



Basic Colposcopy Workshop 2021

Jointly Organised by: The Department of Obstetrics and Gynaecology, Pamela Youde Nethersole Eastern Hospital
The Hong Kong Society for Colposcopy and Cervical Pathology

Date: 18th September 2021 (Saturday)

Venue: Seminar Room2, G/F, HKEC Training Centre, PYNEH (with Zoom option)

Time	Programme	Speaker
08:45-09:00	Registration	
09:00- 09:30	Principles of Colposcopy	Dr Daniel Wong
0930- 10:00	Colposcopic Appearances: normal and abnormal cervix	Dr Jessica Law
10:00-10:30	Pathology of Abnormal Smears and CIN in WHO 2020	Dr Richard Wong
10:30-10:45	*Break*	
10:45-11:30	Management of abnormal smears	Dr Winnie Hui
11:30- 12:00	Glandular lesions: pitfalls and management	Dr Li Wan Hon
12:00- 12:20	Case discussion	Dr Tracy Law/ Dr Jessica Law
12:20-12:40	Virtual Lab Tour (Video)	Dr Jessica Law
12:40 -13:00	Questions and Answers	All Speakers

Chairperson: Dr Jessica Law (Department of Obstetrics and Gynaecology, PYNEH)

CME: CME and CNE points pending

Attendance Certificate: Attendance certificates will be issued to delegates who attended the workshop

Registration fee: HKD 400 for members of HKSCCP
HKD 600 for non- members

Registration:

Please kindly **register on or before 1st September 2021** either by fax (26360008, attention: Ms Dorothy Lee) or by email (admin@hksccp.org.hk). Please make sure your cheque is payable to “The Hong Kong Society for Colposcopy and Cervical Pathology” and send it to the HKSCCP, c/o Department of Obstetrics and Gynaecology, Prince of Wales’s Hospital (Attention: Ms Dorothy Lee)

Reply Slip

Basic Colposcopy Workshop 2021

To : Ms Dorothy Lee

The Hong Kong Society for Colposcopy and Cervical Pathology c/o Department of
Obstetrics and Gynaecology

1/F, Special Block E, Prince of Wales Hospital,
Shatin, N.T.

Fax no: 2636 0008

I would like to register for the Basic Colposcopy Workshop 2021

	HKSCCP members	Non-HKSCCP members
Registration fee:	HKD 400	HKD 600

Workshop Type: Zoom On-site

A cheque of HKD _____ (Cheque No. _____) is enclosed for
the registration of the Workshop.

[All cheques should be payable to the “The Hong Kong Society for
Colposcopy and Cervical Pathology”]

Name: _____

Signature: _____

Contact Tel. No. _____

Email address: _____

Address: _____

Date: _____