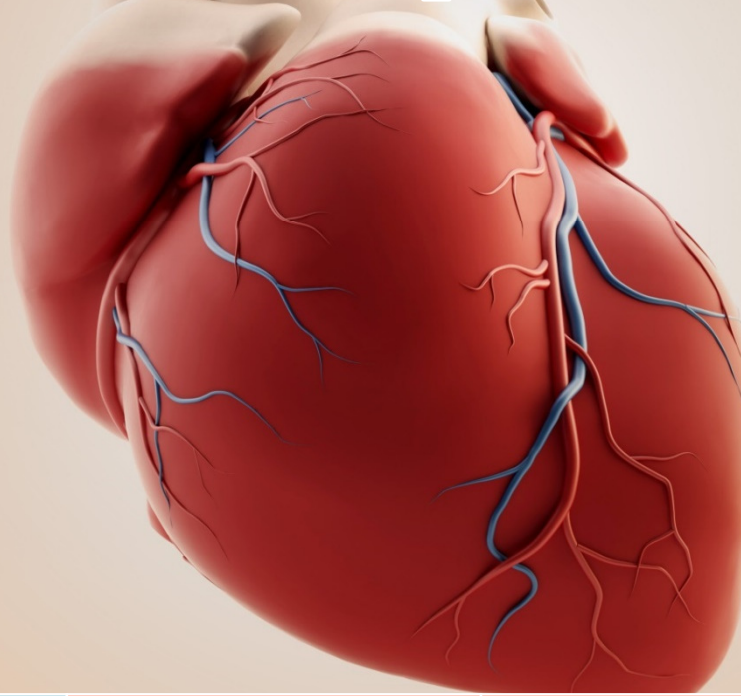




香港防癆心臟及胸病協會  
Hong Kong Tuberculosis, Chest and Heart Diseases Association

# Certificate Course on Cardiac Nursing Care

## 「心臟病護理」證書課程 for Nurses



### Date:

**30 Oct –  
11 Dec 2021 (Sat)**  
(6 modules + Exam)

### Time:

**9:00am - 12:15pm**

### Format :

**Virtual (by Zoom)**

**CNE (to be confirmed):  
18 points (Full Course)  
1.5 points (Exam)**

Date (Module)	Session 1 (1 hour)(9:00am-10:00am)	Session 2 (1 hour)(10:00am-11:00am)	Session 3 (1 hour)(11:15am-12:15pm)
30 Oct 2021 (M1)	<b>Heart Failure: Etiology and Classifications</b> <i>Dr. Katherine Fan, Deputy HCE/COS(CMU), Grantham Hospital</i>	<b>Update on Guidelines and Medical Treatment for Heart Failure</b> <i>Dr. C Y Yung, Associate Consultant (CMU), Grantham Hospital</i>	<b>Role of Nurse Specialist in Management of Heart Failure</b> <i>Ms. Chow Yee Man, Advanced Practice Nurse (CMU), Grantham Hospital</i>
6 Nov 2021 (M2)	<b>Pacemaker Essentials</b> <i>Dr. S C Leung, Associate Consultant (M&amp;G), Ruttonjee and Tang Shiu Kin Hospitals</i>	<b>Mode of Pacemaker</b> <i>Ms. Amy Cheng, Cardiac Device Specialist</i>	<b>Post Pacemaker Implantation ECG Rhythm Analysis</b> <i>Ms. Ho Ying Ki, Esther, Advanced Practice Nurse (M&amp;G), Ruttonjee and Tang Shiu Kin Hospitals</i>
13 Nov 2021 (M3)	<b>Cardiac Resynchronization Therapy for Heart Failure Patient</b> <i>Dr. Katherine Fan, Deputy HCE/COS(CMU), Grantham Hospital</i>	<b>IABP &amp; ECMO Support for Heart Failure patient</b> <i>Ms. Chang Mei Yiu, Advanced Practice Nurse(CMU), Grantham Hospital</i>	<b>Heart Transplant and Mechanical Circulatory Support for End-stage Heart Failure</b> <i>Dr. K L Wong, Associate Consultant (CMU), Grantham Hospital</i>
20 Nov 2021 (M4)	<b>Post PCI Medication Highlight</b> <i>Dr. Thomas Prabowo Tunggal, Specialist in Cardiology, Hon. Clinical Assistant Professor (HKU), Hon. Consultant (RTSKH) &amp; Council Member, Hong Kong College of Cardiology</i>	<b>Nurse Management Immediately after PCI</b> <i>Mr. Cheung Man Chung Hal, Advanced Practice Nurse (ICU), Ruttonjee and Tang Shiu Kin Hospitals</i>	<b>Cardiac Rehabilitation</b> <i>Mr. Chan Pak Ho, Advanced Practice Nurse (M&amp;G), Ruttonjee and Tang Shiu Kin Hospitals</i>
27 Nov 2021 (M5)	<b>Updated Management of AF</b> <i>Dr. Ian W H Ling, Resident (Med), Queen Mary Hospital</i>	<b>Current Structural Heart Intervention/Management</b> <i>Dr. Andrew K Y Ng, Associate Consultant (CMU), Grantham Hospital</i>	<b>Nurse Management of AF</b> <i>Ms. Wong Bik Yi, Advanced Practice Nurse (CMU), Grantham Hospital</i>
4 Dec 2021 (M6)	<b>New Medical Direction of Acute Coronary Syndrome (ACS)</b> <i>Dr. Kevin Lee, Resident Specialist (M&amp;G), Ruttonjee and Tang Shiu Kin Hospitals</i>	<b>Cause of ACS</b> <i>Dr. C Y Yung, Associate Consultant (CMU), Grantham Hospital</i>	<b>Nurse Management of ACS</b> <i>Mr. Sze-to Tak Leung, Deputy Ward Manager (M&amp;G), Ruttonjee and Tang Shiu Kin Hospitals</i>
11 Dec 2021	<b>Exam (1.5 hours – MC Questions) (Optional) (10:00am - 11:30am)</b>		

General Enquiry: 2834 9333 Website: [www.antitb.org.hk](http://www.antitb.org.hk) (Upcoming Event)



**HONG KONG TUBERCULOSIS, CHEST AND HEART DISEASES ASSOCIATION**  
**香港防癆心臟及胸病協會**

## Certificate Course on “Cardiac Nursing Care” for Nurses

### Objectives

- To strengthen, update and develop knowledge of nurses on the topic of Cardiac Nursing Care.
- To enhance the skills and technique in daily practice.

### Targets

Nurses from all aspects

### Contents

Date (Module)	Session 1 (1 hour)(9:00am-10:00am)	Session 2 (1 hour)(10:00am-11:00am)	Session 3 (1 hour)(11:15am-12:15pm)
30 Oct 2021 (M1)	Heart Failure: Etiology and Classifications	Update on Guidelines and Medical Treatment for Heart Failure	Role of Nurse Specialist in Management of Heart Failure
6 Nov 2021 (M2)	Pacemaker Essentials	Mode of Pacemaker	Post Pacemaker Implantation ECG Rhythm Analysis
13 Nov 2021 (M3)	Cardiac Resynchronization Therapy for Heart Failure Patient	IABP & ECMO Support for Heart Failure patient	Heart Transplant and Mechanical Circulatory Support for End-stage Heart Failure
20 Nov 2021 (M4)	Post PCI Medication Highlight	Nurse Management Immediately after PCI	Cardiac Rehabilitation
27 Nov 2021 (M5)	Updated Management of AF	Current Structural Heart Intervention/Management	Nurse Management of AF
4 Dec 2021 (M6)	New Medical Direction of Acute Coronary Syndrome (ACS)	Cause of ACS	Nurse Management of ACS
11 Dec 2021	Exam (1.5 hours – MC Questions) (Optional) (10:00am - 11:30am)		

### Mode of delivery

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

### CNE points

Participants can be accredited **3 points of Continuing Nursing Education** for each module (**Full Course: 18 CNE points, Exam: 1.5 CNE points**) (to be confirmed)

### Assessment Method

A Certificate of Achievement will be issued to participants who registered “FULL COURSE”, attended at least 5 out of 6 modules and *passed the exam*. (Passing mark: 60%)

A Certificate of Completion will be issued to participants who registered “FULL COURSE”, attended at least 5 out of 6 modules without *exam / failed the exam*.

A Letter of Attendance will be issued to participants who attended individual module(s). Participants who registered any 5 of the modules will be issued with separate Letter of Attendance only.

### Course Fee

	Full course with Exam	Full course without Exam	Each Module
Non-member	HK\$ 1,900	HK\$ 1,800	HK\$ 300
Member of Centre	HK\$ 1,600	HK\$ 1,500	HK\$ 250

### Registration Method

Please mail completed form with payment (**cheque only**) to: **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 “Hong Kong Tuberculosis, Chest and Heart Diseases Association”**)

**No on-site registration with cash.**

### Number of Participants

Limited quotas, first come first served.

### Notes

Softcopy of training materials (if any) will be sent to relative participants before class.

### Documentation

Official receipt, certificate and attendance record will be issued by post after the **completion of the course**.



HONG KONG TUBERCULOSIS, CHEST AND HEART DISEASES ASSOCIATION  
香港防癆心臟及胸病協會

Certificate Course on “Cardiac Nursing Care” for Nurses

Registration Form

Please ✓ your choice (Deadline of Application: 20 Oct 2021)

	FULL Course <u>With Exam</u> (11 Dec)	FULL Course <u>Without Exam</u>	30 Oct (M1)	6 Nov (M2)	13 Nov (M3)	20 Nov (M4)	27 Nov (M5)	4 Dec (M6)	Total HK\$
<u>Non-member</u> of our Centre	<input type="checkbox"/> HK\$ 1,900	<input type="checkbox"/> HK\$ 1,800	<input type="checkbox"/> HK\$ 300	<input type="checkbox"/> HK\$ 300	<input type="checkbox"/> HK\$ 300	<input type="checkbox"/> HK\$ 300	<input type="checkbox"/> HK\$ 300	<input type="checkbox"/> HK\$ 300	
<u>Member*</u> of our Centre	<input type="checkbox"/> HK\$ 1,600	<input type="checkbox"/> HK\$ 1,500	<input type="checkbox"/> HK\$ 250	<input type="checkbox"/> HK\$ 250	<input type="checkbox"/> HK\$ 250	<input type="checkbox"/> HK\$ 250	<input type="checkbox"/> HK\$ 250	<input type="checkbox"/> HK\$ 250	

\*You may call 2834 9333 to check your membership status if you are unsure.

Personal Particulars (Compulsory)

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

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

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

Institution: \_\_\_\_\_

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

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

**{Please fill in email address for receiving our confirmation and Zoom link}**

**{Private email address is recommended, HA email address may be blocked}**

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

**{Please provide your mailing address for receiving attendance certificate & receipt}**

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

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

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

**[A separate cheque for membership fee is required for participants who want to entitle a discounted price of the course]**

*All personal information will be used for records only.*



**Hong Kong Tuberculosis, Chest and Heart Diseases Association  
Peggy Lam Health Promotion and Education Centre**

Address: G/F., 266 Queen's Road East, Wan Chai. Tel: 2834 9333 Fax: 2834 5522 Email: hpc@antib.org.hk

**Membership Application/ Renewal Form**

Please fill in with block letters and “✓” where appropriate. Please refer the membership regulations to the back page.

**Application category:**     New membership     Renewal

Official Use Only	
Fee: _____	
<input type="checkbox"/> Cash	<input type="checkbox"/> Cheque _____

**Personal Information (Mandatory)**

Name in Chinese \_\_\_\_\_ Name in English \_\_\_\_\_  
Last name                      First name

Year of Birth \_\_\_\_\_ Gender \_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_  
(E-mail is for receiving the Centre's newsletters and latest activities updates)

Occupation (Optional)     Nurse     Housewife     Retired     Student     Others ( \_\_\_\_\_ )

Mailing Address (Optional)  
 \_\_\_\_\_  
 \_\_\_\_\_

Membership category and fee			
<input type="checkbox"/> Life member	HK\$900	<input type="checkbox"/> Senior (aged 65 or above) / Student	HK\$70
<input type="checkbox"/> Ordinary member	HK\$150		

I have read the Personal Information Collection Statement that the personal data provided by me are mainly for use within the Hong Kong Tuberculosis, Chest and Heart Association - Peggy Lam Health Promotion and Education Centre. The information provided herein will only disclose to parties where I have given consent to such disclosure or where such disclosure is allowed under the Personal Data (Privacy) Ordinance.

Signature of applicant \_\_\_\_\_ Date \_\_\_\_\_

Organisation Chop (**Only for application of institutional member**) \_\_\_\_\_

**Approval (For official use)**

Approved by: \_\_\_\_\_ (Executive Secretary)                      Date: \_\_\_\_\_  
Signature

Receipt No.: \_\_\_\_\_                      Membership No.: \_\_\_\_\_

**Temporary Receipt (For official use)**

Received date: \_\_\_\_\_ Fee: \_\_\_\_\_     Cash     Cheque \_\_\_\_\_

Name of applicant: \_\_\_\_\_ Checked by (Staff signature and Centre chop): \_\_\_\_\_

## Membership Application

### **A. Personal Information Collection Statement**

Hong Kong Tuberculosis, Chest and Heart Diseases Association (The Association) is committed to protect your personal data (the Data). This Personal Information Collection Statement is to notify you of certain matter on or before collecting data from you in compliance with the Personal Data (Privacy) Ordinance of the Hong Kong SAR. We limit the collection and use of the Data to the specific information we need to administer our services and provide highest quality services to you.

Your personal data is collected by the Association for the **purposes** of:

1. Processing, administering and communicating with you regarding any activities you joined, collecting your opinions and in response to any queries or complaints submitted by you;
2. conducting research and generating statistics to enhance the Association's services and activities;
3. informing you of the latest services, campaigns, activities, recruitment of volunteers, fundraising appeals and issuing receipts and certificates relating to the Association via direct mail, email, phone and SMS;
4. complying with applicable laws or regulations.

### **Mandatory Information**

The provision of the Data is voluntary. However, if you choose not to provide the Data to us, we may not be able to supply you with the relevant information or services or to process your request.

### **Transfer and Disclosure**

Subject to your consent, the Association shall only transfer and disclose your personal data to service providers of the Association. The Association does not provide your personal data to any third party for the purposes of enabling that third party to market its own products or services to you.

### **Retention of Personal Data**

All personal data will be collected and stored at the office on the ground floor of the Association for a reasonable period in accordance with our internal policy. Only authorized employees will be allowed to access relevant information.

### **Access and Correction of Data**

You have the right to request access to or correction of your personal data held by the Association. If you wish to access or correct your personal data, then please contact our staff at 2834 9333 or hpc@antitb.org.hk.

### **B. Membership regulations**

1. The expiry date of all kinds of memberships is on 31 December of the year of application.(Except for Life member)
2. Membership fee is not refundable. (Except for those applications rejected by the Centre)

### **C. Methods of application**

1. In person: Please submit the completed application form with membership fee to the Centre during the opening hours, i.e. 9:00 a.m. - 12:30 p.m. and 2:00 p.m. - 5:00 p.m. For the application of senior member, please show your ID card to the staff for checking.
2. By mail: Please return the completed application form with a crossed cheque payable to “**Hong Kong Tuberculosis, Chest and Heart Diseases Association**” to the Centre. For the application of senior member, please send with a copy of your Senior Citizen Card for checking. Cash is not accepted by mail. Address: 266 Queen's Road East, Wan Chai, Hong Kong

### **D. Entitlement of member**

1. Enjoy special rates for health talks and workshops.
2. Enjoy some health checks including blood pressure, BMI and body fat ratio measurement and health equipment free of charge.
3. Access to books, magazines, journals and computer on searching health information free of charge.
4. Receive the association's newsletter, most updated information of workshops and activities.
5. Enjoy a discounted price for Chinese Medicine consultation in HKTBA Chinese Medicine Clinic

\*\*The above regulations are subject to change without any prior notice.