URL: <http://www.parkwayhealth.com/hospitals/singapore/east-shore-hospital/index.asp>



123-bed private general acute care hospital, with an outreach specialist centre in Eastern Singapore providing a wide range of medical and surgical facilities. East Shore Hospital has built a loyal niche among residents in Eastern Singapore for its personalised care approach, convenient location and user-friendly services.

**Mission**: Our sights are set on establishing ourselves to be leaders in providing seamless, comprehensive healthcare of the highest quality, based on specific values, as well as to focus on creating and maintaining value for our people, patients, and shareholders.

## Vision: We know that in our business, when we provide the best quality patient experience, very much everything else takes care of itself. Above all, our people are called to do their best to achieve the highest quality care to those entrusted to us.

**We Value**: **People** above all… by treating those we serve and each other with compassion, dignity, integrity and mutual respect.

**Excellence**... by striving for the finest clinical, service and operational outcomes.

**Results**... by exceeding the expectations of the people we serve and those we set for ourselves.

## Imaging services:

Medi-Rad Associates comprises of a team of experienced specialist radiologists and healthcare professionals, providing a range of diagnostic and therapeutic radiology services.

**Laboratory services:**

Clinical Laboratory Services

* Haematology & Immunohaematology
* Biochemistry
* Immunology & Serology
* Hormone
* Therapeutic Drug Monitoring
* Drug of Abuse Screen
* Body Fluids, Seminal Fluid, Urine & Stool Analysis
* Microbiology
* Clinical Molecular (PCR Testing) & Specialised Testing

**Histopathology Services**

* Cytology
* Histology
* Triple Testing for Down’s Syndrome

**Genetics Services**

* Prenatal Karyotyping
* Perinatal, Paediatric and Adult Karyotyping
* Oncology Karyotyping
* Special Cytogenetics Tests (Fragile X, Fanconi’s Anaemia, Bloom’s Syndrome, Ataxia Telangiectasia, Fluorescent In-Situ Hybridisation)
* Molecular Genetics Testing
* HER-2/neu FISH (Breast Cancer)
* PCR Female/Male (General Infertility)



**Services available in the hospital:**

### Neurological Services Available

#### **Preventive Care**

Patients undergo a Health Screening to identify any risk factors they may possess, such as cholesterol, hypertension and diabetes.

#### 

#### **Diagnostic Procedures**

* Computerized Tomography (CT) Scan
* Magnetic Resonance Imaging (MRI)
* Electroencephalogram (EEG)
* Electromyogram (EMG)
* Positron Emission Tomography (PET) Scan
* Digital Subtraction Angiography (DSA)

#### 

#### **Neurological Surgery available**

* Brain and Spinal Surgery
* Neurovascular Surgery
* Robotic Surgery

#### 

#### **Stereotactic Radiosurgery**

* X-Knife Stereotactic Radiosurgery System (Mount Elizabeth Hospital)
* Tomotherapy - first machine in South East Asia (Mount Elizabeth Hospital)
* BrainLab Stereotactic Radiosurgery System (Gleneagles Hospital)

In Stereotactic Radiosurgery, our hospitals use modern Linear Accelerators (Linac)-based systems for treating Intra-Cranial Tumours.

This highly accurate treatment allows us to deliver a good dose of radiation to the tumour without affecting the surrounding normal brain cells. This translates into a shortened recovery time, while also eliminating the need for patients to be hospitalised.

Treatment using our new Tomotherapy machine for cancer treatment has been available to patients since March 2006. With Tomotherapy, Radiation Oncologists can check the location of the patient’s tumour before each treatment, and subsequently, deliver painless and precise radiation therapy based on a carefully customised plan.

Rehabilitation may be needed for various types of neurological disorders. Comprehensive assessment and management is provided by our team of Occupational Therapists, Physiotherapists and Speech Therapists.

The aim of our programme is to rehabilitate patients, in order to ensure that they can confidently return to mainstream life as quickly as possible.

Recognizing the difficulties involved, our approach is to work closely with patients and their families to provide individualised rehabilitation.

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifNeuro-Rehabilitation Programme

Rehabilitation may be needed for various types of neurological disorders. Comprehensive assessment and management is provided by our team of occupational Therapists, Physiotherapists and Speech Therapists.

The aim of our programme is to rehabilitate patients, in order to ensure that they can confidently return to mainstream life as quickly as possible.

Recognizing the difficulties involved, our approach is to work closely with patients and their families to provide individualised rehabilitation.

#### **Physiotherapist’s Aim**

* Help patients to exercise their limbs and trunk in order to regain normal muscle movement and function
* Teach safe methods of transfer from one place to another
* Teach ambulation
* Correct abnormal walking patterns
* Teach stair climbing with or without handrails

#### 

#### **Occupational Therapist’s Aim**

* Retrain patients on activities of daily living (e.g. showering and dressing)
* Evaluate and prescribe aids/appliances
* Correct cognitive/perceptual problems

#### 

#### **Speech Therapist’s Aim**

* Identify different types of communication disorders and plan appropriate treatment
* Address cognitive deficits affecting the patient’s memory, orientation, reasoning, problem-solving abilities and planning therapy accordingly
* Identify swallowing disorders and planning treatment

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifStroke

A stroke occurs when blood supply to a part of the brain is disrupted. As a result, the brain cells are starved of oxygen, causing some to die, and damaging others.

#### **What are the type of stroke and how do they occur?**

There are two types of strokes:

* Ischemic Strokes are caused by the blockage of arteries supplying blood to the brain  
  (e.g. due to High Cholesterol)
* Hemorrhagic Strokes are caused by the rupturing of blood vessels in the brain  
  (e.g. due to High Blood Pressure)

#### **What are the Risk Factors ?**

* Old Age
* High Blood Pressure
* Smoking
* Diabetes Mellitus
* High Cholesterol

#### **How do we diagnose Stroke?**

The following tests may be performed:

* CT/MRI Scan of the brain to check the location of the blockage or bleeding in the brain, so as to determine the type of stroke the patient has suffered
* Blood Test to check for the presence risk factors (e.g. High Cholesterol and Diabetes Mellitus)
* Chest X-Ray/EEG to check for heart diseases
* Ultrasound studies, such as a Carotid Ultrasound, may be done to check for the narrowing of blood vessels in the neck area
* Angiogram, where an X –Ray of the blood supply in the brain is performed, so as to get information on the location and severity of the blockage or bleeding

#### **What are the treatments available for Stroke?**

Patients warded with stroke will be closely monitored, with special attention paid to their blood pressure, blood sugar and cholesterol levels.

Blood thinners like Aspirin may be used for Ischemic Stroke patients to allow for easier blood flow, while surgery may be needed for Hemorrhagic stroke patients.

The next phase of treatment is rehabilitation, which involves the help of a Physiotherapist/Speech Therapist. They will help train stroke patients to be independent in their daily activities.

#### **What is the Prognosis? (Chance of Recovery)**

Recovery varies depending on several factors, such as, the age of the patient and the severity of the stroke. Generally,

* 1/3 of patients fully recover
* 1/3 of patients partially recover
* 1/3 of patients do not recover at all

For more information, please call Parkway Neuroscience Programme

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifBrain Tumour

A brain tumour is a mass of abnormal cells in the brain.

They may be primary (originating from the brain) or metastatic (spread to the brain from other parts of the body).

All brain tumours are either benign (slow-growing and non-cancerous) or malignant (fast-growing and cancerous).

#### **What are the symptoms of Brain Tumour?**

Common symptoms of brain tumour include:

* Recurring headaches that may worsen in the morning
* Vision problem
* Weakness in one part of the body
* Loss of balance
* Nausea and vomiting
* Seizures or loss of consciousness

#### **What are the causes of Brain Tumour?**

Research has shown genetic abnormality to be linked to some brain tumours, but in most cases of brain tumours, the cause is scientifically unknown.

#### **How do we diagnose Brain Tumours?**

Generally, tests prior to diagnosis involve the following:

* Scan/MRI scan of the brain
* Comprehensive neurological examination by the doctor

#### **What are the Treatment Options**

* Surgery is usually used to remove as much of the tumour as possible.
* Radiosurgery – the application of accurately focused beams of radiation directly to the tumour – aims to arrest the growth of the tumour, with treatment usually taking a few hours and done using the Gamma Knife machine or Linear accelerator machine
* Fractionated Radiotherapy is used for cancerous brain tumours that cannot be removed completely by surgery alone, with the treatment aiming to kill the remnant tumour cells and is given in daily small doses over a period of between two to six weeks
* Chemotherapy involves the use of drugs – taken either orally or given intravenously – to kill the cancer cells

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifEpilepsy

A seizure is an abnormal electrical discharge from a group of brain cells. A person is diagnosed as having epilepsy when he has more than one seizure recurrently.

#### **What Causes Epilepsy?**

People with the following conditions can have epilepsy

* Brain injury
* Stroke
* Brain Tumour
* Brain Infection

In over 50% of cases, the actual cause cannot be found.

#### **What are the types of Epileptic Seizures and Symptoms?**

There are two types of Epileptic Seizures:

* Focal Seizures affect only one part of the body – patients may have sensory, motor or visual disturbances but usually remain conscious
* Generalized Seizures usually start as a focal seizure but spread through the whole brain, causing rhythmic muscular contraction and relaxation lasting between one to two minutes; patients may experience tongue biting and breathing difficulties

#### **How do we diagnose Epilepsy?**

Epilepsy is diagnosed based on information obtained from observers or patients themselves regarding the events that happened during the seizures.

Doctors may request for patients to undergo further tests, such as:

* CT/MRI Scan of the brain, which is done to review the structural causes of the epilepsy
* Electroencephalogram (EEG), where electrodes are placed on the head of patients, who are then asked to perform certain tasks to see if epilepsy is triggered

#### **What are the treatments available?**

**Medical Treatment**

Anti–epileptic medications are usually the first line of treatment and patients may require more than one type of medication depending on the type of seizure they experience.

**Surgical Treatment**

Brain surgery may be considered for patients who do not respond to anti-epileptic medication.

#### **What should i do when someone is having a Seizure?**

**Do**

* Remain calm
* Protect the person from injury
* Observe the duration of seizure

**Do not**

* Restrain the person unless he is in danger of hurting himself
* Put anything into his mouth
* Crowd around the person

#### What are the prevention and precautions?

**Prevent a seizure from recurring by following these precautions:**

* Remember to medicate
* Relax
* Have enough sleep

**Avoid the followings:**

* Swimming alone in the pool/sea
* Bathing in a bathtub
* Cooking alone with an open fire
* Climbing to high places

For more information, please call the Parkway Neuroscience Programme

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifSpine Services

#### Degenerative diseases of the Spine(Spondylosis)

Our spine is subjected to wear and tear, and the degeneration of the disc may cause it to bulge, thereby compressing the spinal cord. This will produce pain in the neck, back, or leg, and even numbness and weakness.

These degenerative disorders are diagnosed by imaging studies taken using a Magnetic Resonance Imaging (MRI) machine.

**Treatment**

Treatment varies based on the severity of the condition.

Conservative treatment, like medication, rest, and physiotherapy, will be the first line of treatment used.

Surgical intervention is only used for people with severe and painful symptoms so as to provide relief from pain. Options include:

* Microscopic Discectomy (removal of the damaged disc)
* Spinal fusions
* Artificial disc surgery, where the damaged disc is replaced with an implanted metallic disc
* Percutaneous pedicle screw (minimally invasive spine technique)
* Endoscopic discectomy (minimally invasive spine technique)

#### **Spinal Tumor**

Tumours growing in the spinal cord usually produce symptoms like back / leg pain, weakness, numbness of the leg and unsteady gait.

**Treatment**

Possible treatment usually includes surgery to relieve spinal cord pressure and to stabilize the spine.

Radiotherapy and Chemotherapy may be needed after surgery.

#### Spinal Traumas

Spinal injuries sustained from road traffic accidents are very common.

Spine fractures may cause pain or other neurological deficits, and surgery is needed in cases where the spine is rendered unstable or if there is a prolapsed disc causing cord compression.

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifBrain Aneurysm

A brain aneurysm is a balloon-like bulge in the wall of a brain artery. If this balloon bursts and bleeds, the surrounding brain cells may be damaged.

#### What are the causes of Brain Aneurysm?

A brain aneurysm usually occurs in an artery wall that has a defect or is weak.

It is often associated with the hardening of the arteries.

High blood pressure, heredity factors, or head injury are possible causes that might have led to a brain aneurysm.

#### What are the symptoms?

Most people will not have any symptoms until the aneurysm bleeds.

When the aneurysm bleeds, symptoms experienced include:

* Severe headache, nausea and vomiting
* Brief blackout
* Neck stiffness
* Vision or speech problems
* Jerking movements
* Paralysis or weakness on one side of the body

#### How do we diagnose Brain Aneurysm?

Brain aneurysms need to be treated as soon as possible – otherwise, they can be fatal.

A fast and accurate diagnosis is essential for recovery. The following tests may be performed:

**Cerebral Angiogram**

A special dye that is visible on X-ray is injected into an artery that supplies blood to the brain. The dye will show any obstruction and bleeding in the X-ray images taken.

**MRA**

A Magnetic Resonance Angiogram (MRA) is done with the use of an MRI scanner to show the 3-dimensional structure of the blood supply in the brain.

**CT Scan**

A CT Scan will be able to detect any bleeding in the brain after a burst aneurysm.

#### **What are the treatments available?**

If the aneurysm has already ruptured, the goal of treatment is to prevent bleeding/another rupture while preserving the artery from which the aneurysm originated.

If the aneurysm has not burst, the goal will be to prevent it from bursting.

**Surgery(Microsurgical Clipping of Aneurysm)**

The neurosurgeon puts a clip on the aneurysm where it bulges from the artery. This prevents the blood from entering the aneurysm. As a result, further bleeding is avoided and the surrounding brain tissue is protected from additional damage.

**Occlusion and Bypass**

It may be best to stop blood flow through the artery leading to the aneurysm. This is called occlusion and is usually done as open surgery.

Sometimes occlusion is done together with a bypass. A bypass re-routes blood around the occlusion. It brings blood to the part of the brain that has been fed by the damaged artery. A small blood vessel is used for the bypass.

**Endovascular Procedure**

An endovascular procedure may be the best option for some aneurysms.

This is done in the X-ray Lab by the interventional Neuroradiologist. During this procedure, a catheter is guided from the groin to the brain arteries. Platinum coils are released into the aneurysm causing a blood clot to form within and sealing it off.

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifSweaty Palms (Palmar Hyperhydrosis)

Sweaty palms is a condition where there is excessive, uncontrollable hand sweating. This condition can lead to severe psychological and social problems, forcing many to seek treatment.

#### **What causes it?**

The condition is caused by over-activity of the sympathetic nervous system, a system of nerves within our body over which we have no control.

#### **What are the treatments available?**

A surgery called the Endoscopic Sympathectomy can be used for severe cases of sweaty palms. It involves cutting a section of the sympathetic nerves through small openings (from one to three) in the armpit.

#### **What are the side effects of Surgery?**

After the operation, there may be slightly more sweat in the legs and trunk but this is usually quite tolerable.

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/index.asp)

### http://www.parkwayhealth.com/images/arr-right.gifArterio Venous Malformation (AVM)

### Heart and vascular procedures: Screening Procedures

#### Electrocardiogram (ECG)

The ECG is a recording of the heart's electrical activity and assesses the rate, rhythm, and possible cardiac enlargements. It may also detect underlying coronary artery disease. This non-invasive test is quick, safe and painless.

#### Trans-thoracic Echocardiogram (TTE)

Also known simply as an "Echo", this safe, painless test uses ultrasound to obtain images of the heart and its various structures. The sound waves bounce back from the heart's various components, producing images and sounds that can be used by the physician to detect abnormalities.

#### Chest X-ray

A basic chest x-ray provides valuable information on the general condition of the heart and thoracic cavity. The x-ray can indicate the size and position of the heart, and any abnormalities and changes in the lungs, which can serve as a primary indicator of heart failure or congenital abnormalities.

#### Cardiac Calcium Scoring

Cardiac calcium scoring is a procedure for detecting calcium build-up in the coronary arteries. Coronary artery calcium is a marker for the presence of atherosclerosis, or hardening of heart arteries. The test is fast, non-invasive, and absolutely painless.

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/heart.asp)

### http://www.parkwayhealth.com/images/arr-right.gifNon Invasive Diagnostic Procedures

#### Stress Test

This test is usually performed with the patient walking and/or running on a treadmill machine. ECG electrodes are attached to the body during the test to monitor the heart's electrical activity. Its main purpose is to assess the heart's performance under stress, exercise capacity and adequacy of blood supply to the heart.

#### Holter Monitoring

A Holter monitor is a portable device that continually monitors the electrical activity of a patient's heart over a period of time. Wires or electrodes from the monitor are taped to prepared areas of the patient's body, after which patients are sent home to go about their daily routines (except bathing), and to keep a diary of their activities, and any symptoms that may be experienced.

#### Ambulatory Blood Pressure Monitoring

A special blood pressure monitor is used to measure the patient's blood pressure readings intermittently over a 24-hour period. The patient is asked to keep a diary of his/her activities during the monitoring period.

#### Nuclear Perfusion Scan

This test is similar to the stress test, but can also be used to assess patients who are unable to exercise on a treadmill. It allows the physician to assess blood flow to the heart muscle. The test requires injections of a tracer into a vein in the arm for heart images to be captured with a gamma camera. Scanning is generally done twice (with up to 4–6 hour intervals in between), but at times, only post-stress images are required.

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/heart.asp)

### http://www.parkwayhealth.com/images/arr-right.gifInvasive Diagnostic Procedures

#### Coronary Angiogram

This X-ray procedure detects the presence of blockages within the coronary arteries. These blockages are usually the result of the progressive build-up of deposits within the walls of the blood vessels (atherosderosis). This is the "Gold-Standard" test for the diagnosis of coronary heart disease. It is required before a decision or recommendation on ballooning/stenting or bypass surgery can be made.

#### Trans-oesophageal Echocardiogram (TEE)

This procedure involves introducing a transducer into the oesophagus (the long tube that connects the throat to the stomach). Since the oesophagus is located just behind the heart, clearer images of the heart structures and valves can be obtained by this method. It is very useful for assessing heart valves (both native and artificial) and diseases involving the aorta.

#### Electrophysiological Study

This is a study of the functioning of the internal electrical circuitry of the heart, and is done for selected patients who have a problem with a sudden onset of tachycardia or fast heart rhythm, which can be a serious or even life threatening problem for some patients. The study is performed in a Cardiac Diagnostic Laboratory under local anaesthesia. A number of thin flexible electrical monitoring catheters are threaded into the patient veins, and positioned in various parts of the heart to monitor its internal electrical currents. This way, the source of the electrical abnormality can be diagnosed with pin-point accuracy. In many cases, after having localised the problem area in the heart, the offending abnormal electrical activity is neutralised. This procedure cures the patient permanently of the arrhythmia with very high success rates. The procedure is called Radio-Frequency Catheter Ablation (RFA).

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/heart.asp)

### http://www.parkwayhealth.com/images/arr-right.gifInterventional Procedures

#### Percutaneous Coronary Intervention

Percutaneous transluminal coronary angioplasty (PTCA) or balloon angioplasty is a widely-used technique for opening blocked arteries. The procedure widens the narrowing artery to improve blood flow. In most instances, a stent is also implanted following balloon angioplasty. A stent is a specially designed wire mesh used to prop open a narrow segment of the artery. Drug-coated stents are stents coated with very small amounts of medication that help to limit the amount of scar tissue that may form after stenting. Such stents ensure better long term results of the stented artery segment.

#### Radiofrequency Catheter Ablation Of Arrhythmias

This procedure is recommended for patients who have palpitations due to an abnormal heart rhythm caused by extra "nerves" in the heart or "short circuits". It is done by placing catheters in a blood vessel in the groin or neck to access the heart. The electrical system of the heart can be studied, and the cause of the palpitations determined. Then a decision can be made as to whether the condition is curable by using radiofrequency current through the catheter, to "burn" or get rid of the extra nerve or focus. It is done under light sedation and local anaesthetic. The usual length of stay in the hospital is one night after the procedure.

#### Pacemaker Implantation

Patients who have heart rates which are "too slow" for their needs may need a pacemaker. Too slow a heart rate may cause giddiness, breathlessness and fainting spells. A pacemaker is a small device that monitors the heart rate and automatically sends out a small electrical current to make the heart beat faster. A biventricular pacemaker is recommended for patients with heart failure when medication alone is not enough to control the symptoms.

Pacemaker implantation is done under local anaesthesia, and although it only takes one to two hours, patients are usually required to stay overnight after the procedure.

#### Defibrillator (AICD) Implantation

Patients who have had cardiac arrest due to ventricular fibrillation or ventricular tachycardia (two types of lethal arrhythmias) are candidates for an AICD (automatic implantable cardioverter defibrillator) implantation. Patients who are thought to be at high risk of developing these two arrhythmias are also candidates for the device.

The AICD is a small device like a heart pacemaker, but it is much more sophisticated than an ordinary pacemaker. This device automatically detects lethal arrhythmias, charges up, and delivers a shock to restart the heart. The procedure is similar to pacemaker implantation, except that deep sedation is required for the short period of testing of the device, to check if it can detect and stop the arrhythmia automatically by electric shock. Usually a one night stay in hospital is required after the procedure.

#### Thoracic Aortic Vascular Surgery And Endovascular Aneurysm Repair

The current standard surgical treatment of thoracic aortic aneurysm is the open-chest approach. The main purpose of open-chest surgery to treat a thoracic aneurysm is to replace the weakened portion or bulge of the aorta with a fabric tube called a graft. Repairing a thoracic aneurysm is surgically complicated, and requires an experienced thoracic surgical team, but neglecting the aneurysm would present a higher risk. In addition, whereas open thoracic aortic surgery is invasive and may require an open chest and heart lung machine (cardiopulmonary bypass), another method called the Endovascular Aneurysm Repair can achieve the same purpose of replacing the aneurysm using a minimally invasive method without cardiopulmonary bypass.

For example, for the replacement of a descending thoracic aortic aneurysm, a small 4–6 cm incision is made in the groin to expose the groin artery. An introducer, containing the crimped stent graft, is passed through a guide wire up the femoral artery into the descending aorta. Under X-ray fluoroscopic control, the introducer is positioned and pulled back to deploy the crimped endovascular graft, which expands out and self anchors to the neck of the aneurysm with fixation to the walls of the aorta. The aneurysm is excluded from the main blood circulation and prevented from rupture. This procedure is applicable in selected cases of thoracic aortic disease.

[back to top](http://www.parkwayhealth.com/medical-professional/clinical-programmes/heart.asp)

### http://www.parkwayhealth.com/images/arr-right.gifSurgical Procedures

**Procedures in oncology**: Breast cancer, lung cancer, colorectal cancer,

* **Orthopedic procedures:** Standard X-rays
* Computerized Tomography Scan (CT)
* Magnetic Resonance Imaging (MRI)
* MR (Magnetic Resonance) Arthrogram
* Dual energy X-ray absorptiometry (DXA)
* Electromyogram (EMG)
* Positron Emission Tomography (PET) Scan
* Diagnostic ultrasound
* Needle or open biopsy (for testing bone cancer)

**Surgery procedure:**

* General Surgery
* Minimally invasive Surgery
* Otorhinolaryncology
* Opthalmology
* Urology

**Our General Surgery procedures offered include:**

* Diagnostic
* Appendicectomy
* Adrenalectomy
* Cholecystectomy
* Exploration of the Common Bile Duct for Cholecdocholithiasis (bile duct stones)
* Anti-reflux Surgery for heartburn sufferers
* Hernia Repair
* Colon Surgery
* Intestinal Surgery
* Treatment of Morbid Obesity ( Lap Banding)

**Primary care procedure:**

Treatment of Acute Illnesses (non-emergency type) ,Chronic Disease Management , Vaccination ,Travel Advice ,Health Screening ,Medical Checkups - Pre-employment, Statutory, Annual, Pre-marital etc.

**Doctors in cardiology department:**

[Baldev Singh](http://www.parkwayhealth.com/doctors/details.asp?id=1420)

Cardiology

East Shore Hospital Baldev Singh  
East Shore Hospital

[Chee Tek Siong](http://www.parkwayhealth.com/doctors/details.asp?id=1425)

Cardiology

East Shore Hospital Chee Tek Siong  
East Shore Hospital

[Lim Cheok Peng](http://www.parkwayhealth.com/doctors/details.asp?id=1436)

Cardiology

East Shore Hospital Lim Cheok Peng  
East Shore Hospital

[Tan Kok Soon](http://www.parkwayhealth.com/doctors/details.asp?id=1447)

Cardiology

East Shore Hospital Tan Kok Soon  
East Shore Hospital

Doctors in orthopedic department

[Jeffrey Chew](http://www.parkwayhealth.com/doctors/details.asp?id=1482)

Orthopaedic Surgery

East Shore Hospital [Jeffrey Chew](http://www.hipandkneesurgery.com.sg)  
East Shore Hospital

[Leslie Leong Chi Sern](http://www.parkwayhealth.com/doctors/details.asp?id=1485)

Orthopaedic Surgery

East Shore Hospital Leslie Leong Chi Sern  
East Shore Hospital

[Liew Yow Ming](http://www.parkwayhealth.com/doctors/details.asp?id=1435)

Orthopaedic Surgery

East Shore Hospital Liew Yow Ming  
East Shore Hospital

[Razmi Bin Rahmat](http://www.parkwayhealth.com/doctors/details.asp?id=1484)

Orthopaedic Surgery

East Shore Hospital [Razmi Bin Rahmat](http://www.spinesurgery.com.sg)  
East Shore Hospital

[Teh Peng Hooi](http://www.parkwayhealth.com/doctors/details.asp?id=1448)

Orthopaedic Surgery

East Shore Hospital Teh Peng Hooi  
East Shore Hospital

[Yegappan Muthukaruppan](http://www.parkwayhealth.com/doctors/details.asp?id=1449)

Orthopaedic Surgery

East Shore Hospital [Yegappan Muthukaruppan](http://www.sportsshoulderelbow.com.sg)  
East Shore Hospital

Doctors in urology

[Chang Wei Yee](http://www.parkwayhealth.com/doctors/details.asp?id=1424)

Urology

East Shore Hospital Chang Wei Yee  
East Shore Hospital

[Damian Png Jin Chye](http://www.parkwayhealth.com/doctors/details.asp?id=1452)

Urology

East Shore Hospital Damian Png Jin Chye  
East Shore Hospital

[Sam Peh Oon Hui](http://www.parkwayhealth.com/doctors/details.asp?id=1444)

Urology

East Shore Hospital Sam Peh Oon Hui  
East Shore Hospital

Doctor in pediatric surgery

[Chui Chan Hon](http://www.parkwayhealth.com/doctors/details.asp?id=1426)

Paediatric Surgery

East Shore Hospital Chui Chan Hon  
East Shore Hospital

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