provide primary, secondary and tertiary prevention in child care.

- ◇ *Primary prevention* aims to reduce the incidence of disease in children and its subsequent sequelae. The childhood immunization programme has been successful in preventing diseases, such as poliomyelitis, hepatitis B, etc. Services provided by the Maternal and Child Health Centres should be free and have been very successful in providing vaccination coverage of over 95%. The Government should also take up the responsibility to promote positive parenting to prevent child abuse and child behavioural problems and to promote healthy diet and life style to prevent future chronic diseases.
- ◇ *Secondary prevention* aims to treat patients either in order to cure them or to reduce the more serious consequences of disease through early diagnosis and treatment. This will reduce the prevalence of the diseases. Hence, the neonatal screening programme provided by the Clinical Genetics Service and the developmental screening programme provided by the Child Assessment Centres should be free.
- ◇ *Tertiary prevention* aims to reduce the progress or complications of established disease. It

consists of measures to reduce impairments and disabilities from the disease or injury and so minimize any handicap which may result. Thus after developmental screening has revealed motor, visual or hearing impairments before disabilities have become apparent, consequent early application of remedial measures may limit the adverse effects of such impairments. For example, tertiary prevention through the rehabilitation of children with physical handicap can enable them to take part in daily social life and bring about a great improvement in the well-being of these children. The Government should coordinate and subsidize these multidisciplinary rehabilitation programmes.

## Organization of Child Health Services

The bulk of primary health care is currently provided by the private sector (curative) and the Department of Health (preventive). The more sophisticated medical problems are referred to specialists in the Hospital Authority and the private sector. At present, child health services are fragmented and compartmentalized.

*Proper interface and collaboration* among the Department of Health, Hospital Authority and the private sector should be promoted. This could be achieved by:

- ◇ establishment of effective communication channels;
- ◇ streamlining of referral and follow-up services;
- ◇ development of shared care programmes;
- ◇ formulation of clinical practice guidelines and protocols; and
- ◇ setting up a common database for continuity of care.

*A dual system of public and private practice* could co-exist and provide the freedom of choice for patients and avoid monopoly of services.

There should also be better coordination between health care services and other service providers, such as *education* and *social* services.

## Professional Accountability and Quality Improvement Programmes

The College opines that improving safety and quality of care should be a central concern for all those in the health care system: policy makers, government, governing bodies, managers, health practitioners and consumers alike. The professional regulatory bodies, i.e. the Hong Kong Medical Council, would ensure that professional self-regulation keeps pace with public expectations and is more open and accountable. The health care professionals should take up the key

responsibility of ensuring health care safety and quality. The general principles would be:

- ◇ Those organizing and managing the health care system should be responsible for creating and maintaining a system which provides safe and high quality care: *accreditation*.
- ◇ Those practising within the system should be responsible for the standard of their own practice and should share responsibility for creating and maintaining a system which provides safe, high quality health care: *peer review practice, medical record review*, etc.
- ◇ All those managing and working in the system should work together and with consumers to improve the safety and quality of health care: *incident monitoring* and development of valid *safety and quality of care indicators*.

## Professional Development

The College is committed to training and professional development of its members. Since its inauguration in 1991, the College has published its own journal, organized postgraduate training courses and update series and conduct examinations in Paediatrics to ensure the highest professional standard of competence and ethical integrity among paediatricians in Hong Kong. The maintenance of a high professional standard among our paediatricians is the best way to ensure that quality health care is delivered to children in our society.

## Conclusion

The Hong Kong College of Paediatricians believes that the Government of Hong Kong SAR is committed to improving the health care system in Hong Kong. We believe that the central goal of quality improvement in health care is to sustain what is good about the existing system while focusing on the areas that require improvement. We believe that quality improvement could be achieved by partnership between the Government and the clinical profession. We believe that the ultimate aim of this partnership is **'HEALTH FOR ALL'**.

We would like to conclude by quoting from the **United Nations Convention on the Rights of the Child** (1989) which embodies the right of every child to:

- ◇ Equity regardless of race, religion, nationality or sex
- ◇ Special protection for full physical, intellectual, moral, spiritual and social development in a healthy and normal manner
- ◇ Adequate nutrition, housing and medical services
- ◇ Special care if handicapped
- ◇ Love, understanding and protection

## Appendix 2

# Application and Guidelines for Exit Assessment

## Application

The next Exit Assessment of the College will be held in December 1999. Deadline for application will be on 15th October 1999. Application forms are available from the Secretary of the College at Tel: 28718871 or Fax: 27851850. The followings are required to be submitted together with the application:

- (i) certified true copies of certificates (primary degree and intermediate / MRCP(UK) examination or equivalent qualification recognized by the Academy)
- (ii) 2 photographs certified by one of the proposers
- (iii) 4 dissertations
- (iv) log sheets of higher training and assessment by trainers and supervisors
- (v) assessment fee of \$4,000 made payable to "Hong Kong College of Paediatricians".

## Guidelines for Assessment

The assessment consists of 4 parts:

### (1) *For dissertations:*

- (a) 4 papers are required, with one from each of the following 3 categories:
  - (i) research project/study
  - (ii) review of literature of a clinical problem
  - (iii) case reporthowever, full research/study (not approved protocols, or unfinished studies) can replace any one of the other two categories.
- (b) For papers on research project/study, reviewing of cases of a condition is acceptable but the candidate must be the first author. For published research project/study and approved protocols of which the candidate is not the first author, he/she should have a **significant contribution (at least 40%)** to the project/study, and certification by the first author and supervisor is required. Unfinished research projects are acceptable.
- (c) For Review of literature and Case reports, the candidate must be the first author.
- (d) No two papers should be of the same topic.

(e) Candidates are advised not to submit more than 4 papers. If so, he would be requested to choose 4 papers for assessment

(f) No papers after deadline of application will be accepted, and candidates will not be able to present themselves for the Assessment

### (2) *For Clinical Experience/Competence:*

Candidates would be assessed on the approach to problem formulation and clinical management, more than on book-knowledge and minute details. They would be assessed on their clinical judgement and competence in dealing with clinical problems.

### (3) *For Service Related Issues:*

Candidates would be assessed on how their clinical experience enables them in handling service related matters, e.g. medical legal problems, ethical issues, risk management, communication skills, doctor-patient relationship, clinical audit, quality assurance programmes, training and supervision of staff, etc.

### (4) *For Critical Paper Appraisal:*

Candidates will be assessed on how to read a paper regarding methodology, evaluation of results and clinical relevance.



## CME Category A Activities

<i>August 1999</i>	
4th Wednesday  CME Cat A 2 pts	<b>Topic: Use of Dysport in Cerebral Palsy</b> <b>Venue:</b> Seminar Room, 1/F Nurses' Quarters, Kwong Wah Hospital <b>Time:</b> 2:15pm – 4:30pm <b>Speaker:</b> Prof A Magid Bakhirt <b>Organizer:</b> HK Society of Child Neurology & Developmental Paediatrics <b>Enquiry:</b> Dr WH Lau (Tel: 23771228; Fax: 23770792)
16th Monday  CME Cat A 2 pts	<b>Topic: Recent Advances in Treatment of Retinoblastoma</b> <b>Venue:</b> Block B, 1/F, Room 5, Queen Elizabeth Hospital <b>Time:</b> 6:00pm – 7:00pm <b>Speaker:</b> Prof Helen SL Chan <b>Organizer:</b> HK Paediatric Haematology & Oncology Study Group <b>Enquiry:</b> Dr CF Chan (Tel: 28554091; Fax: 28554849)
21st – 22nd Saturday - Sunday  CME Cat A 3 pts (21st) Cat A 6 pts (22nd)	<b>Topic: 1st CUHK Diabetes &amp; Cardiovascular Risk Factors – East Meets West Symposium</b> <b>Venue:</b> HK Convention & Exhibition Centre <b>Time:</b> 2:00pm – 8:15pm (21st) 8:30am – 5:00pm (22nd) <b>Organizer:</b> Department of Medicine, Chinese University of Hong Kong <b>Enquiry:</b> Ms Grace Chu (Tel: 25278898; Fax: 28667530)
25th Wednesday  CME Cat A 2 pts	<b>Topic: 1. A newborn with persistent pleural effusion 2. A case of mixed connective tissue disease with pulmonary involvement</b> <b>Venue:</b> Seminar Room, 1/F Nursing Quarters, Kwong Wah Hospital <b>Time:</b> 7:00pm – 8:30pm <b>Speakers:</b> 1. Dr Ma Kwok Chiu 2. Dr Albert Li <b>Organizer:</b> HK Society of Paediatric Respiriology <b>Enquiry:</b> Dr SY Lam (Tel: 73189002)
<i>September 1999</i>	
4th Saturday  CME Cat A 2 pts	<b>Topic: Update Series on Child Health Session III</b> <b>1. Eat well, Grow well</b> <b>2. What can go wrong if children do not eat well?</b> <b>Venue:</b> Convention Hall, 2/F, Hong Kong Convention & Exhibition Centre, Wanchai, Hong Kong. <b>Time:</b> 1:00pm – 5:00pm <b>Speakers:</b> 1. Ms Ivy Loy 2. Dr Chan Wai Man <b>Organizers:</b> HK Paediatric Society & Department of Health <b>Enquiry:</b> Dr KT So (Tel: 24685392; Fax: 24569111)
8 <sup>th</sup> Wednesday  CME Cat A 2 pts	<b>Topic: 1. Renal Function in Cooley's Anaemia Patients 2. (To be confirmed)</b> <b>Venue:</b> Room 6, 1/F, Queen Elizabeth Hospital <b>Time:</b> 5:30pm – 7:00pm <b>Speakers:</b> 1. Dr Winnie Chan 2. Dr Yeung Po Shing <b>Organizer:</b> HK Paediatric Nephrology Society <b>Enquiry:</b> Ms WH Lai (Tel: 29903757; Fax: 23703466)

9th Thursday	Topic: <b>Fetal Cardiology – Perspective of Obstetrician &amp; Neonatologist</b> Venue: Marriott Ballroom, JW Marriott Hotel Time: 8:30pm – 10:00pm Speakers: 1. Dr Macor CW Chan 2. Prof Maurice Leung
CME Cat A 2 pts	Organizer: HK Society of Neonatal Medicine Enquiry: Ms Yvonne So (Tel: 25998291; Fax: 23470453)

19th Sunday	Topic: <b>1999 Paediatric Update Symposium No. 4 Paediatric Orthopaedics</b> Venue: Lecture Hall, HAHO Building Time: 3:00pm – 6:00pm Speakers: Prof J Cheng, Prof LK Hung, Dr NH Chan, Dr MS Wong, Dr YH Li
CME Cat A 3 pts	Organizer: HK College of Paediatricians Enquiry: Dr WH Lee (Fax: 23845204)

18th Saturday	Topic: <b>HK Paediatric Society Annual Scientific Meeting 1999</b> Venue: Queen Elizabeth Hospital Time: 12:30pm – 6:00pm Speakers: (To be announced)
CME Cat A 3 pts	Organizer: HK Paediatric Society Enquiry: Prof PC Ng (Tel: 26322851; Fax: 26360020)