

The Family Planning Association of Hong Kong

# **Thirteenth Refresher Course on Colposcopy**

Date: 29 May 2010 (Saturday)

<u>Time</u>: 2:30 p.m. to 4:30 p.m.

Venue: Auditorium, FPAHK, 8/F, Southorn Centre

130 Hennessy Road, Wanchai, HK

Fee: HKD 200 for members; or

HKD 350 for non-members

This is the thirteenth refresher course on colposcopy, jointly organized by the Hong Kong Society for Colposcopy and Cervical Pathology and the Family Planning Association of Hong Kong. Twenty-five colposcopy cases will be discussed and these cases will be counted for the 3-yearly reaccreditations program for accredited colposcopists. All doctors including pathologists and nurses are welcomed.

Application of CME and CNE points is underway:

**2 CME points** from Hong Kong College of Obstetricians & Gynaecologists including Colposcopy & Gynaecological Oncology

- 2 CME points from Hong Kong College of Pathology
- 2 CME points from Medical Council of Hong Kong (for all practicing doctors)
- 2 CNE points from Nursing Council of Hong Kong

Attendance Certificate will be issued

Enrollment method: Application form can be downloaded from FPAHK website at www.famplan.org.hk

Enquiry: Ms. Michelle Lee 2919 7738

Closing Date: 14 May 2010





## and Cervical Pathology

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- 2 CME points from Medical Council of Hong Kong (for all practicing doctors)
- 2 CNE points from Nursing Council of Hong Kong

### Attendance Certificate will be issued

Fee: HKD 200 for members & HKD 350 for non-members (Lunch not provided)

Enquiry: 2919 7738 (Michelle Lee, FPAHK)

**Enrollment Method:** Course information and application form can be downloaded from FPAHK website at <u>www.famplan.org.hk</u>. A completed enrollment form and a crossed cheque made payable to "**The Family Planning Association of Hong Kong**" should be sent to "**13th Refresher Course on Colposcopy**", Ms Michelle Lee, The Family Planning Association of Hong Kong, 10/F Southorn Centre, 130 Hennessy Road, Wanchai, H.K. on or before 14 May 2010.



### Thirteenth Refresher Course on Colposcopy



### **Enrollment Form**

(Please print your name as it should appear on the certificate)

Full Name:		
Sex:	(M / F)	
Corresponding Add:		
E-mail:		
Phone Number:	(Office)	(Mobile/Pager)
Unit:	(Hospita	al/Clinic/Private Practice)
Cheque Amount:	HKSCCP member (HKD 200)	
(Please tick $\checkmark$ )	Non HKSCCP member (HKD 350)	
	Please made payable to "The Family Planning As	ssociation of Hong Kong"
Cheque Number:		
Date:		
Official Use Only	Receipt No.:	