

NEWSLETTER

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A SMOOTH AND STEADY FLOW

I have always liked blood vessels. To me, vascular surgery is fascinating and satisfying.

I have been the Head of SGH's Vascular Surgery department for about six years. Since 1 February 2021, I have also been heading our ACP's first Vascular Centre that brings together the multi-disciplinary expertise of the Vascular sub-specialities of SGH, CGH and SKH to offer integrated care, and collaborate in research and education.



Assoc Prof Chong Tze Tec

Head, SingHealth Duke-NUS Vascular Centre; Vice-Chair, Education (Undergraduate), Surgery ACP; Assistant Dean, Doctor of Medicine (MD) Programme, Duke-NUS Medical School; and Head, Department of Vascular Surgery, SGH

Research and benchmarking

One of the immediate plans for our centre is to consolidate the common research fields of all three hospitals, such as research in lower extremity revascularisation like endovascular treatment of the legs through ballooning and stents.

We are also taking part in the Vascular Quality Initiative (VQI), a voluntary initiative by more than 800 medical centres in North America to collect and share data on vascular care. SGH used to be the only non-American VQI member but now CGH and SKH will join the initiative. The initiative will allow our three institutions to not only share data, but also audit and benchmark the quality of our vascular care against the other centres.

Given the number of patients with diabetic foot ulcers requiring amputation in Singapore, we are also focusing on the setting up of an Amputation Database for our Vascular Centre. Through the database, we will be collating data to see how we can improve our diabetes care. We hope that by pooling data on patients, dialysis access (creation and maintenance), our centre and sub-specialties can identify improvements in areas where we are lagging behind.

Endovascular advancements

One of the recent vascular surgery developments that the Vascular Centre is looking into is complex aortic aneurysm treatment. In the past, we were able to only use stent grafts below the renal arteries in the abdomen. Now we are able to use custom-made devices to treat the whole aorta, including those in the chest, abdomen and pelvis. The newest such method is to use the arch branch device to seal in the ascending aorta which allows aortic arch aneurysms to be treated. Five years ago, this technology was not available and now we can offer this minimally invasive option through SingHealth to all our patients.

Learning new techniques

A new technique that we have been planning to introduce to our centre is the endovascular creation of fistulas. Patients with chronic kidney diseases require arteriovenous fistulas for dialysis access, usually in the arm. Such fistula access has to be surgically created—surgeons have to connect the artery and the vein by stitching them together.

Now there is an endovascular way of doing things that we want to learn. However, our plans for a proctor to teach us have been delayed by the COVID-19 pandemic. We are looking into how we can learn this new technique using virtual means.

Surgical education is another area that is close to my heart. I hope that our new Vascular Centre will allow us to leverage our expertise and resources to ensure a smooth and steady flow of ideas and knowledge that translates into better outcomes for our patients.



ADVANCING SURGICAL QUALITY

Although I have always enjoyed my surgical practice, and participated in research and surgical education, in recent years, my portfolio has changed a little as I accepted more leadership roles.

I was Head of the Department of Surgery in CGH for six and a half years from 2014, before relinquishing this role. On 1 July 2021, I took on two new roles—as Deputy Chairman Medical Board (Surgical Disciplines) at CGH and Deputy Vice Chairman (Clinical) of our ACP.

Prior to re-joining SingHealth in 2017, CGH was part of the Eastern Health Alliance. We had developed our own research, innovation and enterprise work separately. In my new ACP role, I hope to collaborate with my SingHealth Duke-NUS colleagues in such a way that we can synergise the resources and expertise of our institutions in the academic arena.



Assoc Prof Andrew Wong Siang Yih

Deputy Vice Chairman (Clinical), Surgery ACP; Deputy Chairman Medical Board (Surgical Disciplines), CGH; and Senior Consultant, Department of Surgery, CGH

Benchmarking surgical outcomes

With my ACP appointment, I also hope to leverage the combined expertise and efforts of our healthcare cluster to advance surgical quality. One area that I am looking into is the American College of Surgeons National Surgical Quality Improvement Program (NSQIP). NSQIP provides participating hospitals with tools, analyses, and reports to measure their quality of surgical care so as to make informed decisions for improvements.

SGH has been on the programme since 2017 while CGH has started the process of enrolling this year. We hope to work together to benchmark our surgical outcomes and identify areas for improvement.

Managing COVID-19 disruptions

At CGH, the COVID-19 outbreak has brought out the best in our staff—they have willingly risen to the challenge of an increased workload. For example, the surgical team has worked together to identify innovative solutions to address the backlog of elective surgeries—a result of the pandemic—within our infrastructure constraints.

With COVID-19 continuing to disrupt our lives, we have to not only take care of our patients but also our healthcare workers. We should consider how we can mitigate the disruptive effect of frequent COVID-19 case surges on patient care. At the same time, we must not forget that the prolonged pandemic with its disruptions are also chronic stressors to our surgical teams. The stressors faced by everyone need to be addressed for the long term.

Living with COVID-19

As we live with COVID-19 in our midst, you will have noticed that the virus continues to evolve and throw up surprises. We have to be constantly prepared to respond in new or different ways, such as coming up with new work guidelines and protocols.

While I know that it may not be possible to return to the pre-COVID way of doing things, my personal hope for the new normal is to regain some semblance of what we took for granted before. For me, this means to be able to travel freely, meet friends and family, and go out for a meal. Perhaps with sufficient people vaccinated, all that may become possible in the near future.

For now, even as the pandemic rages on around us and work seems never-ending, I believe it is necessary to develop interests outside of work, and have the all-important family support. We need to care for ourselves in order to be able to care for our patients. For me, self-care includes cooking a meal for friends and family, and trying my hand at growing herbs.



Assoc Prof Andrew Wong who was conferred the Outstanding Clinician Award at the SingHealth Excellence Awards 2021 ceremony

NURTURING SURGEON INNOVATORS

To me, innovation is about doing things differently, or applying existing knowledge in new ways. In a broad sense, surgical innovation is more than just devices. It extends to surgical treatment and training, processes and procedures that ultimately translate into better patient outcomes.

The Device Development Office in our Surgery ACP has been renamed the Surgical Technology & Innovation Office to reflect this. I am honoured to have been appointed the Director of the office since 1 June 2021. I intend to build on the legacy of the previous Directors to facilitate the development of innovative solutions for surgical practice, and nurture surgeon innovators.



Assoc Prof Yuen Heng Wai

Director, Surgical Technology & Innovation, Surgery ACP; Senior Consultant, Department of Otorhinolaryngology—Head & Neck Surgery, CGH

Finding the right match

Personally, it has been an eye-opener for me to collaborate with other disciplines on innovation. Very often, there are solutions out there that we may not know can be applied to our clinical practice, and vice versa. In a way, finding answers to the surgical questions that we raise during our practice is about locating the right match. This is because we in the surgical community cannot be fully updated on the latest in biomedical sciences or engineering. It is through inter-disciplinary partnerships that we can learn about and apply the latest innovations to our practice.

This is something that our Surgical Technology & Innovation Office is looking into. We also hope to identify surgeon-innovators with strong convictions to introduce technology and innovation into their surgical practice.

To encourage more surgeons to take on innovation challenges, we need to provide them with a safe and guided environment. We also need to show them where they can find the resources to work with other professions to bridge any gaps in clinical practice.

A different track

Since 2017, we have been collaborating with the Nanyang Technological University and Singapore University of Technology and Design (SUTD) on inter-disciplinary projects in clinical device development. Our joint efforts allow us to tap on our clinical expertise, test-bedding environment, IT and system design solutions. Besides heading Surgical Technology & Innovation, I am the Program Director of the SUTD-Duke-NUS Special Track Program to develop clinician-innovators. Under this programme, SUTD engineering graduates go on to the Duke-NUS Medical School and become medical doctors. By straddling two professions, these clinician-innovators will be able to take innovation to new heights.

Beyond borders

With our limited resources in Singapore and the challenges posed by our ageing population, we have an increasing need for surgical technology and innovation in healthcare. For instance, we need to harness AI and data analytics to make up for our shortage of caregivers and to optimise patient care. Beyond that, we have to identify the right solutions to bring healthcare to the population in the community.

With our emphasis on inter-institution and inter-discipline collaboration, I have hopes that we can advance our clinical innovation to beyond our borders so that we can learn with and from regional, or even global partners.

Another area we hope to develop is frugal innovation which involves doing more with less; one natural partner is our SingHealth Duke-NUS Global Health Institute. I believe frugal innovation is an increasingly important aspect of innovation given how limited resources worldwide are, and is worth exploring.



EDUCATION NEWS:

BASIC SURGICAL SKILLS WORKSHOP

The Basic Surgical Skills Workshop follows a structured curriculum to teach basic surgical techniques and encourage formation of good habits at the beginning of surgical training. The workshop has been running since 2009 with a select faculty comprising experienced surgeon educators from different surgical disciplines.



In response to the COVID-19 pandemic and aligned with priorities of the SingHealth-Duke NUS Education Masterplan, the programme leads from the Surgery ACP (Dr Lee Zhen Jin, Dr Lee York Tien, Dr Sharmini Su Sivarajah, Dr Lin Jinlin) transformed the traditional full-day Face-to-Face (FTF) workshop to an innovative hybrid format. The new hybrid format combines the best of both worlds—by utilising technology for e-learning, with more time allocated for face-to-face hands-on segment in small groups, facilitated by experienced faculty.

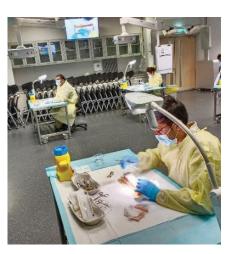


Photo 1: Participants practise on the surgical techniques

The original FTF workshop had half a day of didactic lectures. These have been converted to e-learning via a collaborative effort by the module owners from different SingHealth Institutions. The curriculum has been re-organised to cater to different learning needs of the participants, who come from multiple residency programmes (see Annex A). Conversion of didactic lectures to e-learning has reaped multiple benefits-it standardises the teaching-learning, diverts faculty time to direct facilitation at the hands-on component, and removes the preparatory knowledge-learning time, so that workshop time is focused on skills practice.

The inaugural pilot was conducted on 20 February 2021 with 10 participants at Singhealth Duke-NUS Institute of Medical Simulation (SIMS), and with support from Johnson & Johnson (Photo 1). Participants had to complete and pass the e-learning modules prior to the workshop. The FTF workshop started with a short review of e-learning concepts, followed by the hands-on component, which allowed participants opportunities to practise surgical techniques with expert guidance. This hybrid format conformed to the prevailing Ministry of Health's (MOH) social distancing guidelines in terms of workshop duration, lab capacity, and restrictions in terms of cross institution mixing of participants and faculty. (Photo 2).



Photo 2: Participants and faculty are segregated by institutions

Following this successful pilot, Surgery ACP plans to transform other workshops to hybrid formats to continue the facilitation of surgical training under different COVID-19 constraints. We welcome discussions with any other workshop directors who wish to learn from our experience to optimise skills teaching-learning using a hybrid format.

¹ For senior residents and surgeons keen to join as faculty for the Basic Surgical Skills Workshop, please email benjamin.zhu.q.y@sgh.com.sg

Annex A: Curriculum

E-Modules Topics:

- 1. Local Anaesthetics, Instruments and Sutures by Dr Teo Jin Yao, SGH
- 2. Suturing Techniques & Wound Closure by Dr Lee York Tien, KKH
- 3. Knot Tying by Dr Sharmini Su Sivarajah, SKH
- 4. Vascular Anastomosis by Dr Chng Siew Ping, SGH
- 5. Bowel Anastomosis *by Dr Lester Ong, SKH*
- 6. Excision Biopsy by Dr Pek Wan Sze, SGH

Hands-On:

- 1. Vascular Anastomosis
- 2. Bowel Anastomosis
- 3. Flexor Tendon Repair

EMPOWERING SURGEONS: A BESPOKE BIOSTATISTICS COURSE FOR

SURGERY ACP BY DUKE-NUS MEDICAL SCHOOL

As the Surgery ACP embarks on its mission to become one of the top academic surgical units in the world, we aim to nurture more surgeons with experience in conceptualising and planning clinical studies. Our ACP collaborated with Duke-NUS Medical School to organise a Certificate Course in Applied Biostatistics for Clinical Research to empower clinicians across campuses in their academic journeys and to jump start efforts in academic surgery. This course is also a required module in the PhD Programme in Clinical and Translational Science at Duke-NUS Medical School.

Message from Prof Pierce Chow, Vice Chair (Research), Surgery ACP:

The strength of clinicians lies in clinical and translational research and clinicians are the only ones who can identify and ask the right research questions. We must empower them to do " this research.

Our first batch of nine participants completed the course in May 2021. The sponsorship award from the Surgery ACP covers the course fee and a perpetual Stata licence. Clinical Assistant Professor Lim Chin Hong, Duke-NUS Medical School; Consultant, Department of Upper Gastrointestinal & Bariatric Surgery, Singapore General Hospital, was one of the awardees. Through his sharing, we hope to encourage more clinicians to embark on academic surgery.



Q1: Why do you want to attend this course?

A1: Biostatistics involves the development, implementation and application of statistical methods in the field of medical research. As a clinician, the understanding of statistics enables me to effectively conduct clinical research. Without it, it would be impossible to make decisions based on data collected from research projects alone. Another reason would be the ability to critically review journals. Most journals contain some form of statistics to validate their results. Without an understanding of statistics, the information will be meaningless.

Q2: What do you hope to achieve from the course?

A2: I hope I will be able to perform fundamental statistical analyses by myself. More importantly, know when I need a statistician. Most of us know enough about our cars to know when to take it into the workshop. We don't attempt to repair it ourselves because we don't want to cause more damage.

But we need to know enough to ensure we don't get a whole new engine when all we need is a new fuel filter. It is important to have enough statistical knowledge to be able to discuss the project and data analyses we want computed with the statistician. This quote by Ronald Fisher-"To consult the statistician after an experiment finished is often merely to ask him to conduct a post morten examination. He can perhaps say what the experiment died of," is an apt description of my sentiments!

- Q3: Would you recommend this course to others? Why? A3: Yes. I would. In fact, all clinicians interested in clinical research should attend the course.
- Q4: What are your plans after attending the course?
- A4: I am currently using statistical methods and Stata that I learned to analyse my own research data. I am also applying for the Nurturing Clinician Researcher Scheme (NCRS) and have set aside 0.4 FTE for clinical research.

CONGRATULATIONS TO THE FOLLOWING FACULTY WHO HAVE SUCCESSFULLY COMPLETED THE COURSE (FEBRUARY - MAY 2021)!



Dr Lin Wenjie Associate Consultant. Department of Colorectal Surgery, SGH & NCCS







Gastrointestinal & Bariatric Surgery, SGH & NCCS Dr Xu Shuhui Associate Consultant, Department of Otorhinolaryngology

-Head & Neck Surgery,

SGH & NCCS

Dr Benjamin Poh Ruimin Associate Consultant. General Surgery, SGH & NCCS



Dr Chua Jian Kai Andy Associate Consultant. Department of Otolaryngology, SKH



Dr Raj Vikesh Tiwari Consultant, Department of Urology, SKH

Dr Teo Xin Ling



Department of Urology, CGH **Dr Low Wei Xiang Alvin**

Associate Consultant,



R6, Urology Residency, SingHealth

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ERY ACP EARCH AWARDS

NURTURING CLINICIAN SCIENTIST SCHEME (NCSS) FY2021 CYCLE 1

The aim of the NCSS is to nurture young clinicians within the SingHealth Duke-NUS Academic Medical Centre (AMC), helping them to gain confidence and the competencies to compete for external research grants and embark on a sustainable

research career.







Dr Wong Si Min Jolene Associate Consultant, Department of Sarcoma, Peritoneal & Rare Tumours, SGH & NCCS

Dr Koh Hong Xiang Frederick Associate Consultant, Department of Colorectal Surgery, SKH

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SURGERY ACP SEED GRANT 2021

The aim of the Surgery ACP Seed Grant is to encourage exploratory and developmental research projects in the Surgery ACP by providing support for early and conceptual stage research.



SGH & NCCS

SINGHEALTH DUKE-NUS ACADEMIC MEDICINE (AM) RESEARCH GRANT

The SingHealth Duke-NUS Academic Medicine (AM) Research Grant Call provides funding support to deserving translational and clinical research within the SingHealth Duke-NUS AMC



SingHealth Duke-NUS AM & NHIC Joint MedTech Grant Call FY2021 Awardee



Dr Siti Radhziah Consultant, Department of Otorhinolaryngology-Head & Neck Surgery, SGH & NCCS

GLOBAL HEALTH INITIATIVE

Response and Outcome Analysis of Tertiary Surgical Unit in Asia

The COVID-19 pandemic has brought about unprecedented disruptions to surgical services around the world. There is an urgent need to study the impact of these disruptions on patient care and identify effective response strategies to minimise it. Findings from such studies can help inform the planning process to deal with continued challenges posed by COVID-19 and other pandemics in the future.

With support from a generous donation, the Response and Outcome Analysis of Tertiary Surgical Units in Asia is a two-phase study initiated and led by Prof Tan Hiang Khoon, Academic Chair for Surgery ACP and Director for the SingHealth Duke-NUS Global Health Institute, to draw insights from the experiences in South and Southeast Asia. This initiative was made possible by the generous support from the SGH Health Development Fund and seamless

Understanding the Concerns of Migrant Workers Diagnosed with COVID-19

The Global Health Initiative aims to develop innovative models of care and improve resilience of our healthcare system amidst the COVID-19 pandemic and beyond. Key to the Global Health Initiative is understanding the perspectives and well-being of the Singapore population, healthcare workers, and patients during the COVID-19 crisis.

Migrant workers bore the brunt of the first wave of COVID-19 in Singapore, and they are a community often neglected in national conversations on health and healthcare. A cross-disciplinary workgroup, formed at the SingHealth Community Care Facilities in 2020, sought to understand the concerns of migrant workers quarantined in Singapore Expo as they faced COVID-19 diagnoses. The group, led by Ms Yee Kaisin, speech therapist and Surgery ACP Allied Health Faculty, comprised doctors and allied health professionals from SingHealth institutions and migrant coordination by the International Collaboration Office of SingHealth.

The first phase of the study involves in-depth interviews over Zoom of surgical leaders from 25 tertiary hospitals or specialist centres from 11 South and Southeast Asian countries on their experiences of managing surgical care during the COVID-19 pandemic. Data collection and analysis for this part of the study were carried out between September 2020 and March 2021. The study revealed that COVID-19 has affected all the institutions in the study but the degree varied considerably from prolonged suspension of elective surgeries to keeping near normal operation. The common response strategies adopted were:

- 1) developing new safety protocols
- 2) redesigning surgical facilities, and
- spearheading technological and social innovations to ensure safety of care and service continuity.

worker non-government organisation HealthServe.

The team found that migrant workers faced stresses from their susceptibility to infection in crowded dormitories, being unable to continue providing for their family during the crisis, and the isolating conditions of the quarantine environment. The workers coped by keeping in contact with their families through phone calls, keeping updated with news, and continuing to practise their faith. They now place keeping physically and mentally healthy and having good access to healthcare as new priorities after the crisis, beyond their pre-pandemic priority of keeping themselves free from workplace injury.

Learning the perspectives of migrant workers in this ongoing crisis is only the first step in helping us build a more resilient and inclusive healthcare system. The

Scan this QR code to read more about these findings in BMJ Open.



Five factors seemed to form the pillars of continuing surgical services in the COVID-19 pandemic: decisive and emphatic leadership, clear and comprehensive safety protocols, quick development of effective COVID-19 testing capabilities, effective communication with patients, and lastly, collaboration across the healthcare system for redistribution of resources and workload between public and private facilities. These findings can offer important lessons on how to strike a balance between protection of healthcare capacity to deal with the pandemic and preservation of surgical services against disruption by the pandemic.

The second phase of the study aims to quantify the collateral damages of COVID-19 on surgical care outcomes by surgical disciplines across the participating institutions. The study is still at the planning stage and the results will be reported in the future.

workgroup plans to extend this work to studying health communication in the diverse community of migrant workers in Singapore. Building sustainable communication channels between the healthcare system and the migrant worker community will bring Singapore closer to the global health ethos of equity in access to health and healthcare.



Dr Mahalakshmi Rangabashyam, a Fellow from the Department of Head & Neck Surgery, SGH & NCCS, interviewing a migrant worker in quarantine at Singapore Expo Hall through video conferencing.

CLINICAL PROFESSOR WONG WAI KEONG MASTER ACADEMIC CLINICIAN AWARD 2021



The Duke-NUS Hall of Master Academic Clinicians recognises senior clinical faculty who have distinguished themselves in all areas of their careers. They are multi-dimensional clinicians who combine clinical mastery, exemplary standards of professionalism, leadership and outstanding academic achievement. They are consummate ambassadors for the Duke-NUS Medical School and role models for all who aspire to careers in academic medicine.

We are proud to share that our Academic Deputy Vice Chair, Clinical Professor Wong Wai Keong, Duke-NUS Medical School, Chairman, Division of Hyperacute Care, SKH; and Senior Consultant, Upper Gastrointestinal & Bariatric Surgery, SGH and SKH, was one of the eight awardees!



An inspirational close-up with our Master Academic Clinician, Clinical Professor Wong Wai Keong:

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I had never thought or dreamt of becoming an Academic Clinician. What I wanted to do when I embarked on my surgical training was just to be a competent surgeon with good surgical skills. However, during the course of my training, I met many mentors, both local and overseas, who inspired me in many ways. I admired their dedication and commitment, often working to the late hours of the day, day in and day out. They taught me the importance of research and how it can impact and influence the practice of medicine and outcome of patient care. They also showed me the importance of education in the training of future generations of doctors.

One of the biggest challenges in my career was the establishment of the General Surgery Residency Training programme, during which time the Ministry of Health announced a new directive to adopt the American training system, from the previous British system.

We had no knowledge nor experience of the American training system then. As the first Programme Director, I had to gather a dedicated team to start from scratch and build a comprehensive, structured training programme within a short period of time. In addition, we had to convince many who were initially sceptical of this new "venture". In particular, many were concerned with the impact on duty hours, as the new training system dictated that residents could not work beyond a certain number of hours for safety reasons. It was no easy task and there were many obstacles along the way. Nonetheless, with grit and determination, the team soldiered on, and with the support of senior management, we managed to pull through. I am proud that we managed to lay a good foundation for the programme.

There is no shortcut to success in whatever endeavour one embarks on. Besides hard work, dedication, commitment and determination, one has to embrace and adapt to changes in clinical practice. One also must have appetite for risk and be innovative in the pursuit of new knowledge and skills.

> Always believe in yourself and your own ability. You are more talented than you know and more capable than you imagine!

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RESIDENTS' CORNER:

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SurgeOn

GENERAL SURGERY (GS) RETREAT

The SingHealth General Surgery (GS) Residency ran its first online retreat, with a total attendance of 45 participants comprising faculty and residents, in six different teams and rooms.

The retreat focused on programme improvement and Residents' wellness, encouraging Residents to brainstorm and share their ideas during the session.



EFFORTS IN THE COVID-19 FIGHT-PERSPECTIVES FROM ENT JUNIORS

BY DR YEO WEI XIN AND DR ISABELLE JANG

The date was 8 January 2020. No, it was not when Singapore reported our first COVID-19 case. Rather, it was the MOPEX change-over date, when junior doctors mass-migrate from one hospital/department to another. Unknown to us then, this posting would turn out to be a vastly different experience to what we had expected. As juniors in ENT departments, we saw patients who presented with anosmia, helped swab patients in the emergency department, and subsequently were deployed to various sites, such as the foreign worker dormitories, Singapore Expo and D'Resort, when COVID-19 cases spiked. For those who value orderly schedules, this "chaos" was unsettling. Rosters had to be tweaked almost on a weekly basis to accommodate new deployments, and for those who remained in the hospitals, it translated to more work and responsibilities. Nevertheless, we took everything in our stride and served to the best of our abilities. Now in 2021, seeing how far Singapore has come in our COVID-19 fight, we are truly proud of what we have achieved together as one SingHealth, one Healthcare, and one Singapore.



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It was a once in a lifetime experience, learning how to react in the face of a pandemic, learning how to overcome language barriers to better meet the healthcare needs of foreign workers, and at the end of it, forging team camaraderie among fellow doctors and nurses.

Dr Sharon Soh, Singapore General Hospital ENT MO







Working in the dormitories was an eye-opening experience, from setting up a medical centre from scratch to seeing first-hand how the migrant workers lived. Working alongside many who volunteered to go into potentially infectious territory gave me confidence in our people and our nation to overcome any obstacles in our fight against COVID-19.

Dr Kevin Lim, Changi General Hospital ENT MO





Clockwise from the top left: Residents and MOs serving Avery Lodge Dormitory, Singapore Expo, Swab training at SGH, D'Resort

VIRTUAL FAREWELL FOR EX-PROGRAMME DIRECTOR, ASSOC PROF WEBER LAU



On 30 March 2021, the SingHealth Urology Residency and SGH Urology department organised an online "Farewell Party" for Assoc Prof Weber Lau, who served as the Residency Programme Director from 2013 to 2020. Assoc Prof Lau, who is currently in Australia, was able to join the party via Zoom with his family, where colleagues expressed their gratitude and well wishes. The residents also put together and shared a heartfelt video compilation. We wish Assoc Prof Lau all the best in his future endeavors; he will be dearly missed by all!

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RESIDENTS' CORNER:

SINGHEALTH SURGERY IN GENERAL SURGICAL SPECIALTIES (SIGSS) RESIDENCY PROGRAMME:

WE WELCOME 13 NEW SIG RESIDENTS—THE LARGEST INTAKE SINCE THE COMMENCEMENT OF THE PROGRAMME

CONGRATULATIONS TO

10th Intake of SingHealth Surgery in General and Surgical Specialties Residency Programme

