

Towards Zero CRBSI Workshop

Date, Time & Venue

25 November 2019

8.00 am – 5.00 pm

C23-03, Block C, 3-Two Square, No. 2,
Jalan 19/1, 46300 Petaling Jaya, Selangor

Since its introduction in 1964, haemodialysis has become one of the main modalities for the treatment of end-stage renal disease (ESRD). Central venous catheter (CVC) has become an important means in providing vascular access for haemodialysis treatment. Due to its nature as an indwelling catheter, there is an increased risk of developing catheter-related bloodstream infections (CRBSI). Thus, all healthcare staffs need to take the responsibility of infection prevention in their dialysis centres.

Topics

1. Hand Hygiene
2. Exit Site Care
3. Hub Care
4. Catheter Connection & Disconnection
5. Patient Education Component
6. Catheter Surveillance
7. Ensuring Staff Competency
8. Audit: Why, How, When & What

Certificate of completion
will be awarded for those
who complete the course

Course Fee

Early Bird Rate: *RM350/pax (before 8th November 2019)

Standard Rate : *RM400/pax

Group Registration : *RM350/pax (Minimum of 3 pax)

*Course fee is inclusive of meals and training kits

Registration

To register, please fill up the registration form and email to us at training@nkf.org.my OR fax it to 03-7960 2359

Due Date : 18th November 2019

LIMITED SEATS ONLY. RESERVE YOUR SEATS NOW!

Join Us

NKF TRAINING SDN. BHD.

on behalf of



Who Should Attend

Staff Nurses, Assistant Medical Officers, Dialysis Centre Managers, Dialysis Assistants, Medical Staff

Trainer

- Dr. Rosnawati binti Yahya (Nephrologist, HKL)
- Matron Victoria Agnes Mary (HKL)
- Sr. Zanariah bte Arsat (HKL)
- KUP Esukarni binti Kamaruddin (PPUM)
- KUP Che Nor Aini binti Che Awang (HKL)
- KUP Erlina Hayani binti Md Noor@Fauzi (HKL)

Contact Us

If you have further inquiry and need clarification regarding this matter, please do not hesitate to post your questions directly to:

Pn. Khairani / Pn. Farah

Tel: 603-7960 2301/02 |

Fax: 603-7960 2359

Email : khairani@nkf.org.my |

aa@nkf.org.my

“Towards Zero Catheter Infection in Dialysis” Program

	Duration	Topics	
0800-0820	20 mins	Introduction	Dr Rosna
0820-0840	20 mins	Hand Hygiene	KUP Esukarni
0840-0910	30 mins	Exit Site Care	Matron Victoria
0910-0940	30 mins	Hub Care	KUP Erlina
0940-1000	20 mins	Catheter Connection	Sr Zanariah
1000-1020	20 mins	Catheter Disconnection	KUP Che Nor Aini
1020-1040	20 mins	Break	
1040-1310	Break-Up Hands-On sessions (5-6 per group)		
	Station 1	Hand Hygiene	KUP Esukarni
	Station 2	Exit Site Care	Matron Victoria
	Station 3	Hub Care	KUP Erlina
	Station 4	Catheter Connection	Sr Zanariah
	Station 5	Catheter Disconnection	KUP Che Nor Aini
1310 -1410	Lunch		
1410 - 1430	Patient Education Component: Importance & How		Dr Rosnawati
1430 -1500	Catheter Surveillance <ul style="list-style-type: none"> • At Dialysis Centre – How to collect and Data Submission • At Hospital level 		Dr Rosnawati
1500 -1530	Ensuring Staff Competency <ul style="list-style-type: none"> • Priveliging • Competency Evaluation 		Dr Rosnawati
1530-1700	Audit: Why, how, when and what <ul style="list-style-type: none"> • Hand Hygiene • Exit site Care • Hub Care • Catheter Connection • Catheter Disconnection 		Matron Victoria
	Tea & End		



REGISTRATION FORM

Towards Zero CRBSI Workshop

Name of Participant: _____ I/C No.: _____

Designation : _____ Mobile No.: _____

Company : _____

Address : _____

Telephone No. : _____ Fax No. : _____

Email Address : _____

Group Registration: Please provide name list with I/C number

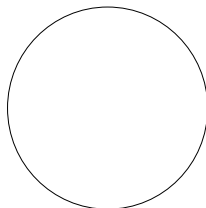
No.	Name	I/C No.

Registration type	Course Fee
Individual Registration	<input type="checkbox"/> RM 350.00 (Early Bird – before 8 th November 2019) <input type="checkbox"/> RM 400.00 (Standard Rate)
Group Registration (Minimum of 3 pax)	<input type="checkbox"/> RM 350.00 X (No. of Pax : _____) Total = RM _____

*Management has the right to change the date of the event with notice given in advance.

*All payments (i.e. fund transfer/internet banking/cheque) are to be made in favour of the “NKF Training Sdn. Bhd.”, CIMB Bank Account No.: **8010129570**. Please email/fax to us a copy of the payment receipt/slip.

I/We hereby declare that I/we have read and understood the contents of the privacy notice of NKF displayed on the NKF website at www.nkf.org.my and confirm my/our consent for NKF to use my/our personal data for the purposes and to the parties stated in the privacy notice.



Signature of Employer

Company Stamp

Date :

CLOSING DATE FOR APPLICATIONS NOT LATER THAN 18th NOVEMBER 2019

Please fill up this registration form and **email** to us at training@nkf.org.my or **fax** it to **03-7960 2359**