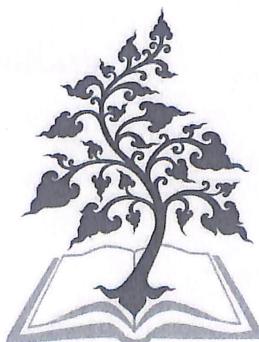


เอกสาร

งานด้านที่ปรึกษา การประชุม และการอบรม

- การอบรมแพทย์ส่วนภูมิภาคเรื่อง การอบรมศัลยกรรม

ม.ป.ป.



หอจดหมายเหตุ
และพิพิธภัณฑ์สุขภาพไทย
National Health Archives and Museum

(14) พ.ว 1.3/1.14 รับรอง น.ส.ว.

เอกสารส่วนบุคคล ศาสตราจารย์นายแพทย์เสมอ พริ้งพวงแก้ว

สม ๑

• 3/1.14 รายบุคคล ศาสตราจารย์นายแพทย์เสมอ พริ้งพวงแก้ว (ชื่อเรื่อง)

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พ.ศ. ๒๕๖๑

จำนวน แผ่น

แฟ้มที่ ๑๐

กล่องที่ ๔

POST-GRAD. COURSE FOR PROVINCIAL DOCTORS IN:-

THORACIC SURGERY

Personell: 10-15 well trained provincial surgeon as nucleus.

+ 30 others for lectures only.

Formation 4 - 5 - 6 days of lectures by Dept. Med. Serv.

Med. Education.

T.B. Hosp.

Personell.

2 - 3 wks. of practical for the 10-15 surgeons. in which they;

1) Assist at operations.

2) " - Bronchoscopies.

3) " - Bronchogram.

--- ") - Fluoroscopy.

2) Attend Med-Surg. Chest Clinics.

3) X-rays reading sessions.

4) Special Chest Round @ Various Hospitals.

Pre-Course Required Reading :

1) Anatomy. of Broncho-Pulm. Tree

2) Anatomy of Hilum.

3) Techniques of Bronchoscopy

4) Physiology of Respiration

5) Anesthesia in Thoracic Surgery

6) Post-op. Respiratory Problem.

7) Chest Injuries

8) Indications for Surgery in Tbc.

9) Pathology of Lung Tumors.

10) Theory of Chest Injuries.

11) Techniques of Tracheotomy.

12) Techniques of Thoracoplasty.

13) Mediastinal Tumors.

Lectures.

1) Anatomy of Broncho-Pulm Tree Practical Importance, Bronchoscopic appearance.

2) Bronchograms ; Techniques

Appearance - Normal

- Abnormal.

3) Anatomy of Hilum Practical Importance in Resection.

3a) Anesthesia in Thoracic Surgery (²⁻³ sessions)

4) X-ray interpretation of Normal Chest Film.

Location of Hilar shadows, Fissures, & Heart Chambers.

5) Physiology of Respiration - Intrapleural Pressure

- O₂ & CO₂ exchange.

Atelectasis, Cheyne-Stokes.

6) Trauma; a) Frx ribs

b) Flail chest

c) Tension Pneumothorax.

d) Hemothorax.

e) Open wound of chest.

f) Old Hemothorax & Decortication, Indication & Technique.

g) Trachostomy in Chest injury.

7) Infection; a)

- 7) Infection ;-- a) Complications of Pneumonia requiring surgery.
- i) Collapse
 - ii) Abscess
 - iii) Empyema.
- b) Empyema - non Tbc.
- c) Lung abscess
- d) Pericarditis - suppurative.
- e) Bronchiectasis.
- f) Fungus infections.
- 8) T.b. ----- a) Pathology c emphasis on cavitation.
- b) Pleural effusion
- c) Primary complex & Tb. in children
- i) Middle lobe syndrome
 - ii) BCG.
- d) Tuberculoma
- e) Tbc unresolved cavity.
- f) Drug therapy - Types & length of Rx.
- g) Indications for Surgery
- h) Pneumothorax & Pneumoperitoneum. Phrenic crush & Plombage.
- i) Thoracoplasty - Techniques & Indication
- j) Resection - Techniques & Indication
- 9) Tumors ; ---- a) Pathology p Types of Tumors, location & X-ray appearance.
- b) Benign lung Tumors-Pulm. Sequestration, Hamartoma, etc.
- c) Bronchial Adenomas, X-ray appearance, Bronchoscopy, course, Rx.
- d) Carcinoma ; (2 sessions at least)
- Smoking, Pathology, X-ray appearance, Bronchoscopic appearance, Indication & Types of Surg., Signs of Inoperability, X-ray Rx., N₂ Mustard & Chemotherapy.
- 10) Post-op. --Airway obstruction- Atalectasis, Interpretation of X-ray.
- Care of drainage Tubes.
- Fluid & Electrolyte Rx.

Post. Lecture Sessions. (for surgeons only)

Sem, Kasarn, Kumpol, Smarn, Soravudhi, Somboon, Etc. as instructors.

Morning op. - Sessions where Students assist at Thoracotomies, Cases to be saved up in advance.

After-noon - Bronchoscopy sessions at various hospitals.

Chest Surg-med sessions

Fluoroscopy

X-ray reading sessions

Ward Rounds on Chest Cases.

Bronchography

Dog surgery if possible.

Thoracotomy.

Lobectomy

Rib resection.

Suture of large vessel.

Post-Course Provincial Hospital Sessions

Directors to save up 6-8 cases of Chest surgery!

Ask USOM, WHO, etc, to send a Thoracic Surgeon and anesthetist (? Thai) to work 4-5 days in each Thoracic Surgical Center. total ?1½ months.

Instrument & Equipment List for Each Hospital

Cuffed endotrachal tubes

Anesthesia Machine

Rib spreaders

Rib approximators

Long Clamps (Tonsil)

Bronchoscope

Suction

Vascular Clamps

Grad. Course for Provincial
Doctors in

of Thoracic Surgery

Personnel: 10-15 Well Trained Provincial Surgeons as nucleus.
± 30 others for lectures only.

Format: 4-5-6 days of lectures by Dept. Medi. Serv. } Personnel
Med. Educat. }
T.B. Hosp.

2-3 weeks of practical for the 10-15 surgeons, in which

- They: 1) Assist at operations
a) Bronchoscopy.
a) Bronchogram
+ Fluoroscopy.
2) Attend Medi-Surg. Chest Clinics.
3) X-ray reading sessions
4) Special Chest Rounds @ Various Hospitals.

Pre-Course Required Reading: 1) Anatomy of Bronch-Pulm. Tree
2) Anatomy of Hilum.

- 3) Techniques of Bronchoscopy
4) Physiology of Respiration
5) Anesthesia in Thoracic Surgery
6) Post-Op. Respiratory Problems.
7) Chest Injuries
8) Indications for Surgery in Tbc.
9) Pathology of Lung Tumors
10) Therapy of Chest Injuries
11) Technique of Tracheotomy.
12) Technique of Thoracoplasty.
13) Mediastinal Tumors.

Lectures: #1

1) Anatomy of Bronch-Pulm Tree - Practical Importance.
Bronchoscopic Appearance.

2) Bronchograms: Normal.

Appearance - Normal

a) Abnormal.

3) Anatomy of Hilum - Practical Importance in Resection.

3a) Anesthesia in Thoracic Surgery (2-3 sessions)

4) X-ray interpretation of Normal Chest Film.

Logion of hilar shadows, Fissures & heart chambers.

5) Physiology of Respiration - Intrapulonal Pressure

CO₂ Exchange.

- 6) Trauma:
- F. ribs
 - Flat chest
 - Tension Pneumothorax.
 - Hemothorax.
 - Open wound of chest related to head injury.
 - Old hemothorax & Decortication. Indications & Techniques.
 - Tracheostomy in acute injuries.

7) Infection:

- Complications of Pneumonia requiring surgery.

 - Collapse
 - Abscess
 - Empyema.

b) Empyema - Non TB.

c) Lung Abscess

d) Pericarditis - Suppurative.

e) Fungal Infections.

a) TB:

a) Pathology - emphasis on cavitation.

b) Pleural Effusion

c) Primary complex & TB in children

- Middle lobe syndrome
- BCG.

d) Tuberculoma

e) The unresolved cavity.

f) Mycobacteria - Types & length of R.

g) Tissue reaction - to tubercle bacilli.

h) Pneumothorax & Pneumoperitoneum. Pressure crutch & Plombage.

i) Thoracoplasty - Techniques & Indications.

j) Resection, Techniques & Indications.

- g) Tumors:
- Pathology - Types & Tumor location, X-ray appearance.
 - Benign lung tumors - Polyp, Papilloma, Hamartoma, etc.
 - Bronchial Adenoma - Histology, early A.
 - Carcinoma (2 sections - bronchogenic & endobronchial). Pathology, X-ray appearance, Prognosis.

Nitrogen Mustard & Chemotherapy.

10. Post-Op - Airway obstruction - Atelectasis Interpretation of X-ray
use of drainage tubes
Fluid & electrolyte Rx.

Post Lecture Sessions. (or bedside etc.)

Slim, Kasarn, Kunkol, Smarn, Somvadh, S. Deenboon, etc.
as Instructors.

Morning Op. Session where students assist at Thoracotomy
Cases to be saved up in advance

Afternoon Bronchoscopy sessions at various hosp. fall.

Chest Surg-Med Sessions

Fluoroscopy

X-ray reading sessions

Ward Rounds on Chest cases.

Bronchography.

Dog surgery if possible.

Thoracotomy.

Lobectomy.

Rib resection.

Suturing of large vessel.

Post-Course Provincial Hospital Sessions

Directors To save up 6-8 Chest cases.

Ask USOM, WHO, etc To send a Thoracic Surgeon and anesthetist (? Day)

To work 4-5 days in each Thoracic Surgical Center.

Total ? 1½ months.

Instrument & Equipment list for Each Hospital

cuffed endotracheal tubes

Anesthesia Machine

Rib spreaders.

" Approximators

Long Clamp (Tonsil)

Bronchoscope

Suction

Vascular Clamps

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30758 }

TWA.

Loc 32966-2
Rome 70231-
Atlas

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Quarto En Srl
Via Piave 119-121
Sun 11:55 → 11:45 AM
~~11:55 → 11:45 PM~~

SA 5 Sat. 21:45 (9:45)
Aug 20 1:20 P.M.
11:20 P.M.