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MR. PANEER SELVAM
PROF. JOHN CHAN KOK MENG
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PRE- CONGRESS MEETING

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DR. MOHD AFIQ BIN MOHD AMIN

KL REVIEW COURSE COMMITTEE

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MR. ASHVIN NAIR
MR. CHONG KEE SOON

GP PROGRAMME COMMITTEE

PROF. RAJA AMIN BIN RAJA MOKHTAR
DR. ZHAFRI ZULKIFLI

SOCIAL EVENT

SR. ROZITA RAMLI
SR. MUHAMAD TAZRI BIN ROBANI

IMPORTANT DEADLINES

ABSTRACT SUBMISSION
15TH JULY 2018

(Author would have to register and then use the registration number for the submission of the abstract)

REGISTRATION FEES

	EARLY BIRD (BEFORE 30.06.18)	STANDARD (01.06.18 -03.08.18)	ON SITE (09.08.18 -11.08.18)
	CATEGORY (THREE DAYS)		
LOCAL DELEGATE	RM 650	RM 700	RM 800
OVERSEAS DELEGATE	USD 200	USD 225	USD 250
ALLIED HEALTH PROFESSIONAL	RM 450		
	CATEGORY (ONE DAY ONLY)		
GENERAL PRACTITIONER (12.08.18)	RM200	RM250	
PRE-CONGRESS MEETING	RM 250		

ENQUIRIES

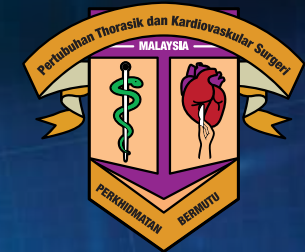
MATCVS SECRETARIAT
UNIT 1.6, LEVEL 1, ENTREPRISE 3B
TECHNOLOGY PARK MALAYSIA (TPM),
JALAN INNOVASI 1
LEBUHRAYA PUCHONG - SUNGAI BESI, BUKIT JALIL
57000 KUALA LUMPUR, WILAYAH PERSEKUTUAN

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secretariat@matcvs.org.my

WEB:
www.matcvs.org.my



**MALAYSIAN ASSOCIATION
FOR THORACIC & CARDIOVASCULAR SURGERY**

19TH ANNUAL SCIENTIFIC MEETING

"MDT APPROACH TO BETTER PATIENT CARE"

PRE-CONGRESS MEETING
9TH AUGUST 2018

SCIENTIFIC MEETING
10TH - 12TH AUGUST 2018

**SHERATON PETALING JAYA,
SELANGOR**

www.matcvs.org.my

PROGRAMME

	7 TH - 8 TH AUGUST (Tuesday - Wednesday)	9 TH AUGUST (Thursday)	10 TH AUGUST (Friday)	11 TH AUGUST (Saturday)	12 TH AUGUST (Sunday)
0730 - 0800	REGISTRATION				
0800 - 0830					
0830 - 0900					
0900 - 0930			ADULT CARDIAC	PAEDIATRICS	
0930 - 1000			MDT Discussion		
1000 - 1030				OPENING CEREMONY	CARDIOTHORACIC SURGERY AND GENERAL PRACTITIONER
1030 - 1100					
1100 - 1130				RAZALI HASHIM MEMORIAL LECTURE	
1130 - 1200	KL REVIEW COURSE	PRE-CONGRESS MEETING • Nursing workshop • Perfusionist workshop • Doctor's workshop	LUNCH SYMPOSIUM		
1200 - 1230				LUNCH SYMPOSIUM	
1230 - 1300	Venue: IJN College				LUNCH SYMPOSIUM
1300 - 1330		Venue: Sheraton PJ			
1330 - 1400				YOUNG INVESTIGATOR AWARD	
1400 - 1430					AORTIC & ENDOVASCULAR
1430 - 1500			ADULT THORACIC		
1500 - 1530				FREE PAPER PRESENTATION	
1530 - 1600					
1600 - 1630			MDT Discussion	POSTER PRESENTATION	LIVE IN THE BOX
1630 - 1700					
1900 onwards				FACULTY DINNER (by invitation only)	

REGISTRATION FORM

NAME: _____

INSTITUTION: _____

MAILING ADDRESS: _____

PHONE: _____ FAX: _____

EMAIL: _____

SPECIALTY: _____

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PRE-CONGRESS MEETING	RM 250		

Enclosed is my payment of _____
in favour of Malaysian Association of Thoracic
and Cardiovascular Surgery

Payments can be made online to the following account:
Name of Account: Malaysian Association for Thoracic
and Cardiovascular Surgery
Bank: Standard Chartered Bank Berhad
Address: 33 & 35 Jalan Ipoh, 51200 Kuala Lumpur
Account Number: 873-1-5056385-8
Swift Code: SCBLMYKXXXX
Please send the transaction slip to the Secretariat.

Date: _____ Signature: _____