



THE PROMPT COURSE



Drills: 16 Jan 2014 (Venue: Prince of Wales Hospital)

Introduction

The PROMPT course (PRactical Obstetric Multi-Professional Training www.prompt-course.org) was designed based on years of experience in multi-professional obstetric emergency training in Bristol UK, and SaFE Study (Simulation and Fire-drill Evaluation) – a Department of Health commissioned multi-site randomized controlled trial of Obstetric Emergency Training. It is now **endorsed by RCOG** as it has been shown to be effective in reducing perinatal morbidities as well as improving the clinical knowledge and skill of front-line staff.

The PROMPT course emphasizes not only on the training of individual's skill, but also team work and co-operation of different professionals. It has been launched in Hong Kong and Mainland China since 2008. Last time it was held in Baptist Hospital in July 2011 and was well attended with positive response from many participants.

We welcome obstetricians and midwives from both public and private obstetric units to participate. To encourage team work approach, discount will be offered for group registration under the same unit.

Organiser

Department of Obstetrics and Gynaecology, The Chinese University of Hong Kong

Registration and Enquiry

Miss Clara LAU (Tel: 2632 1535; Fax: 2636 0008; Email: clarayyl@cuhk.edu.hk)

Program Details

Half-day Hospital-based Drills (Date: 16 Jan 2014)

Time	Programme	Format	Trainer/s
14:30 – 17:30 (3 hrs)	Drills 1. Maternal Collapse 2. PPH 3. Shoulder dystocia 4. Breech delivery 5. Newborn Resuscitation	Rotation & Drills	TY Leung & LW Law

Registration for Drill

Organization (Hospital)

Department O&G / Others:

Ward _____

Surname _____ First Name _____

Title Dr. / Mr. /Ms

Tel _____ Fax _____

Email _____

Registration Fee HK\$800

Please return the registration form with payment (**non-refundable**) to Miss Clara LAU, Dept. of O&G, 1E, Prince of Wales Hospital, Shatin, Hong Kong

By Cheque (Payable to **The Chinese University of Hong Kong**)

Cheque no.: _____ Bank Name: _____

By Credit Card (in Hong Kong Dollars only)

Visa MasterCard

Card holder's name (Block letter): _____

Signature: _____ Date: _____

Credit Card Number _____ Expiry Date (mm/yy)

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Please charge the above credit card of amount _____