



**香港防癆心臟及胸病協會**  
The Hong Kong Tuberculosis, Chest and Heart Diseases Association

**Seminars on**

# **Contemporary Palliative Care** **「現代紓緩護理」 for Nurses**



**Date : 3<sup>rd</sup>, 17<sup>th</sup> & 24<sup>th</sup> May 2014 (Saturdays)**

**Time : 9:30am to 12:15pm**

**Venue : Lecture Theatre, LG 1, Ruttonjee Hospital,  
266 Queen's Road East, Wan Chai, Hong Kong**

**CNE : 2.5 points per module (to be confirmed)**

	Date	Topic	Speaker
1	3 <sup>rd</sup> May 2014 9:30am to 12:15pm	Contemporary palliative nursing in different care settings	<i>Dr. Theresa LAI,</i> Nurse Consultant, Palliative Medicine Unit, Grantham Hospital
		Psycho-social and spiritual care in end-of-life	
2	17 <sup>th</sup> May 2014 9:30am to 12:15pm	Initiate Advance care planning and Advance directive	<i>Ms. Ellen YEUNG,</i> Nurse Consultant, Palliative Care, Nursing Service Division, Hong Kong East Cluster
		Ethical decision making in end-of-life	
3	24 <sup>th</sup> May 2014 9:30am to 12:15pm	Nursing management of pain & symptoms for patient with progressive advanced diseases	<i>Dr. Theresa LAI,</i> Nurse Consultant, Palliative Medicine Unit, Grantham Hospital
		Care for the imminently dying patients and the bereaved families	<i>Ms. Ellen YEUNG,</i> Nurse Consultant, Palliative Care, Nursing Service Division, Hong Kong East Cluster



THE HONG KONG TUBERCULOSIS, CHEST AND HEART DISEASES ASSOCIATION

香港防癆心臟及胸病協會

## Seminars on “Contemporary Palliative Care” for Nurses

### Objectives:

- 1.To strengthen, update and develop knowledge of nurse professionals on the topic of “Palliative Care”.
- 2.To enhance their skills and technique in daily practice.

### Targets:

Nurses from all aspects

### Contents and speakers:

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### Mode of delivery

Lecture & discussion session. The teaching medium will be mainly in Cantonese supplemented by English as necessary.

### Venue

Lecture will be held at: **Lecture Theatre, LG 1, Ruttonjee Hospital, 266 Queen’s Road East, Wan Chai, HK. (*Parking space is NOT available*)**

### CNE points:

Participants can be accredited **2.5 points of Continuing Nursing Education** for each module (to be confirmed)

### Course Fee

\$600 (non-member of our Centre) or \$450 (member of our Centre) for Full course **or**  
\$200 (non-member of our Centre) or \$150 (member of our Centre) for each module

### Registration Method

Please mail completed form with payment (**cheque only**) to: **The Hong Kong Tuberculosis, Chest and Heart Diseases Association, 266 Queen’s Road East, Wan Chai, Hong Kong.** Registration could not be cancelled or modified after confirmation.

**(Cheque payable to “The Hong Kong Tuberculosis, Chest and Heart Diseases Association”)**

### Number of Participants

Seats are limited, first come first served.

### Note

- 1.Training materials will be distributed on each module if available.
- 2.Certificate will be awarded to participants who have attended all 3 modules successfully.
- 3.For those who are not able to attend full course, letter of attendance will be awarded at the end of each module.

## Seminars on “Contemporary Palliative Care” for Nurses

### Registration Form

Please ✓ your choice

You can choose 1 or more than 1 module

	Module 1 (3 <sup>rd</sup> May 2014)	Module 2 (17 <sup>th</sup> May 2014)	Module 3 (24 <sup>th</sup> May 2014)
<i>Non-member of our Centre (\$200 per each module)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Member of our Centre (\$150 per each module)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Personal Particulars

Title:  Prof.  Dr.  Mr.  Mrs.  Ms.  Miss  Others

Name: \_\_\_\_\_ (Chi) \_\_\_\_\_ (Eng)

Department / Post: \_\_\_\_\_

Institution \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

**{Please fill in the fax number / email address for sending the confirmation letter}**

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Cheque : \_\_\_\_\_ (Bank) \_\_\_\_\_ (Cheque Number)

**[Cheque payable to: “The Hong Kong Tuberculosis, Chest and Heart Diseases Association]**

**[Please put down your name and contact number at the back of the cheque]**