



The Hong Kong College of Orthopaedic Surgeons  
香港骨科醫學院

## Subspecialty Course in Sports and Arthroscopy

Date : 25 June 2011 (Saturday)  
Time : 1:30 – 6:00 pm  
Venue : Multi-function Room, G/F, Block D, Queen Elizabeth Hospital

### Timetable

< Revised on 15 June 2011 >

Time	Topics	Speakers
1:30-1:50	Recurrent shoulder dislocation	P Tse
1:50-2:10	Biomechanics of ligament injury	YC Wun
2:10-2:30	ACL injury, an overview	J Cheng
2:30-2:50	PCL injury, an overview	KC Poon
2:50-3:10	Meniscus and cartilage injury, current update	Wilson Li
3:10-3:30	Algorithm in management of multiple ligaments injury of knee	Francis Lau

### 3:30-3:50 Tea break

3:50-4:10	Recurrent patella dislocation, the role of MPFL	WP Yau
4:10-4:30	Basic Musculoskeletal radiology in sports injury	Alex Chow
4:30-4:50	Rotator cuff tear	HM Ho
4:50-5:10	Acromioclavicular joint injury	YC Wun
5:10-5:30	Tips and tricks in hip arthroscopy	HC Cheng
5:30-5:50	Rehabilitation after Sports Injury	Patrick Yung
5:50-6:00	Evaluation	

For official use only

Registration No.:

Date Received:



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Venue: Multi-function Room, G/F, Block D, Queen Elizabeth Hospital

## REGISTRATION FORM

( Please put a "✓" in appropriate box and fill it in BLOCK LETTERS )

Title:  Prof.  Dr.  Mr.  Ms.

Surname: \_\_\_\_\_ Given Name: \_\_\_\_\_

Chinese Name: \_\_\_\_\_ Position: \_\_\_\_\_

Hospital / Practice: \_\_\_\_\_ Department: \_\_\_\_\_

HKCOS Category:  HKCOS Fellow  HKCOS Trainee  Others: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Telephone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Car Plate No.: \_\_\_\_\_ *(Limited free parking is available on first-come-first-served reservation basis)*

### REGISTRATION FEE

**HKCOS Trainees: HK\$300 and HKCOS Fellows: HK\$600**

Registration will be made on a first-come-first-served basis. No refund will be made after the registration deadline (15 June 2011).

### PAYMENT

A cheque or bank draft No. \_\_\_\_\_ in HK\$ \_\_\_\_\_ made payable to  
" THE HONG KONG COLLEGE OF ORTHOPAEDIC SURGEONS " is enclosed.

I hereby agree with the terms & conditions above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return the completed form with payment to:**

Secretariat  
The Hong Kong College of Orthopaedic Surgeons  
Room 905, 9/F  
Hong Kong Academy of Medicine Jockey Club Building  
99 Wong Chuk Hang Road  
Aberdeen, Hong Kong

Tel: (852) 2871 8722 Fax: (852) 2873 4077 E-mail: [hkcoss@hkcoss.org.hk](mailto:hkcoss@hkcoss.org.hk) Website: [www.hkcoss.org.hk](http://www.hkcoss.org.hk)