

# Hong Kong Society Emergency Medicine & Surgery



香港急症醫學會  
十週年紀念冊

*Anniversary 1995*



**The Album is not only a Collection of the Past,**



**but a Document of Our Dreams that will come true.**



## Message from President

*Dr. Wong Tai-wai*

**President 1993-1995**

**Hong Kong Society for Emergency Medicine & Surgery**

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It was 1985 when I first set foot in the Accident and Emergency Department of Kwong Wah Hospital as Medical Officer. Although I had worked in the AED of United Christian Hospital for the previous three months, Emergency Medicine was not the specialty I aspired to at that time. This eventually became a very important turning point in my career. When I began as a junior officer in Accident & Emergency Department, there was practically no formalised training programme. Coaching by senior staff was minimal and we basically had to fend for ourselves all the time. In the eyes of many colleagues, casualty officers were no more than just admission officers.

In these ten years, Emergency Medicine has grown a lot and flourishes. The formation of the Society a decade ago is an important catalyst to spark new changes in the local emergency medicine scene. Through the concerted efforts of many dedicated colleagues, more structured training programmes are now available for our trainees. The Society has now published three training manuals on core knowledge, practical procedures and emergency drug treatments. We also have our own Journal which serves as a forum to exchange our experience and to build our own knowledge base for the practice of Emergency Medicine. We have constructed an infrastructure over the decade to cultivate a new breed of doctors specialising in Emergency Medicine.

Time is ripe for us to mature into an independent specialty. Two decades ago, Emergency Medicine was recognised in the States as a Primary Board. The Fellowship examination in Accident & Emergency Medicine of Edinburgh was first organised in 1983. A Faculty of Accident & Emergency Medicine was formed in 1993. With the establishment of the Hong Kong Academy of Medicine in 1993, a structure now exists for the accreditation of training of specialists. In the last two years, I have approached the Academy on behalf of the Society on the possibility of setting up an independent College of Emergency Medicine under the Academy of Medicine. With the help and advice by Professor David Todd and his colleagues in the Academy, we are in the process of incorporating our own College with a view of joining the Academy next year in 1996. This certainly will mark a new era in Emergency Medicine in Hong Kong.

The Society, however, still will have an important role to play in future. It will continue to pool local talents to provide better training for doctors, nurses and prehospital emergency health-care providers. The past ten years have been successful and fruitful for the Society and I hope the seeds we have sown will bring us abundant harvest into the next millennium.

## Message from President

*Dr. Chung Chin-hung*

**President 1989-1993**

**Hong Kong Society for Emergency Medicine & Surgery**

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Under the leadership of the Hong Kong Society for Emergency Medicine & Surgery, the past 10 years witnessed a dramatic development of the Specialty of Emergency Medicine in Hong Kong.

Ten years ago, casualty officers were nicknamed by colleagues of other specialties as 'admission officers'. They were regarded as doctors with very superficial medical knowledge, capable of treating only minor ailments. A high percentage of patients were admitted into hospital, resulting in overcrowding and camp-beds. The admission rate was at one time as high as 50%.

With the improvement of A&E supervision and training, clinical standards have been substantially raised. Sophisticated equipment have been introduced and high technical skills have been implemented. Upper endoscopy and Ultrasonography are now commonly performed in A&E Departments. Thrombolytic therapy is widely employed to treat patients with acute myocardial infarction in A&E Departments.

Reduction of minor fractures and plaster fixation are standard A&E practice nowadays. Admission rate has now dropped to 25% for the territory as a whole. In fact, colleagues of other specialties are now complaining that our admission criteria are too strict.

During the same period, there were also active involvement in prehospital emergency care and disaster preparedness and response. As a result, disasters have been dealt with to the satisfaction of the general public.

Client need and caring attitude have not been forgotten. Among quality improvement programs are the introduction of Patient Satisfaction Survey and Patient Counselling Services in A&E Departments. Apparently, 'high tech., high touch' is the ultimate goal.

The past 10 years is best described by quoting the following statement: **'We are not at the beginning. We are not at the end. We are at the end of our beginning.'**



## Message from President

*Dr. Leung Man-po*

**President 1985-1989**

**Hong Kong Society for Emergency Medicine & Surgery**

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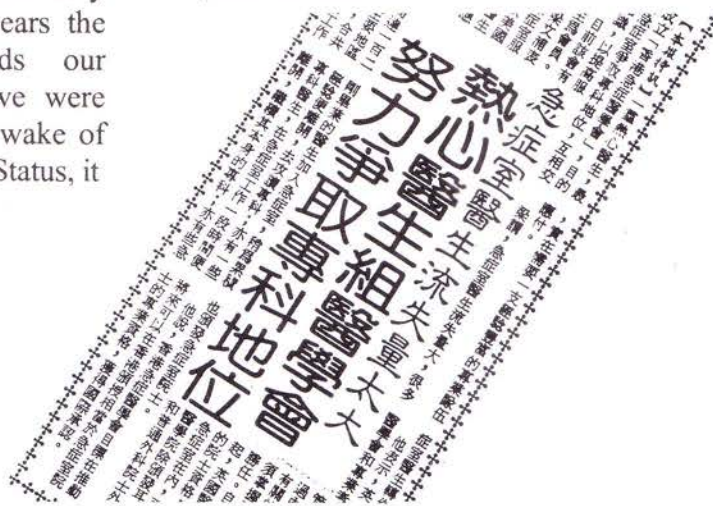
The Hong Kong Society for Emergency Medicine & Surgery was inaugurated in 1985 to be a Forum for Health Workers in the field of Accident & Emergency Medicine. We were a very small group at that time and the active members were even smaller in number. With goodwill, co-operation and our innate nature of flexibility and innovation, however, we have come a long way towards maturity and securing respect from our colleagues in the medical field.

At its infancy, it was only natural to adopt a cautious approach in the our undertakings. Nevertheless, the first Council is to be applauded for their foresight in incorporating nurses as an integral part of our Society. We have opened up all academic activities to our nursing colleagues from the very beginning. Throughout the years the support of nurses towards our activities has proven that we were right in that direction. In the wake of our evolution to a Collegiate Status, it

is my fervent wish that this fine tradition could be maintained and propagated.

The first Council, while cautiously guiding the Society, had taken some initiatives of note. These included the provision of professional training to other Health Care workers and revenue generating activities, which had placed the Society in a sound financial state and rendered our members the expertise in organization to undertake with confidence more fruitful ventures in the years ahead.

May I offer my warmest congratulations to the HKSEMS on her Tenth Anniversary and wish her continuous success and growth in the years to come !



## CH Lee

## HH Yau

## MP Leung

## MP Leung



## WK Tung



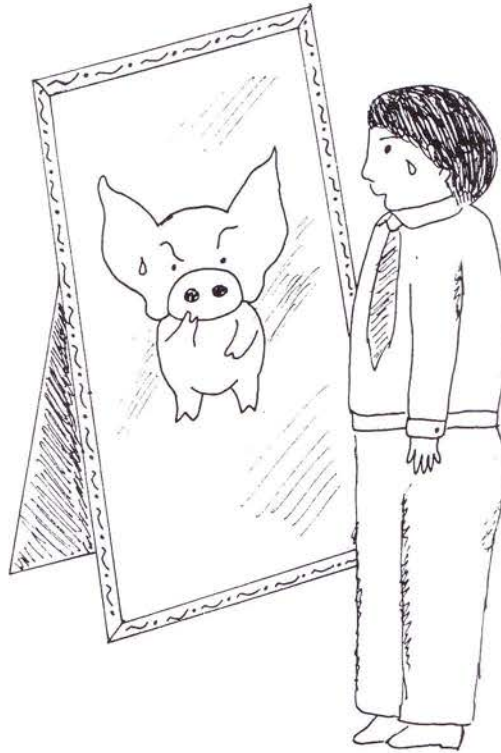
## The Ultimate President - *MESSIAH*

The President  
must not have

Acquired  
Intelligence  
Deficiency  
Syndrome

Has the

- Eagle's eyes
- Lion's heart
- Lady's hands

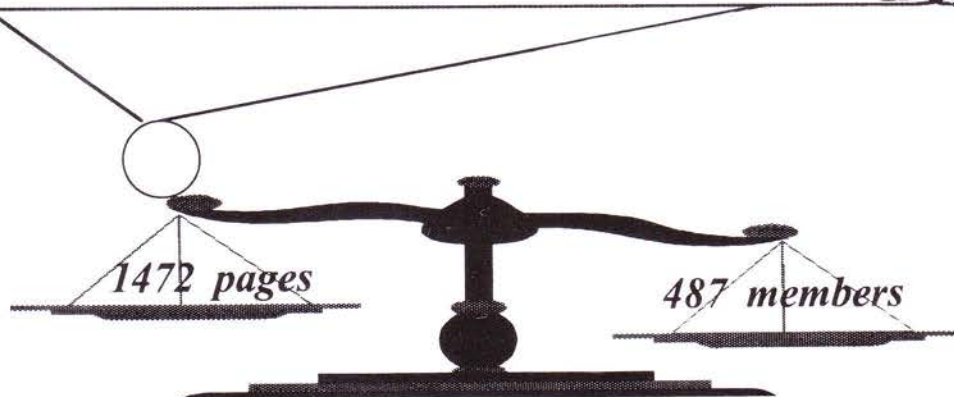
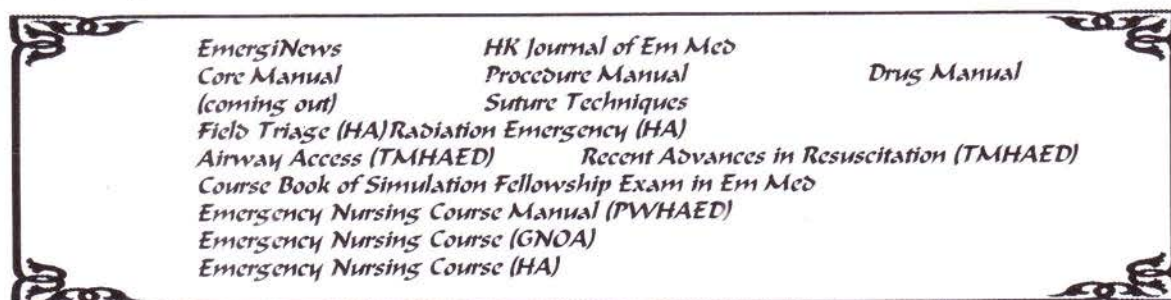


高  
瞻  
遠  
觸

- Charismatic as Richard Gear or Madonna
- Strong as Keanu Reeves or Wonder Woman
- Bright as Einstein
- Kind as Lady Diana
- Generous as the Royal Hong Kong Jockey Club

*President, I adore you!*

## Major Publications



### Major Training Partners :-

- Hong Kong Hospital Authority (HA)
- Justice Institute of British Columbia of Canada (JIBC)
- Ambulance Headquarters of Fire Services Department of Hong Kong
- Government Nursing Officer Association (GNOA)

## Best Article Awards of Hong Kong Journal of Emergency Medicine 1994



**Original : Champion** - A Retrospective Study of Patients with Gastrointestinal Foreign Bodies in an Accident & Emergency Department *Dr. KL Chung, Dr. CW Kam, Dr. CM Lo & Dr. HH Yau*

**First Runners-up** - Out-patient Management of Patients with Recent Stroke *Dr. CH Lit & Dr. LH Chiu*

**Case : Champion** - Spinal Cord Injury without Radiographic Abnormality *Dr. YT Wong*

**First Runners-up** - Posterior shoulder dislocation - A Diagnostic Pitfall in Emergency *Dr. CC Wong & Dr. YT Wong*

**Review : Champion** - Initial Management of severe trauma *Dr. CW Kam*

**First Runners-up** - Management of Fractures in Children in Accident & Emergency Practice *Dr. CP Ho*



## Major Emergency Training Institution & Activities

**A&E TRAINING CENTRE IN TANG SHIU KIN HOSPITAL** was opened on 25 Nov 1994. Mr Tang, the Secretary for Health & Social Welfare, Dr. EK Yeoh, the Chief Executive of HA, Dr. Cathleen So, the Deputy Director of Operations of HA & Dr CH Chung, the Hospital Chief Executive officiated at the Opening Ceremony.

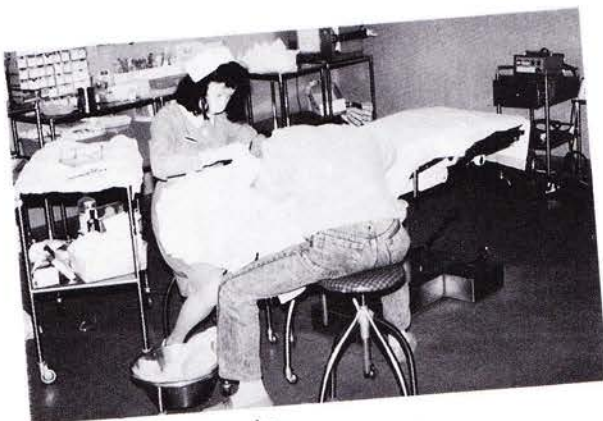
**ACLS, FLTM, BCLS, BCLS-AED, BTLS, NEATS, EMAIL (JIBC, FSD & HA), CAM, SUTURE, INTRAVASCULAR ACCESS, EMERGENCY NURSING COURSE (HA, GNOA, PWHAED)** are the popular courses.



The heart simulator drives the participant into tachycardia.



Push up & don't break the teeth!



At home, I sew my socks.  
At work, I repair the wound.  
After office, I mend the broken heart.



Mom, I got it!



The smiling graduates of the First Emergency Nursing Course of HA

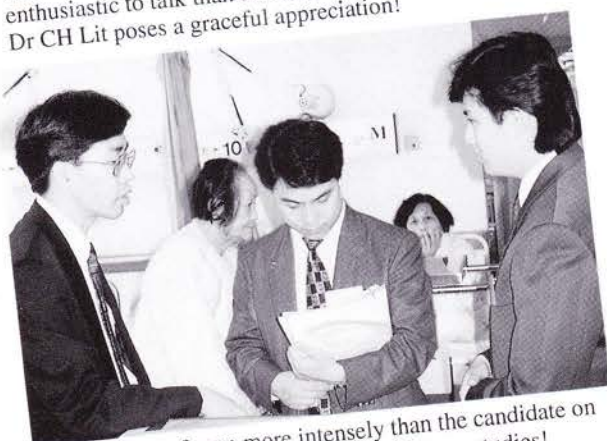


## SIMULATION FELLOWSHIP EXAMINATION IN EMERGENCY MEDICINE

18 - 20 October 1995



The excited examiner, Dr FL Lau, seems to be more enthusiastic to talk than the candidate. Sitting next to him, Dr CH Lit poses a graceful appreciation!



The examiners frown more intensely than the candidate on the spot. Thanks mom, I have completed my studies!

*Accreditation Examination is a Facilitator for Continuing Medical Education and a Continuous Quality Improvement process.*

*A Candidate who performs well in examination is not necessarily be a good doctor but at least possesses an important quality to become one !*

*We serve and we care.*



Dr CL Lai, Reader in Medicine of Queen Mary Hospital is offering a hard but meaningful time to the candidate.



The happy candidates & the joyous examiners



The Examination Faculty relaxes after the long day!



## Major Emergency Academic Meetings in Hong Kong

**WORLD CONGRESS ON EMERGENCY & DISASTER MEDICINE 1989** - coorganized by HKSEMS at International Meeting in Hong Kong Convention Centre

**SCIENTIFIC MEETING OF HKSEMS DEC 1993** on Resuscitation & Advanced Treatment for AMI

**AIRWAY ACCESS SYMPOSIUM 1994** (TMHAED)

**SYMPOSIUM ON RECENT ADVANCE IN RESUSCITATION 1995** (TMHAED)

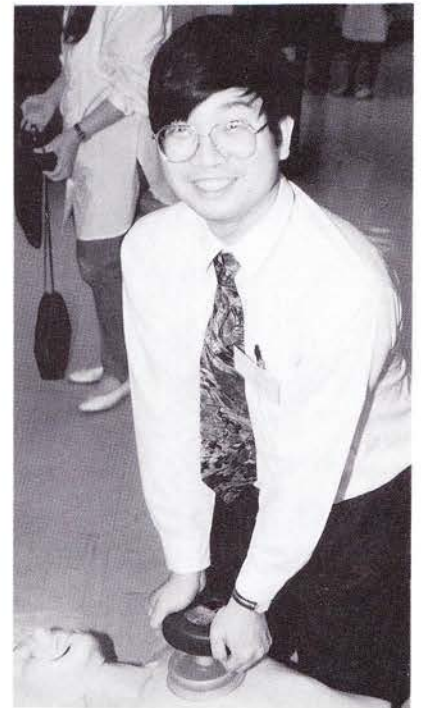
**JOINT CLINICAL MEETINGS & RECENT ADVANCES SEMINARS**



Firm Intraosseous Needle Insertion



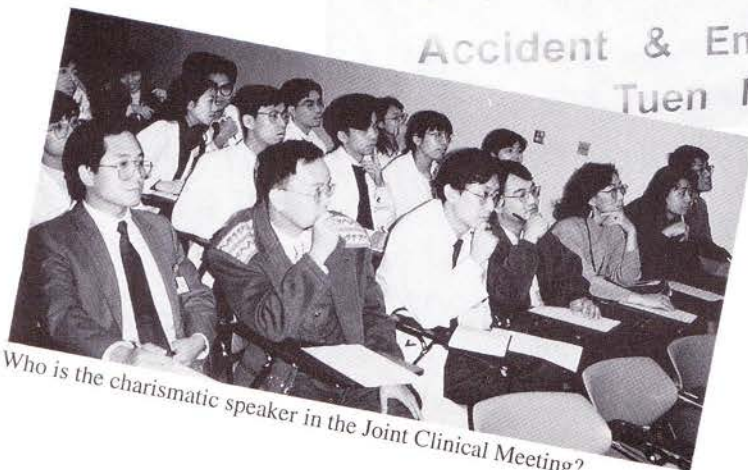
Bronchoscopic Intubation



Press & pull hard with the suction ECM!



**AIRWAY ACCESS SYMPOSIUM**  
Accident & Emergency Department  
Tuen Mun Hospital



Who is the charismatic speaker in the Joint Clinical Meeting?



The most enjoyable Scientific Meeting is on Nutrition



# Emergency Career

## LIVING IN HONG KONG

**Dr Ong Kim Lian**

If I have to describe my three and half years in Hong Kong in one word, that would be "Fast". "Fast" because of the fast pace of life in Hong Kong. "Fast" as it is the way many locals go about handling their affairs - it makes me remember a Cantonese saying "You will obtain it when your hands are fast and lose it if otherwise." This word is perhaps most

appropriate to describe the speed in which time passes in the last three years. I feel as though I have landed in Hong Kong International Airport only about a week ago.

I started my working life in Hong Kong as a medical officer in the Accident and Emergency Department in the Prince of Wales Hospital two days after I landed in Hong Kong. There is hardly much time to adjust to a place where I have only visited briefly for my job interview a couple of months earlier. As such there was the

usual anxiety of adjusting to the new life ahead with hardly any support.

Any worries I had about adjusting to the work and lifestyle was soon dispelled and forgotten as I soon manage well with help from the new friends I made. I must be one of those lucky ones to adjust to both work and daily life here fairly quickly. In fact, other than my accent and occasional use of "Singlish" in my spoken English, there is little clue to the fact that I

have only been here in the past few years as I speak Cantonese with a fluency almost matching that of a local.

In the short period of time that I have been here, I have noticed the enormous amount of changes in field of Accident and Emergency in Hong Kong and it is most heartening to see that they are only for the better and any person involved in the A & E service would have noticed this. I am certain that the Hong Kong Society for Emergency Medicine and Surgery must have come a long way since its inauguration ten years ago although I did not witness its entire history. I am glad to be able to witness the significant event in the history of the Society - its tenth anniversary.

If I were asked to describe my feeling as a foreigner working here - "foreign labour" as my friends used to tease me, I will only say that the life and work experience here in past few years makes all the sacrifice of being away from a familiar place and family worthwhile.

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### STRATEGIC PLANNING WORKSHOP FROM HOSPITAL TO GOLD COAST TO..... A&E DEPARTMENT PRINCESS MARGARET HOSPITAL

#### PHILIP CHOI

The A&E Department of Princess Margaret Hospital is going to organize its Third Strategic Planning workshop in January 1996. The tentative venue will be most probably at Hong Kong Parkview. The main purpose of the workshop is to facilitate COS,





members of the Clinical Management Team and other staff representatives to clarify their vision, understand the changing environment and the impact on services and build up commitment among managers and staff in pursuing a shared mission, common objectives, strategies and work plan.

Early on 21 January 1994, this department successfully conducted its first strategic planning workshop which was the first of its kind to be held at a department level. Previous strategic planning activities had been at hospital level only.

Last year, we changed the venue of this workshop to Gold Coast Resort. Similarly, under the guidance of three external facilitators - Mr. S.P. Chang, Executive Manager (Allied Health), and former Understudy Member Mr. Gordon Mak and Miss. Grace Yuen - 32 of the department's staff members participated in group discussions and other activities. Participants were encouraged to share openly their concerns with other co-workers and to identify critical issues which affect the department.

At the conclusion of the workshop, all participants worked together to formulate long term and short term strategies to improve the quality of services and to meet the needs of the community.

From the past two years' experience, we find that strategic planning workshop is essential and valuable to the management of this department. It is because it not only creates common goals for us to work towards, but also helps us to realize that the department's success or failure is not only the responsibility of its management. It is one which rests on everybody's shoulders.

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## UCH AED - the Past and the present

### Dr. K.M. Li

While having the joy of commemorating the 10th Anniversary of HKSEMS, the Accident and Emergency Department of United Christian Hospital is also sharing the happiness of the opening of our new extension. The old department after serving the people of East Kowloon for more than 22 years, had finished its historical responsibility and going to be rebuild at the end of this year. With the new, improved, spacious environment and the updated equipment and facility, we pledge to continue our quality emergency service to our patients.

However, at the same time, we suffer from a great loss from our department - the retirement of our COS, Dr. Matthew Kwa. Dr. Kwa who has special interest in disaster management has served as emergency physician for more than ten years and contributed a lot to the improvement and advancement in the



management of civil disaster. His presentation and publication in this area attracted a lot of international recognition for our Society. He also actively involve in the activity of the HKSEMS and had been the vice-president of the Society. Although we feel sorry about his leave but we promise to continue making HKSEMS grow and glow in the future and awaiting for the 20th Anniversary.



# 英雄、時勢；成敗得失

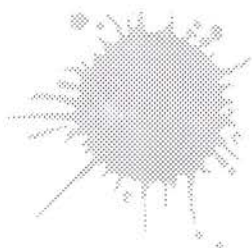
小草



「滾滾長江東逝水  
浪花淘盡英雄  
是非成敗轉頭空  
青山依舊在  
幾度夕陽紅」

白髮漁樵江渚上  
慣看秋月春風  
一壺濁酒喜相逢  
古今多少事  
盡付笑談中」

三國演義是一個動盪的年代，所謂英雄、時勢，也正好是醫管局成立後，全港各急症室所經歷的一幅寫照。



自醫管局成立以後，全港十四間急症室的服務人次，由九一年至今，已經增加一倍；箇中原因，除了是市民對急症服務的需求不斷增加，部份原因亦是出於醫管局為了增加市場競



爭力，以來者不拒為宗旨，加上優質服務的推行，遂令急症服務的要求，日益增加。正因為醫療市場有供求平衡的效應，同期間醫管局管理階

層的架構又進行重組；於是乎各大醫院的急症室出現群雄崛起，割據山頭的現象。

醫管局日求改善管理，所謂「山頭主義」任才善用本是無可厚非的事情。可是僧多粥少，在進昇的過程中，造成劇烈競爭的局面是勢所難免。然而若在甄選過程中掉以輕心，被一些人為因素及政治性考慮所阻礙，造成惡性競爭，以至最後人才流失，人非善用，實在是可悲的事情，至終是事倍功半，招至損失。

「千馬常有而伯樂不常有」，當然，箇中亦有以知能善用的賢者；但不可忽略是在面對及處理甄選過程及手法是非常重要的，進昇者當以經驗及管理概念為基要，但被選者若能以德服眾，以能服人，更能使升職一事成為楷大歡喜的事情，繼而成為部門的榮耀。



相反，若在甄選過程中，被選者既非眾望所歸，而管理層又未善於向部門及下層作合理分析及處理，最後祇會引人話柄，上下不同心，部門便難於有進步。其中最差更是上司、下層一旦因進昇及處理不公平而反目，實在是一件可悲的事情。

工作在人生中雖然重要，但畢竟祇是人生經驗的一個階段，無論是上司、下屬、同事，也可算是朋友一場；就讓詩人的情懷，薰陶大家的胸襟，成敗已不再是英雄，有日大家雖不再是同事，仍可以「一壺濁酒喜相逢，論盡古今，笑談得失成敗」，那便是人生中最寶貴的事情，乎復何求。

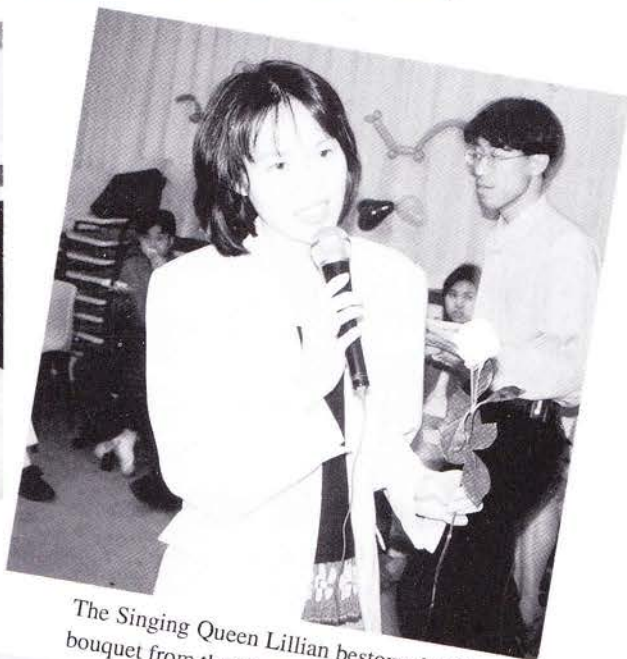




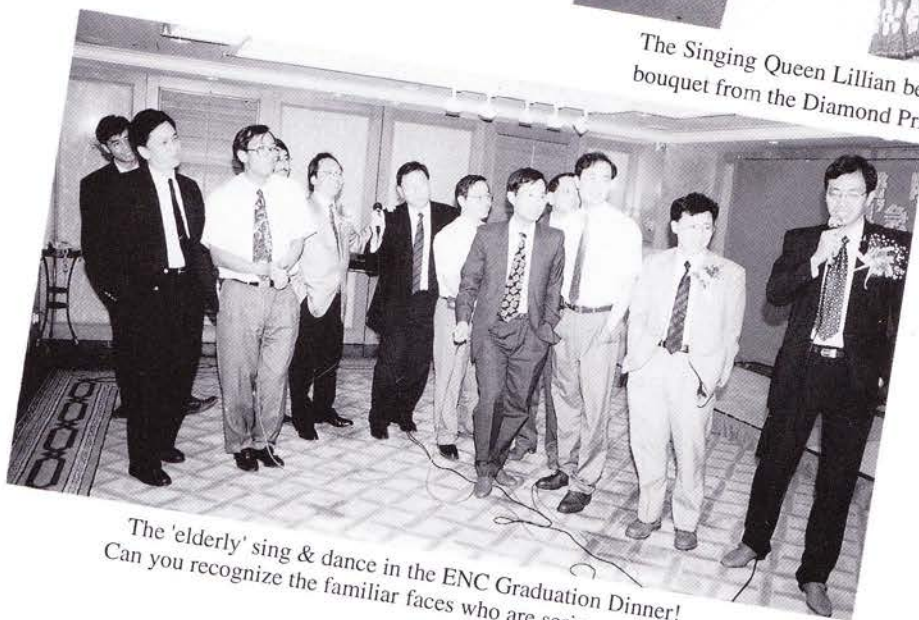
## SOCIAL ACTIVITIES AMONG MEMBERS



Halloween - Have a nice time with the Mr Vampire!



The Singing Queen Lillian bestowed with bouquet from the Diamond Prince



The 'elderly' sing & dance in the ENC Graduation Dinner!  
Can you recognize the familiar faces who are serious at work?



I am the Phantom of The Karaoke!



Dinner gathering is a 'must' after a long day.





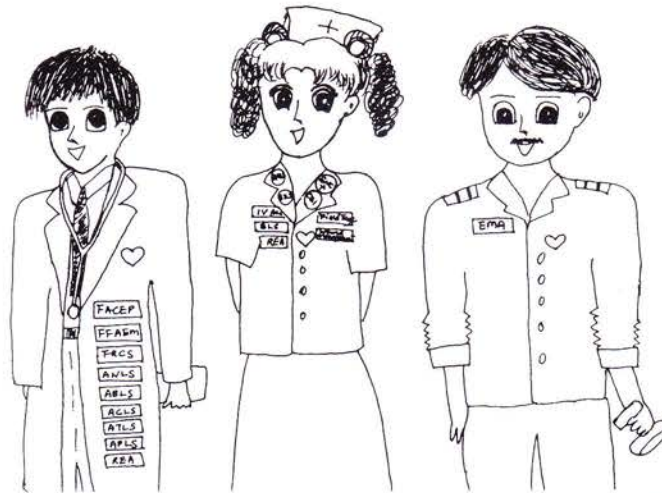
White for regular duties



Red for Emergency Team

## ***ER MODEL STAFF UNIFORM***

Smart looking with professional appeal to the customers



Comfortable not just for working but sporting, sleeping & dining !

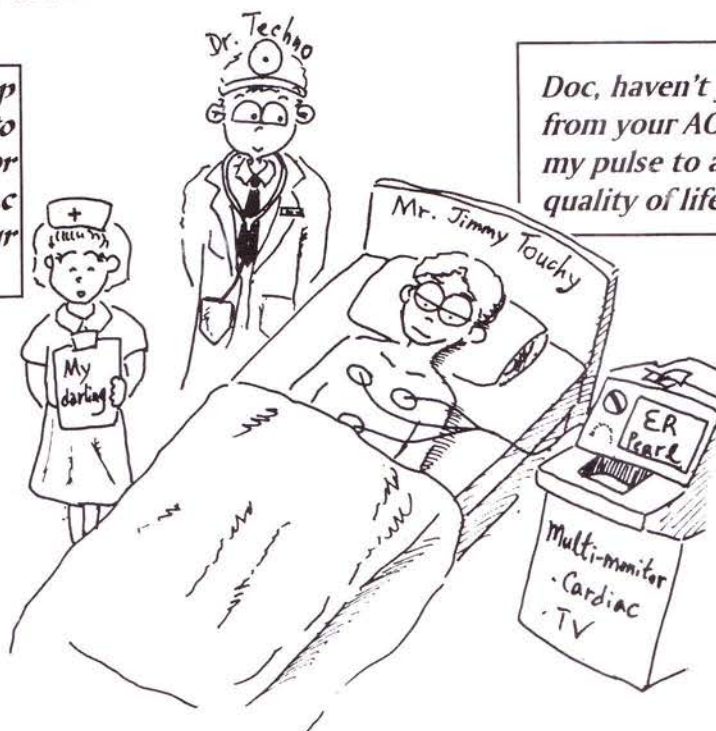


Green protects against infection & radiation contamination



## Hi Tech, Hi Touch

*Jimmy, it time to stop watching the ER & to switch the monitor back to the cardiac mode to check your heart rhythm!*



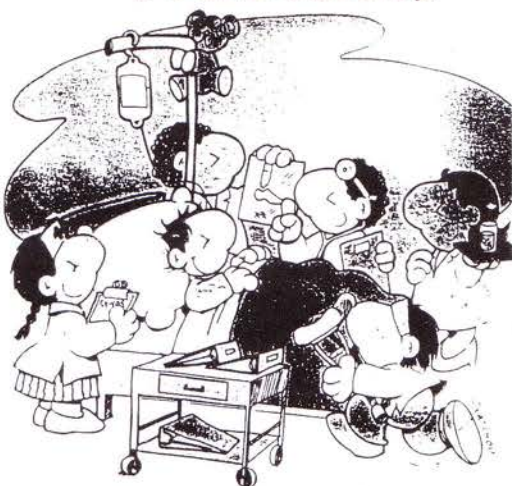
*Doc, haven't you leaned from your ACLS to touch my pulse to assess my quality of life?*

## Dreams that come true

Dr. SH Yip

I had toured with two Governors and many visitors to our AED. I used to remark that the best dream of all was to knock down the old AED and turn it to a new one.

## TOGETHER



## WE MAKE THE DIFFERENCE

Thank God! The dream now comes true. The new AED will be opened, tentatively on 12th December 1995. The plan was drafted in only three days and everything wanted was there, including a Central Working Station and a Resuscitation Room with Ceiling Mount X-Ray machine.

Deep in my heart and well expressed to everyone is the ultimate dream of a world standard AED with a team of well trained, qualified and dedicated staff. The dream will come true in next 5 years.

I dream to be a very competent emergency physician. I also dream that the transition in 1997 to be smooth and Hong Kong continues to be stable & prosperous. I get many dreams and so I live.

## The Future Emergency Warrior - EMERGENTIST

Robot Interior  
Design

Flawless Live  
Tissue of Fur  
Covering

Central  
Processing  
Unit - 986

RAM - 32 MB  
Hard disk -  
2000 MB

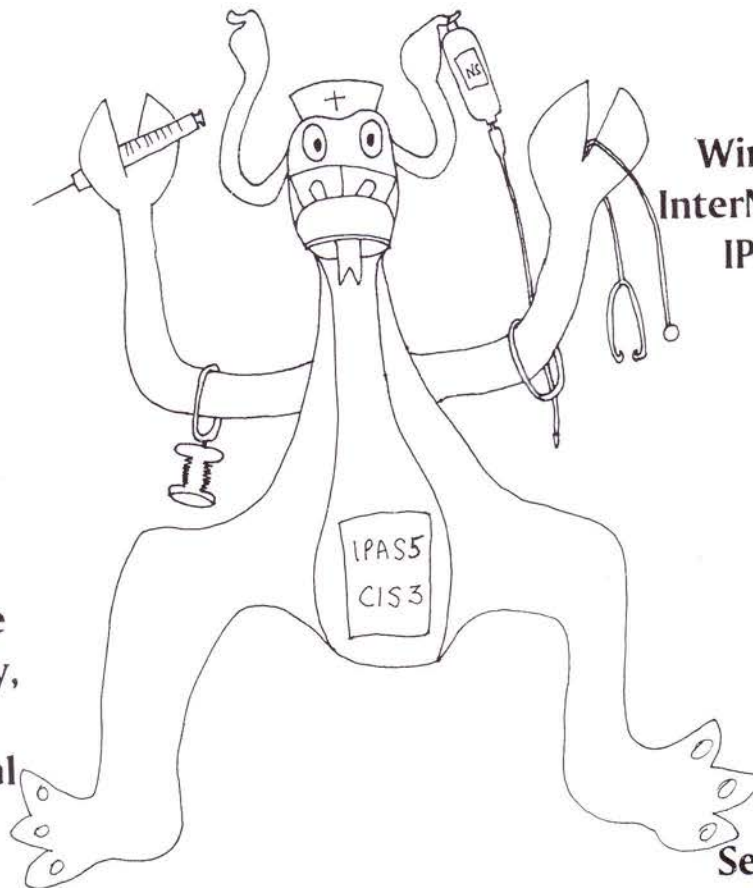
Versatile single  
drive for floppy,  
compact & re-  
writable optical  
discs

Super-Multi-media  
: Monitor,  
Surround Sound,  
Video Global  
Phone, Mind  
Reader

Security access :  
Voice, finger-print  
& fundal  
vasculature

Soft-ware :  
Windows 2000,  
InterNet (escape),  
IPAS 3, CIS v.6

Functions :  
Personal  
Computer,  
Network  
Terminal,  
Secretary,  
Diagnostic  
Assistant,  
Treatment  
Partner,  
Security Guard  
(never fails to  
remove the  
intruders of  
Newton's fruit),  
Game Mate &  
Eternal Lover



*Men like the Warrior as it works all day & night just with rechargeable battery and no grumbles  
**AS THE BLACK & WHITE SWANS.***

***WOMEN LOVE THE WARRIOR AS IT IS ENDLESSLY FAITHFUL !***





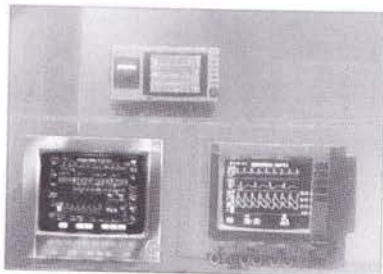
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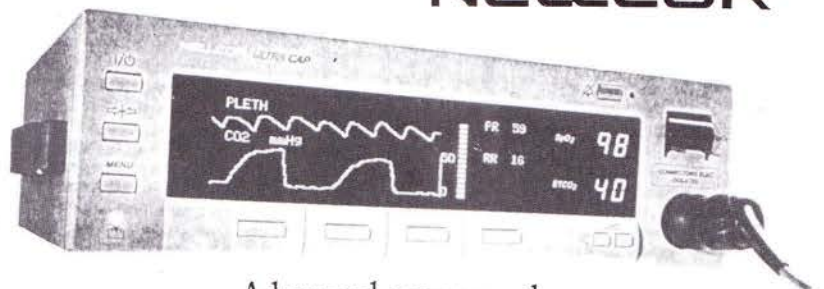
Patient monitoring system

**S&W V** Vickers  
Medical



Nellcor  
*Symphony*

**NEELCOR<sup>®</sup>**



Advanced capnography

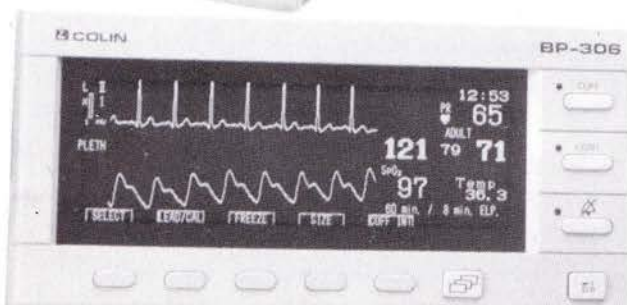


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Body Temperature



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Telex: 43120 LOXLY HX

## Message of Congratulation

### **Professor Wang Yi-tang**

*President of Chinese Association of  
Emergency Medicine*

With compliments to HKSEMS on her  
Tenth Anniversary in 1995 !



### **C. James Holliman, M.D., FACEP**

*Education Director, Emergency Department  
Director, Center for International Emergency  
Medicine*

This letter is to offer my congratulations to you and the Hong Kong Society of Emergency Medicine and Surgery (HKSEMS) on the occasion of the tenth anniversary of the HKSEMS. As evidenced by the quality and success of the Hong Kong Journal of Emergency Medicine, the HKSEMS is acting as a leader and model for Asia in the development of emergency medicine and prehospital care. The efficiency of patient care and flow in the very busy Hong Kong hospital emergency departments serves as a useful model for other systems to emulate. I am most happy to be associated with such a fine organization as the HKSEMS, and look forward to seeing the further achievements of this society over the next decade.

### **Charles V. Pollack, Jr., M.A., M.D., FACEP**

*Research Director and Attending Physician*

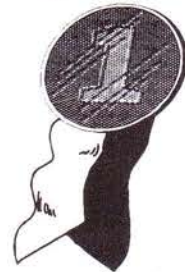
### **Emily S. Pollack, M.D., FAAP**

*Director, Pediatric Emergency Medicine*

*Department of Emergency Medicine*

*Maricopa Medical Center, Phoenix,  
Arizona, USA*

On the occasion of its tenth anniversary, we send our heartiest congratulations to the Hong Kong Society for Emergency Medicine and Surgery. Your efforts to educate physicians in the practice of emergency medicine have been exemplary, and it is to your great credit that interest and expertise in emergency medicine have developed so rapidly and so effectively in Hong Kong. We are especially impressed with your journal, which, despite its youth, is interesting, informative, and educational, and will nurture our specialty in your region. Wishing you many anniversaries and successes still to come!



### **Robert A. Cocks MD, FRCS, FFAEM, FCSHK**

*Head, Accident and Emergency Medicine  
Academic Unit*

*The Chinese University of Hong Kong*

I am writing to offer my hearty congratulations to the Hong Kong Society for Emergency Medicine and Surgery on the occasion of her Tenth Anniversary. I am most impressed by the rapid progress of the specialty of A&E Medicine in Hong Kong, much of which is due to the efforts of the Society and its dedicated members. With best wishes for the next ten years !



**Dr. C.T. Hung** FANZCA, FKHCA, FHKAM (Anaesthesiology)  
*President, The Hong Kong College of Anaesthesiologists*

It is my greatest pleasure to send my heartiest congratulations to the Hong Kong Society of Emergency Medicine and Surgery on its Tenth Anniversary. In the evolution of Emergency Medicine and Surgery as a medical specialty, your Society has played a most vital role in



seeing the birth and promotion of the specialty, as well as in keeping up with training and education in the area of Emergency Medicine. The organization of numerous courses, both for nurses and doctors, and the publication of the Hong Kong Journal of Emergency Medicine are very important for the progress and development in this area, and I must say they all have been done with professionalism. Even though ten years are considered short in history, your Society has achieved so much to be proud of. I would like to take this opportunity to wish your Society the very best in all your future endeavours.



**Dr. Jane Chan**  
*Consultant Physician (ICU)*  
*Department of Medicine,*  
*Queen Mary Hospital*

I should like to congratulate the Hong Kong Society for Emergency Medicine and Surgery on this exciting Tenth Anniversary.

A decade can be considered quite historical in this fast-paced city. The Society deserves many hearty congratulations on the ground-breaking achievements it has made in the past decade. Among them, I can personally attest to two major ones : the organization of the international certificate courses in basic life support and advanced cardiac life support, and the production of the Hong Kong Journal of Emergency Medicine. The first activity has upheld the standard of the resuscitative practice in the medical community in Hong Kong, and the second activity over the past two years has consolidated the leadership role of the Society is taking in the advancement of patient care, research and postgraduate education in Emergency Medicine.

As an intensivist, I have always believed the delivery of good critical care in the hospital begins with high-quality emergency care at the hospital door. The improvement in the quality of emergency



care has great implications for the intensivist, and given the firm dedication the HKSEMS has demonstrated towards peer education, I look forward to further exciting development in emergency and acute care medicine in Hong Kong in the coming decade.

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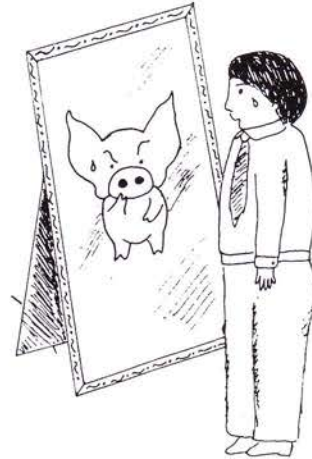


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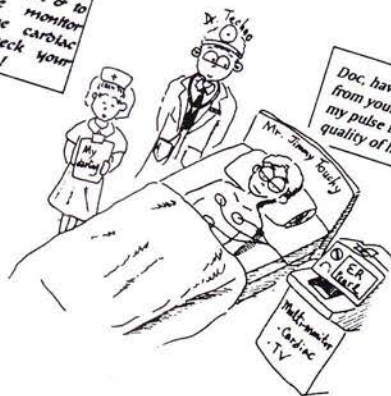


高瞻遠觸

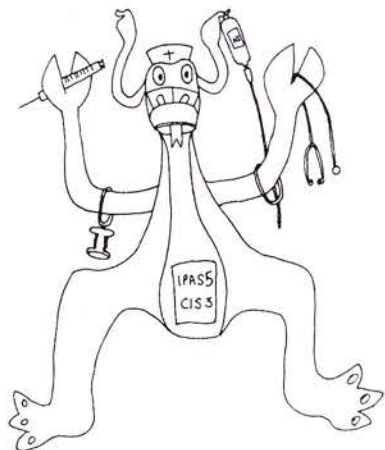


**Hi Tech, Hi Touch**

Jimmy, it time to stop  
watching the ER & to  
switch the monitor  
back to the cardiac  
mode to check your  
heart rhythm!



Doc, haven't you learned  
from your ACLS to touch  
my pulse to assess my  
quality of life?





## Tenth Anniversary Celebration Dinner Programme

Masters of Ceremony : *Mickey & Minnie*

Receptionists : *Bunny gals*

Tail of Cock Reception - *remember do not 'drink drive'.*

Presidential



Address - *time to chat ..... about the past & the vision !*

Prize & Souvenir Presentation - *the*



*Granny Award ?*

Chopsticks



- *get ready, set, go !*

Lucky draw - *my Benz*

Games - *Merry-go-round*

So I have to say I



you in a



on the TV

The Exercise



Conclusion after the climax of .....

**CONFIDENTIAL**

### Editorial Board

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### Acknowledgment

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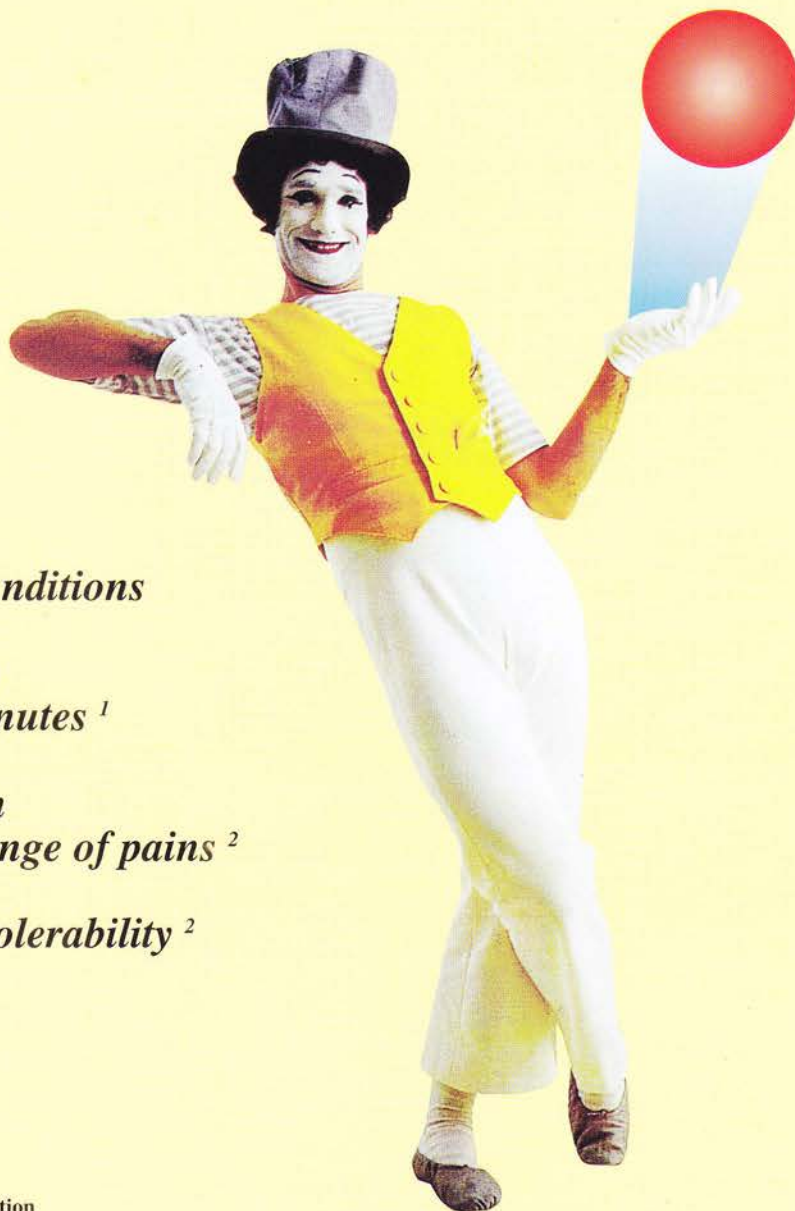
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**Presentation:** Diclofenac potassium: tablets of 25 mg and 50 mg. **Indications:** Short-term treatment in the following acute conditions: painful post-traumatic and post-operative inflammation; dysmenorrhoea, adnexitis and non-articular rheumatism; as an adjuvant in severe infections of the ear, nose, or throat. **Dosage:** Administration in 2-3 divided doses/day. Adults: 75-150 mg/day (dysmenorrhoea: up to 200 mg/day). **Contraindications:** Peptic ulcer, known hypersensitivity to diclofenac or other non-steroidal anti-inflammatory drugs. **Precautions/warnings:** Symptoms/history of gastrointestinal disease, impaired hepatic, cardiac, or renal function. Pregnancy and lactation. Porphyria. Caution in the elderly. Extracellular volume depletion. Central nervous disturbances can influence the ability to drive and use machines. If in exceptional cases prolonged treatment proves necessary, periodic monitoring of liver function and blood counts recommended. **Interactions:** Lithium, digoxin, methotrexate, cyclosporin, diuretics, anticoagulants, oral antidiabetics. **Adverse reactions:** Occasional: gastrointestinal disorders; headache; dizziness; vertigo; rashes; elevation of serum transaminases. Rare: peptic ulcer; gastrointestinal bleeding; pancreatitis; abnormalities of renal function; hepatitis; hypersensitivity reactions. In isolated cases: disturbances of sensation or vision; erythema multiforme; Stevens-Johnson syndrome; Lyell's syndrome; erythroderma; purpura; blood dyscrasias.

### **References**

1.) Data on file, Ciba-Geigy Limited, Basle, Switzerland. 2.) Anon. A, "A multicentric investigation with Cataflam in routine medical practice: observation in 10,377 patients" *Folha Med. (Br.)* 1986, 92:53-63.

**Full prescribing information available on request:**

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