

EMSSA NEWSLETTER – JANUARY 2008

INTRODUCTION

Hello and a Happy New Year: I hope that 2008 is going to be a very rewarding and fulfilling year for you all. To everybody reading, this is the first official newsletter of the Emergency Medicine Society of South Africa since the new Executive was elected in October 2007. I hope it will be the first of many!

We want to try and produce these newsletters a minimum of four times year. It is our intention to use them to keep all members up to date with what's happening in emergency medicine in this country and indeed in Africa. There is no doubt that this is a very exciting time to be involved in emergency medicine in South Africa, and I trust that you will all be able to work with the Exco towards getting the specialty development right.

The format of this newsletter is on a trial basis. I would be very happy to receive any comments (contact details below). If there is any content that you would like to see or indeed that you would like to be removed then please give me your feedback. At the sections that appear below will be recurrent, certainly over the 2008 editions, but they are open to additions from readers.

EXECUTIVE

For those of you that have been wondering what has been happening since that time, the Executive have been working hard to try and bring the business of EMSSA up to date. We have updated our database of members and got

the bank account into order, and tried to bring some educational materials online.

The current Executive of EMSSA is:-

Chairman: **Lee Wallis**
lewallis@pgwc.gov.za

Vice Chairman: **Charl van Loggerenberg**
Charl.VanLoggerenberg@lifehealthcare.co.za

Secretary & Treasurer: **Mande Taubkin**
mtaubkin@netcare.co.za

Executive Members
Dries Engelbrecht
Dries.engelbrecht@up.ac.za

William Lubinga
wlubinga@wol.co.za

Darryl Wood
darrylrwood@yahoo.co.uk

Walter Kloeck
kloeck@resus.co.za

Melanie Stander
melanie_stander@yahoo.co.uk

Hanneli Piek
hannelipiek@mweb.co.za

In addition we have since co-opted onto the Committee Ms Michelle Twomey, about whom more details will be given below. Please don't hesitate to contact if there are any issues that we can help you with.

MEMBERSHIP

For those who have recently signed up, your membership is for the 2008 calendar year. Please don't worry that you have

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had two months of wasted membership since signing up at the conference, as the intention always was that this would be for 2008.

You will next be asked to pay your membership levies only in January 2009. This means that anyone joining throughout the calendar year will be asked to pay on a pro-rata basis for membership for that year.

For those of you who know people that are not yet members, who would like to become members, please direct them to Mande (details below), who will forward the membership forms (also attached here).

Remember that R150 is excellent value: in addition to the academic materials that will be made available on the website and to the academic days that are planned, EMSSA members will also receive the Emergency & Critical Care Journal that is produced every two months, under the stewardship of Charl van Loggerenberg and Simon Robertson. It is an excellent journal and excellent value for money for your membership fees.

OBJECTIVES

The objectives of EMSSA are:

- To promote and improve emergency care through teaching, research and education.
- To promote the speciality of emergency medicine
- To advocate for emergency care in South Africa.

- To generate funding for the accomplishment of the above.
- To lobby on behalf of members of the Emergency medicine Society of South Africa for the promotion of and maintenance of the profession

TRAUMA SOCIETY OF SOUTH AFRICA

This Society has been in existence for a long time. It is well established and has a very good advocacy role in the country. It is the intention of this Exco to work as closely as possible with TSSA in order to fulfill the common aims of improving emergency care in South Africa. There is obviously some degree of overlap between the two organisations and the Executive will be working with TSSA's Executive to try and minimize any duplication of the efforts. There is a TSSA Executive meeting on the 24th of January and there will be feedback to EMSSA members from that meeting.

WEBSITE

We have purchased the website www.emssa.org. I am very excited about this. Melanie Stander has been running with it but apart from procuring a company to do the design we have not really taken it forward because we want this to be a member's website.

It is our intention to put as much academic material on there as possible, but with regards to the layout and style and other content we would really like to hear feedback from you all. There will be a forum section, and we are investigation a social network capability.

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Please direct all comments and suggestions by the end of January 2008 to Melanie Stander - her contact details are above.

EDUCATION

One of the main objectives of the EMSSA is to improve education in emergency medicine. To this end EMSSA is involved in CME activities throughout the country. It is the intention for 2008 to try and establish some more formalised EMSSA academic days.

Mande has one planned for Gauteng and details will be made available very shortly.

Dries has planned a symposium in Pretoria on 15th March and the programme is attached. Please contact Dries for bookings.

In the Western Cape there is an Emergency Medicine 3 Day Refresher Course on the 7th, 8th and 9th of February. The 9th of February has specifically been set aside as the EMSSA day but the delegates are more than welcome to come to any of those days. Anyone wanting to come, please contact Lee. Programme attached.

Walter has compiled a table of short courses that currently run and this is attached.

CONSTITUTION

The constitution of the organization is attached. Please keep a copy for your own records.

CONFERENCES

Following the tremendous success of the inaugural Emergency Medicine in the Developing World Conference in Cape Town in October 2007, the decision has been made to run a similar event, also in Cape Town, in October 2009. More details will be made available closer to the time.

With regards to the last conference, we did say that all of the presentations would be put onto the conference website. This is still taking place but is taking slower than expected. This is due to the large size of the files with the smallest one being currently 20 megabytes. We are working hard to try and reduce the size and make them more accessible.

However, we have made a DVD and for those of you that don't want to wait for free web access (which will be slow to download) the DVD is available. Please contact Zuleiga on zmullins@pgwc.gov.za or 021-9489908 in order to purchase a DVD for R100 plus will include postage and packaging. The DVD contains all of the sound and video from the main venue upstairs at the conference for the full three days.

With regard to other conferences, in 2008 there is currently a plan for a 1 day Emergency Medicine Conference as part of the Critical Care Conference at the Cape Town International Convention Centre (5th to the 8th August). It is not yet clear which of the days will be dedicated just to emergency medicine,

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but more details will be made available as soon as possible.

Finally, we have been asked by the International Federation for Emergency Medicine (IFEM) to bid to host the International Conference on Emergency Medicine in 2014. This is a great honour and recognises the development that has taken place here: this conference is held every 2 years and has only ever been held in the UK, US, Canada and Australia. We will keep you informed how the bid goes.

FIFA 2010

There is no doubt that the World Cup offers significant advantages in terms of development of emergency medicine in this country. The main focus for medical planning around the World Cup relates only the emergency medicine. There are some gaps with regard to what will happen behind the back door of the emergency department but in terms of announcing EMS services and emergency departments nationwide, there will never again be an opportunity quite like this.

A number of the Exco are involved in national planning around this and there is lots of very exciting stuff happening.

Part of this is the accreditation process of all emergency departments and EMS systems and for those of you who have received the paperwork and not yet returned it I encourage you to do so at the earliest. This will allow us to develop a proper gap analysis and help to support your department or facility to get the improvements that are needed towards

2010. In addition, it will see the first ever comprehensive database of South Africa's emergency capability.

In addition, there are a wide number of courses that have been introduced across the country to improve staff capabilities and capacity before the World Cup. A decision has been made that EMSSA will drive these as this is entirely appropriate. These courses include:-

- Major Incident Medical Management and Support (MIMMS): the Practical Approach in the Pre-hospital Environment
- MIMMS: the Practical Approach in the Hospital
- Rural Emergency Skills Training (REST)
- South African Triage Scale
- Medical Care for Victims of Sexual and Criminal Assault

These courses will all be co-ordinated through the FIFA 2010 Emergency Medicine Project Manager, Michelle Twomey. Michelle has spent two years as a Project Manager for rolling out the triage tool across the Western Cape and indeed has helped to put SATS into several other provinces as well.

Michelle has an 18 month contract with National Department of Health starting from January 2008, in order to help put into place all of the plans that we have developed over the last year and a half. She is contactable on satriage@webmail.co.za or 0828503281.

Michelle has a mammoth task to try and co-ordinate training courses across the



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country. There will be a huge push for trainers and for identification of appropriate personnel to be on the courses. EMSSA members need to take a really active lead in this and to encourage and stimulate enthusiasm in their own areas. Please don't hesitate to contact myself or Michelle for more details but be aware that training will be bundled into one or two week packages and will focus in one part of the province at one time.

We need to know who the key people are in each area that we need to be involving, so if it's you or a colleague please pass on their details to Michelle.

THE EMERGENCY MEDICINE REGISTRARS' ASSOCIATION OF SOUTH AFRICA

The first meeting of EMRASA was held in Cape Town on 18 July 2006. The Association came about because of the expanding numbers of registrars enrolled in emergency medicine programmes around the country. It was felt that this was an important step to take in furthering professional development in emergency medicine in South Africa. We want to be the voice for EM registrars in the country.

The Association currently consists of the four executive committee members:

Chairperson - Melanie Stander
Vice-chairperson - Adrian Burger
Treasurer - Neil von Hoving
Secretary - Adrian Sieberhagen

We are planning some exciting new developments this year:

Membership: We are in discussion with EMSSA about the possibility that any registrar who becomes a member of EMRASA automatically obtains EMSSA membership.

Website: This will soon be up and running and will be linked to www.emssa.org, and will contain information about membership, the constitution, CME events as well as issues facing emergency medicine registrars in different countries.

Newsletter: there will be a quarterly email newsletter, and our brand new logo will be finalised shortly.

If you are interested in finding out more about EMRASA please contact Melanie Stander.

ANY OTHER BUSINESS

This section we want to use to bring to light anything that members want to share. As a minimum, this newsletter will be four times a year - but we are quite happy to put it out every two weeks if there is enough information.

The sorts of things that can go into the newsletter include courses that are running so that we can really smooth the access to emergency care courses. We will start to do this from the next newsletter but please send in your suggestions for any other material.

CONSTITUTION OF THE EMERGENCY MEDICINE SOCIETY OF SOUTH AFRICA

NOVEMBER 2007

SECTION 1: NAME

1.1 The name of the organization shall be the EMERGENCY MEDICINE SOCIETY OF SOUTH AFRICA, hereinafter called the EMSSA.

SECTION 2: OBJECTIVES

The objectives of the EMSSA are:

- 2.1 To promote and improve emergency care through teaching, research and education.
- 2.2 To promote the speciality of emergency medicine
- 2.3 To advocate for emergency care in South Africa.
- 2.4 To generate funding for the accomplishment of the above.
- 2.5 To lobby on behalf of members of the Emergency medicine Society of South Africa for the promotion of and maintenance of the profession

SECTION 3: LEGAL PERSONALITY

The EMSSA shall be vested with legal personality, may sue and be sued in its own name, may acquire and dispose of property, may enter into contracts and may in general do all that is necessary to promote the objectives and interests of the EMSSA, on a non-profit basis.

SECTION 4: MEMBERSHIP

Members of the EMSSA achieve said membership upon completion of a membership form and payment of the required annual membership fee. Members may be:

4.1 FULL MEMBER:

Any person involved in education, research and / or patient care in the field of emergency medicine can become a full member of the EMSSA. Full members pay membership fees, have voting rights and can stand for office.

4.2 AFFILIATE MEMBER:

Any person with an interest in emergency medicine can become an affiliate member of the EMSSA. Affiliate members pay a reduced membership fee, have no voting rights, and cannot hold office.

4.3 HONORARY LIFE MEMBER:

This may be awarded by the COUNCIL to a person who excelled in furthering the objectives of the EMSSA. Such a member pays no dues, has no voting rights and may not hold office.

4.3.1 Application for membership in this category must be in writing, and must

- be proposed and seconded by two members of the EMSSA.
- 4.4 All health care professionals with active involvement in emergency care are eligible for membership as above.
- 4.5 Membership expires under the following conditions:
- 4.5.1 A member resigns in writing.
 - 4.5.2 A member ceases to be eligible for membership.
 - 4.5.3 A member has not paid membership fees for a period of two (2) years.
 - 4.5.4 A member by his or her actions brings the EMSSA into disrepute
- 4.6 Membership may be suspended if a member has not paid membership fees for a period of one (1) year. During suspension the member has no voting rights. This may be lifted after payment of all arrear fees.

SECTION 5: CONTROL

- 5.1 The control over the affairs of the EMSSA shall lie with the COUNCIL of the EMSSA.
- 5.2. The duties of the COUNCIL shall be to:
- 5.2.1 Oversee the proper functioning of the EMSSA.
 - 5.2.2 Oversee the proper administration of the EMSSA.
 - 5.2.3 Carry out the instructions of the general meetings of the EMSSA, and report back to the members.
 - 5.2.4 Promote the organisation of congresses, symposia, courses and other educational opportunities.
 - 5.2.5 Produce a journal as a vehicle for teaching emergency care.
 - 5.2.6 Determine the annual subscription fee.
 - 5.2.7 Appoint auditors for the EMSSA.
- 5.3 The COUNCIL shall consist of the President, the Vice-President, the Secretary and Treasurer, and five (5) members, as well as the immediate past-President.
- 5.4 The term of office of a COUNCIL member shall be two (2) years, but all members may stand for re-election.
- 5.5 The President, the Vice-President and the Honorary Secretary and Treasurer shall form the EXECUTIVE COMMITTEE (EXCO) of the EMSSA, and will attend to all urgent matters.
- 5.6 Election of the COUNCIL shall take place at the biennial general meeting of the EMSSA.
- 5.7 The PRESIDENT of the EMSSA and the COUNCIL shall:
- 5.7.1 Be a registered specialist in Emergency Medicine.

- 5.7.2 Preside over all meetings of members of the EMSSA and the COUNCIL.
- 5.7.3 Carry out all tasks entrusted to him by the members.
- 5.7.4 Have a casting vote in the case of a tie of votes.

- 5.8 The VICE-PRESIDENT of the EMSSA shall be a registered specialist in emergency medicine, and shall stand in for the PRESIDENT when the latter is not available.

- 5.9 The SECRETARY shall manage all the administration of the EMSSA and the COUNCIL.

- 5.10 The TREASURER shall manage all the financial matters of the EMSSA and the COUNCIL.

- 5.11 The COUNCIL may combine the functions of SECRETARY and TREASURER in one (1) council member, and may appoint a person(s) to conduct the administrative and financial matters of the EMSSA and the COUNCIL.

- 5.12 The COUNCIL may appoint a member to fill a vacancy on the COUNCIL, for the remaining term. Such a member will have a right to vote.

- 5.13 The COUNCIL may also co-opt a person for a specific purpose and time. Such a person shall have no voting rights.

- 5.14 Council members shall receive no compensation for their services, but costs incurred in attending meetings may be refunded from the EMSSA funds.

SECTION 6: MEETINGS

- 6.1 Members shall meet biennially, usually during a congress.

- 6.2 A meeting may also be called by the COUNCIL on the written request of ten (10) members of the EMSSA.

- 6.3 Notice of a meeting shall be sent out by the SECRETARY at least thirty (30) days before the meeting. This notice shall state the date, time and place of the meeting, as well as the matters to be discussed.

- 6.4 A quorum for a meeting of members of the EMSSA shall be at least 50% of the Executive Committee and a minimum of 20 Full paid up Members , as at the end of December of the previous year.

- 6.5 Voting at these meetings may be by a show of hands, or secret ballot, and may include postal and proxy votes.

- 6.6 An ordinary majority vote shall be sufficient to decide on an issue.

SECTION 7: ORGANISATION

- 7.1 The EMSSA may allow the formation of subgroups on a functional or regional basis.
- 7.2 These subgroups shall elect a committee to co-ordinate the actions of the subgroup, and shall report annually to the EMSSA COUNCIL on its activities
- 7.3 A representative of each subgroup may be co-opted on the COUNCIL.
- 7.4 The EMSSA may also affiliate to any other organization with similar objectives, without loss of total autonomy over its own affairs.

SECTION 8: AMENDMENTS TO THE CONSTITUTION

- 8.1 This constitution may be amended by a majority vote of all the members of the EMSSA, after written notice has been given to all members at least thirty (30) days prior to the relevant meeting. The vote may be actual or proxy by nature.
- 8.2 The EMSSA may also be dissolved by an ordinary majority vote of all the members, or when the total membership falls below eleven (11) members.
- 8.3 After dissolution, the assets of the EMSSA will be transferred or donated to an appropriate organisation, as determined by the COUNCIL.
- 8.4 Subgroups may dissolve with the EMSSA, or may decide to carry on as separate organisations.

SECTION 9: FINANCES

- 9.1 The financial year of the EMSSA runs a calendar year from January to December.
- 9.2 Audited statements of the financial matters of the EMSSA must be presented annually to the COUNCIL by the TREASURER.

EMSSA – AGM – Cape Town conference – 4 October 2007

Welcome

- Attendance list signed (scanned copy attached)
- Acting Chairman Dries Engelbrecht (AE) welcomed everyone. Commented on the achievements to date of EMSSA, and congratulated Lee Wallis (LW) and team on an excellent conference.

SAMA discussion

- AE felt being a member was valuable – had industry credibility
- Walter Kloeck (WK) thought SAMA membership added credibility to the speciality of emergency medicine with the HPCSA
- Tim Hardcastle felt it more valuable to link with Trauma Society and other societies
- CvL / Mande Toubkin (MT) / LW did not see the value of a SAMA link
- No obvious resolution – will be left to new executive

EMSSA membership

- Opportunity to recruit at conference
- R150
- Paid up members can vote for new executive
- LW kindly offered the conference team to handle the logistics
- R25000 made available from LW conference !!

New executive

- Vote on Saturday
- Must be regional and representative
- To include access to nurses and paramedics
- CvL apologised for poor administrative efficiencies
- NB to improve national communication to members
- New secretary to enhance web access

CvL

EMERGENCY-RELATED SHORT COURSES IN SOUTH AFRICA

TITLE	COURSE NAME	LENGTH	ORGANIZATION	CONTACT ADDRESS	VENUE	ACCREDITATION
BLS-HCP	*Basic Life Support for Healthcare Providers*	1 day	Resuscitation Council of SA	rescosa@iafrica.com	Countrywide	American Heart Association
ACLS	*Advanced Cardiovascular Life Support*	2 days	Resuscitation Council of SA	rescosa@iafrica.com	Countrywide	American Heart Association
ACLS-EP	*ACLS for Experienced Providers*	2 days	Resuscitation Council of SA	rescosa@iafrica.com	Countrywide	American Heart Association
PALS	*Pediatric Advanced Life Support*	2 days	Resuscitation Council of SA	rescosa@iafrica.com	Countrywide	American Heart Association
ANLS	*Advanced Neonatal Life Support*	1 day	Resuscitation Council of SA	rescosa@iafrica.com	Johannesburg & Cape Town	American Academy of Pediatrics
AMLS	*Advanced Medical Life Support*	2 days	Academy of Advanced Life Support	kloeck@resus.co.za	Johannesburg & Polokwane	United Kingdom
APLS	*Advanced Paediatric Life Support*	3 days	ALSG (UK)	blackwel@iafrica.com	Countrywide	United Kingdom
ATLS	Advanced Trauma Life Support	3 days	Trauma Society of SA	atls@saol.com	Countrywide	American College of Surgeons
EMSB	Emergency Management of Severe Burns	1 day	SA Burn Society	bbates@ich.uct.ac.za	Cape Town & Johannesburg	Australian & New Zealand Burn Association
BSSC	*Basic Surgical Skills Course*	3 days	College of Surgeons of SA	bfine@uctgsh1.uct.ac.za or parkesjs@medicine.wits.ac.za	Countrywide	College of Surgeons of England
FCCS	Fundamental Critical Care Support	2 days	Critical Care Society of SA	drhannes@specphysician.co.za	Johannesburg & Durban	US Society of Critical Care Medicine
EMAP	*Emergency Management of Acute Poisonings*	2 days	Academy of Accident & Emergency Medicine	academy.aem@telkomsa.net	Durban	Local
ATM	*Advanced Trauma Management*	3 days	Academy of Accident & Emergency Medicine	academy.aem@telkomsa.net	Durban	Local
AME	*Acute Medical Emergencies*	3 days	Academy of Accident & Emergency Medicine	academy.aem@telkomsa.net	Durban	Local
	Emergency Regional Anaesthesia	1 day	University of Cape Town/Stellenbosch	basil.bonner@mediclinic.co.za	Cape Town	Local
	Immobilization Techniques	1 day	University of Cape Town/Stellenbosch	croberts@pgwc.gov.za	Cape Town	Local
	Wound Management	1 day	University of Cape Town/Stellenbosch	tch@sun.ac.za	Cape Town	Local
	Disaster Medicine	5 days	University of Cape Town/Stellenbosch	wpsmith@pgwc.gov.za	Cape Town	Local
	Aviation Medicine/ Health Care Provider	5 days	University of Cape Town/Stellenbosch or University of the Witwatersrand	wpsmith@pgwc.gov.za or trauma@mweb.co.za	Cape Town & Johannesburg	Local

Active (paid-up) members of the CMSA qualify for a R100-00 discount on all Courses marked with an asterisk

Emergency Medicine Symposium 15 March 2007:

7h00 – 8h00: Registration

Section 1: Airway Management

8h00 – 08h30: An overview of Airway management in the ED Dries Engelbrecht

08h30 – 08h50: Laryngeal masks (LMA) and other supra-glottic devices for the failed airway Anri Alberts

08h50 – 09h00: The difficult airway trolley Analee Milner

09h00 – 09h20: Pre-hospital intubation Johan Claassen

09h20 – 09h35: New airway management courses in South Africa Walter Kloeck

Section 2: Triage

09h35 – 09h55: The development of a uniform triage system in South Africa Lee Wallace

09h55 – 10h15: Challenges in the implementation of a triage system in the private sector Charl van Loggerenberg

10h15 – 11h00 Tea break: Visit the exhibition area and enjoy refreshments

Section 3: Medico – Legal

11h00 – 11h20: Red flag signs, why do we miss them? Liz Meyer

11h20 – 11h50: Medico legal examination of a sexual assault victim Sarie Oosthuizen

11h50 – 12h05: Sexual assault victims: Netcare experience Mande Taubkin

Section 4: Environmental

12h05 – 12h25 How to deal with an unexpected hemorrhagic fever case in your emergency department Col. Theo Ligthelm

12h25 – 12h45 Management of cytotoxic snakebites Garith Plastic surg

12h45 – 13h05 Live snake identification demonstration

Section 5: Paediatric Emergency Medicine

13h05 – 13h25 The child with abdominal pain Prof JHR Becker

13h25 – 13h45 The child with fever

Dr J Lotter

13h45 – 14h00 Closure and collection of CPD certificates

14h00 – 14h30 Regular EMSSA meeting (For EMSSA members only)

EMERGENCY MEDICINE REFRESHER COURSE Feb 2008

	Thurs 7 Feb	Fri 8 Feb	Sat 9 Feb - EMSSA Day
08H00-08H40	Hand Injuries	MRI place in EM	Failed Intubtion- What now
08H40-09H20	Feet Injuries	Facial Injuries	Procedural sedation - Adults and Children
09H20-10H00	Plant Toxicology	Haematology - anaemia/ haemophiliacs	Unit Management - Legal aspects
10H00-10H20	TEA	TEA	TEA
10H20-11H00	Status Epilesy paed	Ventilation	New Emerging Infections in the ED: XDR TB and Other Superbugs
11H00-11H40	Resp EM Paeds	Inotropes	Travel Medicine and impact in the ED
11H40-12H20	Renal disease Paeds	Street drugs	Sports Injuries
12H20-13H00	LUNCH	LUNCH	LUNCH
13H00-13H40	Obstetrics EM	ACS - An approach to the ACS other than STEMI	Bioterrorism - SA reaction
13H40-14H20	Gynae EM	CVA/ TIA - Risk stratificaton and management	Crush Syndrome management
14H20-15H00	NIV in ED	An approach to the patient presenting with syncope	Scoring systems in Emergencies
15H00-15H20	TEA	TEA	TEA
15H20-16H00	Conflict Management	Wound mx-suturing/glue	Critical Appraisal of articles
16H00-16H40	ENT	Paeds Surg EM	Landmark articles
16H40-17H20	Ophthalmology	Vascular Emerg	Discussion

EMERGENCY MEDICINE REFRESHER COURSE

Hosted by: Division of Emergency Medicine UCT / Stellenbosch University

Location: AV *room* Stellenbosch Medical Campus on Tygerberg Hospital premises.

This course will cover a wide range of Emergency Medicine conditions (see attached preliminary programme) and will therefore be an excellent refresher for the common and not so common problems daily faced in our Units.

All involved in Emergency Medicine are welcome to attend. Thursday and Friday will be aimed at our Registrars in Emergency Medicine. Saturday will be an EMSSA day and as such will be aimed at all persons involved in Emergency Care of patients.

Dates: 7-9 Feb.

Costs: **All 3 days:** R800 for Registrars and registered students; R1200 for others.

Per day: R500 *EMSSA members R400*

Payment: Cash or cheque (made out to University of Cape Town), payable at the course. For bookings, contact Zuleiga (details below)

CPD accreditation applied for.

To book: Contact Zuleiga at 021-9489908 / fax 021-9489909 or email the form to zmullins@pgwc.gov.za

Name: _____ Surname: _____

HPCSA No: _____

Postal Address: _____

Contact Phone No (W) _____ (H) _____ (cell) _____

Email Address: _____

Current Hospital: _____

Current Position: _____

Dates Attending: 7-9 Feb ___ 7 Feb ___ 8 Feb ___ 9 Feb ___

Dietary restrictions: _____

EMSSA member Y N