

28 & 29
NOV 2019

NORTHERN BASIC HAND & WRIST TRAUMA WORKSHOP

**HOTEL
SERI
MALAYSIA
KANGAR,
PERLIS**

LIST OF SPEAKERS

**DATO' DR RASDEEN FAZWI
MUHAMMAD NAWAWI**

**DR JEREMY PRAKASH
SILVANATHAN**

MR LIM MY

MR EO CK

**DR MOHAMAD SALLEHUDIN
HASSAN**

DR SEM SEI HAW

DR ANIZAR FAZI ANOAR

DR CHAN KIEN LOONG

MS CAROLYN

MR INDRA

MR SOPIAN

SAWBONE WORKSHOP

- 1. SCAPHOID FIXATION**
- 2. DISTAL RADIUS
PLATING**
- 3. METACARPAL /
PHALANX PLATING**
- 4. DYNAMIC EXTERNAL
FIXATION OF
FINGERS**

FEES

MO RM 300

SPECIALISTS RM 500

**LIMITED SPACES
AVAILABLE- 40 PAX ONLY**



DAY 1

TIME	TOPIC	PRESENTER
8.00 AM	REGISTRATION	
8.30AM	Surgical Anatomy Distal Radius	MR SEM SEI HAW
8.45 AM	Management of distal end radius	DATO DR RASHDEEN
9.00 AM	Recitation of Doa Opening Ceremony/speech - Chairman - Dato Rashdeen Pengarah hospital	
9.30 AM	Photography session	
9.40AM	TEA BREAK	
	HAND	
10.00 AM	Mallet and Jersey finger	MS CAROLYN
10.10 AM	Management of Mallet and Jersey finger	MR JEREMY PRAKASH SILVANATHAN
10.30 AM	PIPJ dislocation	MR LIM MY
10.40	Management of PIPJ dislocation	MR JEREMY PRAKASH SILVANATHAN
11.00 AM	Metacarpal and Phalanx fracture	MR EO CK
11.10 AM	Management of MCB and phalanx fracture	MR CHAN KIEN LOONG
11.30 AM	MCPJ dislocation	MR INDRA
11.40 AM	Management of MCPJ dislocation	MR ANIZAR FAIZI ANOAR
12.00 PM	Nerve injury and repair	MR MOHAMAD SALLEHUDDIN
12.30 PM	LUNCH	
2.00 PM	Flexor Tendon injury	MR SOPIAN
2.10 PM	Flexor tendon repair	MR ANIZAR FAIZI ANOAR

2.30 PM – 5.00 pm	SAW BONE: 1) MCB plating 2) Scaphoid fixation 3) Distal end radius plating 4) PRTS (pin rubber traction system)	Facilitators to be confirmed
DAY 2		
TIME	TOPIC	PRESENTER
08.30 AM	Scaphoid Fracture	MR TEO YM
08.40 AM	Management of Scaphoid fracture	MR CHAN KIEN LOONG
09.00 AM	Perilunate injury	MR SOPIAN
09.10 AM	Management of perilunate injury	DATO DR RASHDEEN
09.30 AM	TEA BREAK	
10.00 AM	Issues in DRUJ	MR SEM SEI HAW
10.20 AM	TFCC injury	MR MOHAMAD SALLEHUDDIN
10.40 AM	Case Discussion	Facilitators
12.00 PM	Closing Ceremony	
*timetable to be finalized		

Registration Information:

Name:

IC:

Tel No: Email

Payment to be made to:

Malaysian Medical Association (MMA) Perlis

MAYBANK ACC NO 559012304492

CONTACT INFORMATION:

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