



*Healthcare Solution Provider*



**BP Healthcare Group**

**BP ALIVE!**  
**2008**

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**DATO' BEH CHUN CHUAN**  
*Founder and Chairman,  
BP Healthcare Group*



### Chairman's Message

The year 2007 has flown past so swiftly. I wonder if this is a sign of age, as we are now 26 years in the market or is it because we are happy and that's why time flies. Anyway, I must say this has been a busy year for all of us because BPHG was struggling to set up more new Diagnostic Centres (DCs) to make up 27 outlets to date.

Last year, the government implemented two acts, namely, the Pathology Act and the Private Healthcare Facilities & Services Act. These two acts have certainly affected the healthcare industry. Those that fail to meet the government's regulatory requirement may have to cease their operations and those in practice will have to adapt to the changes.

Luckily we are blessed and far-sighted. BPHG had anticipated long ago that these two major acts would be introduced. Therefore, the company implemented changes and adapted to them years before these acts were introduced.

BPHG supports the Ministry of Health (MOH) in introducing these two acts which can improve the healthcare delivery system in Malaysia which will benefit the public tremendously.

Last year, BPHG won awards for the following achievements:-

- 1) BPCL obtained full scope ISO 15189 accreditation.
- 2) All BPDC's were awarded Private Healthcare Facilities & Services Act certifications.
- 3) BPFT successfully expanded its ISO accreditations in various testings.
- 4) BPDC successfully passed its second part assessment for ISO 9001 certification, thus making history in Malaysia for being the first DC Chain in the country to achieve this certification.

The year 2007 has been a successful one for BPHG. Our group sales revenue increased considerably and many projects were launched. This was made possible through the support of the group's capable leaders, diligent staff and well planned investment projects.

BPHG will embark on the following projects in 2008:-

- 1) Wellness Coaching
- 2) Travel Clinic/Vaccination

- 3) Aesthetic medicine
- 4) Transforming certain BPDCs to BP Specialist Diagnostic Centres
- 5) Setting up more new DCs
- 6) Travel Kits
- 7) Prepaid BP Membership Card
- 8) Increasing investment in BPFT and introducing more facilities and securing additional testing accreditations.
- 9) BP Healthcare Bhd legalising and securing Clinical Waste transport license.
- 10) Moving our Operational HQ to Glenmarie Shah Alam
- 11) Collaboration with International Medical University, IMU for high end testing, CME and many other health related services.

I would like to take this opportunity to thank all my staff for all their hard work, cooperation and great understanding in making 2007 a successful year. I hope that we will work together as a team and soar to even greater heights next year. And with that, I wish all of you a Very Happy and Prosperous New Year.

**POH BEE KUAN**  
*Group Managing Director,  
BP Healthcare Group*



## Group Managing Director's Message

### Welcome to "BP ALIVE"!

This magazine is dedicated to our committed and loyal staff, our customers, our business associates and the general public. We would like to update you on the progress of BP Healthcare Group ("BPHG") which is always embarking on aggressive expansion plans.

Our growth strategy is always aimed at meeting the needs of our customers through improved quality service. BPHG is well-positioned to compete in today's complex operating environment owing to several key strengths. We listen to our customers and target areas that are important to them.

### Year 2007 was a year of achievement:

- 1) Our group and its investments achieved sales revenue > RM 100 million.
- 2) Our medical laboratory division, B.P. Clinical Lab Sdn. Bhd. ("BP Lab") secured full scope of ISO 15189 accreditation in December 2007. BP Lab operations are now on par with international standards for all scopes of medical laboratory services.
- 3) The food and industrial testing division, B.P. Food Testing Sdn. Bhd. extended its SAMM (MS ISO/IEC 17025) accreditation scope in September 2007 to cover antibiotics testing (chemical) besides nutrition facts/preservatives analysis and microbiology testing (food, water, swab and air samples).
- 4) Our diagnostic centre division, B.P. Diagnostic Centre Sdn. Bhd. ("BPDC") introduced Tele-radiology services in April 2007. This technology is in line with the global concern of doing away with environmental contamination. This technology involves no chemical and waste because it is "filmless" as the images are captured and stored and immediately transferred into digital form, making them readily available to be viewed thus enabling faster diagnosis and earlier treatment.  
  
Patients' waiting time is also reduced compared to traditional methods – all of which contribute to higher quality patient care.
- 5) VCLinic software solutions division, B.P. Business Solutions Sdn. Bhd. ("BPBS") has gained our customers' confidence with more subscribers and is the proven leading clinic management software in the country.  
  
Our new BPBS tagline "Transforming Good Practices into Great Businesses" introduced in August 2007 offer business solutions to doctors with information, business intelligence and IT capabilities to better manage their clinic practice.
- 6) The pharmacy division, Be-P Pharmacy Sdn. Bhd. has set up 2 more outlets in Ipoh and Cheras in January 2007. Nationwide DC dispensaries also help expand our pharmaceutical business and provide convenience to our patients.
- 7) The Medical Equipment and Consumables Division, Labpro Sdn. Bhd. introduced the latest medical equipment from overseas into our range of products. These include Proscan Computed Radiography System, an environmental and user friendly system, automated ESR machine and automatic balancing centrifuges.

BPHG is committed to serving our customers better all the time. Our year 2008 development and expansion plans include:

- 1) **Relocation of Operational Headquarter to Glenmarie, Selangor**  
We shall relocate our operational headquarter to Glenmarie in early 2008 for strategic and competitive reasons.
- 2) **More BPDC Outlets**  
We have established 21 BPDC outlets with an investment of more than RM 40 million.  
  
There are 6 new outlets (Alor Setar, Bayan Lepas, Parit Buntar, Kota Kinabalu, Kuchai Lama, Sungai Petani) commencing operation soon making the total number of BPDC outlets at 27 by the first quarter of 2008.  
  
Our objective is to set up 50 BPDC outlets nationwide by December 2009.  
  
We shall upgrade and enhance the services of some popular BPDC outlets to provide more specialised diagnostic services.  
  
Besides the ongoing expansion program in Malaysia, we shall also embark on international expansion of our healthcare business model when opportunities arise.

### 3) Develop An International Base for Research, Development and Innovation

All these years, BPHG has tie-ups with overseas Research & Development (R&D) and referral centres in USA, Australia and Singapore in medical laboratory testing services.

To effectively develop Malaysia into Asia's ideal R&D and referral base and to support the government measures to encourage businesses and the academics to increase research, development and innovation, BP Lab shall tie up with International Medical University (IMU) to establish a domestic international standard R&D centre. This centre shall also integrate resources of the private, government and the academic sectors to satisfy the needs of interdisciplinary professionals in promoting a knowledge-based economy.

### 4) BP Wellness Coaching

The general public usually perceives wellness or health checks as a yearly event but in fact, it should be a continuous monitoring and maintenance programme in order to enjoy a healthy lifestyle.

BPDC introduced BP Wellness Coaching in January 2008. It is a confidential partnership between an individual and our Wellness Coaches with the objective of helping our customers to achieve his/her wellness goal. Our Wellness Coaches are led by a team of professional medical personnel which include specialists, medical doctors, pharmacists, nutritionists/dieticians and nurses.

It is a new concept to help people become masters of their wellness.

### 5) Expansion of Tele-radiology Services

Currently, Tele-radiology is implemented in a few BPDC outlets. We hope to expand this service nationwide in 2008 in view of its environmentally friendly modus operandi, no exposure to chemical waste, faster results turnaround time and shorter patient waiting time.

The recognition and adoption of digitization of x-ray images and Tele-radiology will harness the advantages of this technology and make Malaysia's healthcare institutions a seamless environment in medical imaging and position the country as a medical imaging hub.

### 6) Expansion of Pharmacy Services

With more BPDC outlets which include pharmacy dispensary services, we hope the public will enjoy more professional and personalized free medicine check up services at our outlets as part of our community services.

### 7) Continuous Medical Education

No efforts are spared in Continuous Medical Education for BP staff, more than 300 of whom are professionals.

BPHG shall continue to sponsor our doctors and other professionals to attend various courses and seminars on radiology, sonography, occupational health, aesthetic medicine and other specialized subjects. This is an integral part of our strategic planning exercise to enhance the performance and delivery system of our company.

Thank you for supporting us.

## BP DIAGNOSTIC CENTRE



The objective of BPDC is to provide wholesome healthcare services with focus on diagnostic and preventive healthcare. BPDC is built on a non-hospital set-up, with resulting personalized service, high efficiency and cost effectiveness, while still maintaining well-trained medical professionals and the latest premium quality equipment with a high level of IT application.

We provide medical consultation, examination, diagnostic services, treatment and specialist referral, supported by nutritionists' and pharmacists' services, in dealing with health screening, follow-up of chronic diseases, foreign worker examination, insurance medical examination and various health programs. Digital recording and life-long storage of medical data of our patients enable worldwide referral 24/7.

### Our services include:

- ◆ **Blood & Urine Examination**  
From basic to more specialized laboratory testing in various disciplines e.g. haematology, biochemistry, microbiology, serology etc.
- ◆ **Liquid-based cytology (LC-prep) pap-smear**  
Pap smear examination of cervical cells is the most important test in screening of cervical cancer, which is one of the commonest cancers among females. The new generation LC prep method has improved the accuracy of this examination by 2 to 3 fold compared to conventional pap-smear.
- ◆ **Body Composition Analysis**  
Using Bioelectric Impedance Analysis, it checks for various body compositions including water, protein, mineral and fat contents. It helps in the screening for metabolic syndrome which carries
- high risk of diabetes, high blood pressure, heart disease etc.
- ◆ **Bone Mineral Density Test**  
Using ultrasound based bone density testing, which corresponds well with the accuracy of x-ray based DEXA method which is more expensive and cumbersome, it screens for osteoporosis and allows for early prevention or treatment.
- ◆ **Lung Function Test (Spirometry)**  
By recording the various parameters on forced expiration, it allows doctor to evaluate the respiratory function of a person and help in detecting lung conditions like asthma, chronic bronchitis, occupational lung diseases etc.
- ◆ **Resting ECG Test**  
An electrocardiogram (ECG) is a recording of the heart's electrical activity as a series of waves that can show the heart rate and rhythm, detects enlargement and reduced blood supply to different parts of the heart, abnormal conduction of impulses and many other conditions.
- ◆ **Stress Test**  
A special type of ECG that compares the heart's electrical activity at rest and under exertion. This is a more sensitive and accurate test for coronary heart disease, heart function, rhythm abnormalities and other heart problems.
- ◆ **Ultrasound Imaging**  
Ultrasound is a non-invasive, affordable and yet effective imaging technique. Our digital colour ultrasound systems enable us to provide a wide range of ultrasound examinations including abdominal and pelvic organs, breast, thyroid, carotid arteries and many other body parts.



◆ **Digital x-ray Services**

X-ray imaging allows examinations of various body system, including chest (heart, lungs) bones & joints, and some soft tissue. Digital radiography is a new step in medical x-ray imaging producing high resolution images in digital format that enables doctors to seek virtual consultation between one another via teleradiology solutions. BPDC is the first in this region to implement this service.



◆ **Consultation Services by Pharmacist and Nutritionist**

Our in-house pharmacists and nutritionists give value added services in providing information and education in prescribed medications as well as nutritional supplements, lifestyle and diet.

BPDC is the first in this region to embark on teleradiology and will be adding Aesthetic programs to its long list of services soon. Other programs available include Occupational Health Services and Community Health Education activities.

◆ **Biopsy Services**

Fine needle aspiration biopsy (FNAC) and ultrasound guided biopsy services are available from our resident pathologists and radiologists. This helps doctors to evaluate the nature of some growth or diseases, e.g. of breast, thyroid, liver, kidney etc.

At BPDC, we strive for continuous improvement and transformation of our services with ISO 9001 certification. In addition our laboratory already has ISO 15189 accreditation.

◆ **Audiometry**

This defines a person's hearing sensitivity under various sound volumes and frequencies, to detect hearing impairment from occupational noise exposure, age-related or other causes of hearing loss.

◆ **Professional Medical Consultation**

All BPDC are manned by qualified and trained medical doctors to provide professional and personalized consultation and care.



**Dr. Tan Kia Gin**  
*Chief Medical Officer*  
*BP Diagnostic Centre*

## BP LAB



BP Lab is principally involved in the provision of medical diagnostic tests/products and analyses. In its strive for excellence and quality recognition, it has progressively addressed the following:

- a. Building of a competent workforce of professionals who are knowledgeable in their fields.
- b. Continual updating and installation of automated, high-tech instrumentations and systems.
- c. Participation in challenges to conformity assessments so as to ensure high quality of standards and compliance of special requirements relating to products, services, systems and personnel.

Therefore, for the above-mentioned reason, it has undergone accreditation exercises by the national standards and accreditation body for Malaysia, Department of Standards, under the Laboratory Accreditation Scheme of Malaysia and meeting the stringent requirements of ISO 15189.

BP Lab has been accredited successfully for the following:

- a. MS ISO 9001:2000 Quality Management System requirements.
- b. MS ISO 15189 Full Scope in Medical Laboratory Testing.

All the above activities undoubtedly reflect BP's policy and commitment to provide excellent quality services to our clients and customers and assurance of customer satisfaction.



**Madam Tan Chiew Guat**  
*Technical Consultant*  
*HQ Laboratory, Ipoh.*

## BP PHARMACY



### BP – Your 1st Choice Travel Partner

I am honoured to be given the opportunity to pen a few words for our 2nd BP Alive Magazine. I joined BP Healthcare Group in September 2007.

With my experience as a registered pharmacist in England, I hope that I will be able to contribute some ideas to the company.

### BP Travel Clinic

BP Diagnostic Centre (DC) is introducing BP Travel Clinic/Vaccination this year. Vaccination before travel is recommended for immunisation against certain diseases to ensure that you stay healthy and enjoy your travels. Our team of medical doctors will advise you on the types of travel vaccines that you need depending on your destination. Do visit your nearest outlet before you travel.

The following are the list of vaccinations available at all our outlets:-

- ◆ Hepatitis A
- ◆ Hepatitis B
- ◆ Hepatitis A + B
- ◆ Typhoid fever
- ◆ Cholera
- ◆ Influenza
- ◆ Chicken pox
- ◆ Measles, Mumps and Rubella (MMR)
- ◆ Meningococcal

### BP Travel Kit

I am glad to inform you that BP Pharmacy has launched our new BP Travel Kit.

The travel kits are now available at all our BPDC and pharmacies.

This kit is the SOLUTION to travellers who are afraid that their holidays can be spoiled by travel illnesses.

This kit comes with a compact bag for optimal organization of medications and includes all the necessary medications to provide symptomatic relief and aid recovery of travel illnesses. Our highly professional team of healthcare professionals has put together a user-friendly manual to guide the customers on how to take or use the medications in the kit.

### Advantages of BP Travel Kit :-

- ◆ Cheaper – compared to overseas medicines
- ◆ Language barrier is not a problem – Travellers can have difficulty explaining their requirements in a foreign language. Similarly, a doctor or a pharmacist overseas might not be able to give sufficient information about medicines that they have supplied or prescribed.



- ◆ Availability of medicines – In some developing countries or remote areas, a good range of medical supplies might not be available or a specific medicine needed to treat a chronic condition might not be marketed.
- ◆ Quality of medicines – Counterfeit or poor quality medicines might be supplied in some developing countries. BP Healthcare group or BP Pharmacy purchases medicines from reputable sources.
- ◆ Hassle-free / Ready packed – No more headaches while packing - Buy & just enjoy your holiday
- ◆ All in ONE – We dispense our medicines in blister packs and each medicine comes together with their own information (i.e. dosage & indication). The kit comes with a separate compartment for storing your current medicines or toiletries.
- ◆ Well designed package – This travel kit is space saving and well packaged
- ◆ 24/7 - FREE e-consult while you are overseas
- ◆ Available access to direct telephone consultation during Malaysia office hours with our medical doctors or pharmacists.
- ◆ 2 years guarantee – The contents of the medicines are exchangeable as long customers retain their receipt and guarantee card. The guarantee will last for 2 years from the date of purchase

#### BP Audio

You are invited to listen to a selection of audio clips online with our new BP Audio Pharmacy. We are one of the 1st ever online audio pharmacies in the country. The audio clips provide you with crucial healthcare.

#### BP Health Library

We have also introduced BP Health Library online. You will be able to find an extensive library of articles on a variety of diseases from this database. Each article is written by our in house healthcare professionals and designed to provide insight into each condition and its treatment.

We celebrated our 25th anniversary in conjunction with Malaysia's 50th Merdeka celebration last year. It has definitely been a great year and we look forward to jazz em' up this year with these new services. Thank you for supporting BP Healthcare Group.



**Lovy Beh**  
*Director / Pharmacist*

## LABPRO



Since its establishment in 2004, Labpro has continuously increased its range of medical products in line with its objective to provide high quality products and engineering services at minimal cost.

This has been a very exciting year for Labpro with the introduction of several new technologies in the healthcare sector.

### Computed Radiography (CR)-System

PROSCAN is a modern, high resolution scanner for imaging plates. It transfers x-ray information saved on the imaging plate into a digital signal. It comes with a user-friendly software which operates the CR-Scanner and routes the images automatically to a Picture Archiving & Communication System (PACS).

Due to the fast scanning process, x-ray images are provided quickly for a reliable diagnosis. Misreadings as a result of overexposure or underexposure are almost impossible with this CR-technology due to the high exposure tolerance.

This worthwhile investment brings the immediate benefit of no longer needing to work with chemicals and their disposal and the cleaning of a processor. Expensive printouts on film are not required and diagnosis can be done quickly and reliably on a diagnostic monitor. The imaging plates can be re-used and you can still continue to use your existing x-ray unit.

Users decide where to place the compact PROSCAN. The operation can take place under normal lighting which means that a darkroom is no longer necessary. Due to its compact design the PROSCAN is suitable for mobile applications.

There will be easy changeover for the radiographer because the handling is comparable to that of films.

Labpro is currently working on a Tele-radiology Project with BP Healthcare Group to digitize all their Diagnostic Centers. With this technology, the radiologist will be able to view all the X-ray images via his diagnostic terminal.

### Automatic Balancing Centrifuge

The Labmaster ABC-GF35R is an Automatic Balancing Centrifuge from Korea. It is a refrigerated floor standing type centrifuge and specifically designed for the separation of serum and plasma.

The centrifuge is designed to fully support laboratory automation for clinical labs and hospitals using its patented automatic balancing mechanism in the rotor system. This reduces the manual job of weighing samples and balancing its configuration.

Using the high precision weight detection sensor that is installed inside the system, the centrifuge measures the sample's weight of each bucket accurately and then controls its rotor arm automatically to compensate the difference in weight up to 350g.

### Automated ESR Analyzer

Another exclusive product is the Automated ESR Analyzer from Italy. This analyzer is able to meet customers' changing laboratory demand for faster, safer and efficient usage. It also correlates with Westergren method of EDTA collected sample, enables tube identification through barcode reader and provides automatic reading and printing of results in only 20 seconds with only 30µl blood required.

### Excellent after-sales services

With our principal backup and dedicated technical team, we are able to provide 3S service (sales, service, support) where customers enjoy quick response on technical support, consumables and warranty service. We also provide the latest development on machine upgrade, for example, software update at minimum cost.

Lastly, we would like to thank our valued customers for their support as we strive to render the best possible service to all of you.



**Reuben Poh**  
*Deputy Group Managing Director  
Clinical Waste, Labpro, Pharmacy  
& BP Business Solutions*

## BP BUSINESS SOLUTIONS



### BPBS - Transforming Good Practices into Great Businesses

BPBS was officially introduced in May 2004 with its Vision "Creating Joy 2 Doctors" with the aim of reducing the burden of paperwork and the stress faced by doctors in managing their clinics. Today, BPBS vClinic is the leading clinic management software in the market.

Through valuable feedback from our loyal users, BPBS has further enhanced its software to meet the requirements of the Private Healthcare Facilities and Services Act (1998) and Regulations (2006)

Today, BPBS is already an established brand name in the Malaysian healthcare industry and our users are now experts at using the user-friendly BPBS software.

As such, BPBS will be embarking on the 2nd development phase which is on business intelligence. In this phase, we shall transform good medical practices into great businesses.

BPBS is not merely offering doctors a system for keeping their patients' medical records but is also providing the information, business edge and IT capabilities to manage their practice better and build closer relationships with their patients in the long run. Our BPBS team of experts are available to fulfill our users' demands on data analysis and new business requirements.

Congratulations to all BPBS users who have faith in us!

Our smart partnership has created BPBS 2nd phase vision i.e Transforming Good Practices into Great Businesses

Thank you for your support and may we continue to climb to greater heights!

### NEW BPBS FEATURES

#### Private Healthcare Facilities and Services Act 1998 compliant

With the implementation of the Private Healthcare Facilities and Services Act (PHFSA) 1998 and its Regulations 2006 by the Ministry of Health (MOH), BPBS has moved one step ahead to customize its vClinic to meet MOH's requirements. With the latest vClinic 10.1, doctors can rest assured that all reports which are required by MOH can be obtained within seconds with just a few clicks:-

- 1) Operation/Anesthetic Consent Form

KLINGON BPBS 100, Persiaran Kuala Lumpur 50450 Kuala Lumpur		CONSENT FORM
Patient Details		
Name: <u>HAZARAH BINTI AHMAD</u>	IC No: <u>9807140-1141</u>	
Age: <u>34</u>	Sex: <u>F</u>	Dr: <u>DR. ABC</u>
Unit: <u>1001</u>	Ward: <u>1001</u>	Room: <u>1001</u>
<b>CONSENT</b>		
I, <u>HAZARAH BINTI AHMAD</u> IC No: <u>9807140-1141</u>		
Age: <u>34</u>		
I hereby consent to the following operation/procedure(s): <u>_____</u>		
I understand that the risks and complications of the above operation/procedure(s) have been explained to me by the doctor.		
I also consent to such emergency operation/procedure(s) as may be found necessary to be performed during the course of the operation/procedure(s) stated above.		
I have read and understand the above information and I am satisfied that I have made an informed decision.		
In accordance with the above stated operation/procedure(s), I consent to the administration of such anaesthesia as may be considered by the anaesthetist to be necessary or suitable. This guarantee is given on the basis of the written consent of the anaesthetist.		
I understand that the anaesthetist is not responsible for any complications or death which may occur as a result of the above operation/procedure(s) and I accept full responsibility for any such complications or death.		
Date: <u>1/1/2011</u>		
Signature of Patient:	Signature of Doctor:	IC No:
_____	_____	_____
<b>CONSENTATION</b>		
I, <u>DR. ABC</u> have explained to the patient/next of kin the nature and extent of the above operation/procedure(s) and I am satisfied that the patient/next of kin has given informed consent to the above operation/procedure(s) and I accept full responsibility for any such complications or death.		
Date: <u>1/1/2011</u>		
Signature of Doctor: _____		



2) FOMEMA Consent form

**KLINIK SPDS**  
275, Jalan Perak  
Ipoh, Perak  
Tel: 051337198

**CONSENT & AUTHORISATION BY FOREIGN WORKER**

This is to certify that I, JALAFAR BIN AHMAD

worker's code \_\_\_\_\_ passport number 9902748-2342

freely, voluntarily consent and authorize DR. JIC of  
KLINIK SPDS to:

1. carry out a medical examination on me including the testing of blood and urine and the taking of chest x-ray as required by the FOMEMA screening programme and,

2. disclose my health-related records and any other health information to FOMEMA, SPM, MAM, the Ministry of Health Malaysia, the Immigration Department and any other relevant authorities, in and where it is required to do so.

Signature of Investigator of Foreign Worker: \_\_\_\_\_ Date: \_\_\_\_\_

Witnessed by:

Signature of Examining Doctor: \_\_\_\_\_ Name of Examining Doctor: \_\_\_\_\_

(Clinic Stamp)

3) FOMEMA patient records



3) Diagnosis Count Report

**KLINIK SPDS**  
275, Jalan Perak  
Ipoh, Perak  
Tel: 051337198

From: 01/01/2008 To: 31/03/2007

Diagnosis: \_\_\_\_\_

Number: \_\_\_\_\_

- 4) Antenatal Records
- 5) Automatic prompting of medicine allergy
- 6) Images saving and editing

- 4) Dangerous Drug, Poison B and Drug Dispensary Report
- 5) Next of kin information and contact
- 6) CD10 compliant diagnosis code

**Future Developments**

In the coming years, we will be developing specialized systems to cater to:

- 1) Paediatric Management
- 2) Eye Specialist Management
- 3) Dental Management

**Added Optional Features**

Besides that, we have also further enhanced our system through further R&D and added various optional features as follows:

- 1) Hand-writing recognition feature (optional)
- 2) SMS reminder to customers (appointments, vaccination, birthday wishes, etc)



**Reuben Poh**  
Deputy Group Managing Director  
Clinical Waste, Labpro, Pharmacy  
& BP Business Solutions

## BP FOOD TESTING



BP Food Testing Sdn. Bhd. currently serves various customers nationwide via our well established BP Healthcare Group network. We have been an accredited laboratory under ISO/IEC 17025 (SAMM No: 293) since 2005. We have progressed to the new ISO/IEC 17025 : 2005 standard with scope extension for chemical testing since 26 December 2006.

Besides the comprehensive range of microbiological testing on food, water, air sampling and swab (food contact surface), we have expanded into food chemical testing which covers nutrition facts analysis, preservatives testing, antibiotics screening and heavy metals testing, as follows:

### Microbiology Testing

- ◆ Total Plate Count
- ◆ Coliform Count
- ◆ Escherichia coli Count
- ◆ Staphylococcus aureus Count
- ◆ Staphylococcus aureus Detection
- ◆ Salmonella
- ◆ Vibrio cholerae
- ◆ Vibrio parahaemolyticus
- ◆ Bacillus cereus
- ◆ Yeasts and Moulds
- ◆ Listeria spp.
- ◆ Listeria monocytogenes

### Preservatives Testing

- ◆ Formaldehyde
- ◆ Total Phosphorus
- ◆ Boric Acid and Borates
- ◆ Benzoic Acid (*Sodium Benzoate*)
- ◆ Sorbic Acid (*Potassium Sorbate*)
- ◆ Sulfur Dioxide (*Sodium Metabisulfite*)

### Antibiotics Testing

- ◆ Chloramphenicol
- ◆ Nitrofurantoin AOZ

### Heavy Metals Testing

- ◆ Arsenic (*As*)
- ◆ Lead (*Pb*)
- ◆ Mercury (*Hg*)
- ◆ Cadmium (*Cd*)
- ◆ Tin (*Sn*)
- ◆ Antimony (*Sb*)

### Air Sampling

- ◆ Total Bacteria Count
- ◆ Yeast and Mould

### Nutrition Facts Analysis

- ◆ Protein
- ◆ Fat
- ◆ Fibre
- ◆ Moisture
- ◆ Ash
- ◆ Total Sugar
- ◆ Carbohydrate
- ◆ Energy/Calories
- ◆ Total Nitrogen

### Food Contact Surface

- ◆ Total Bacteria Count (*Swab*)

### Water Testing

- ◆ Heterotrophic Colony Count
- ◆ Coliforms
- ◆ Thermotolerant Coliform
- ◆ Escherichia coli

As part of our improvement program, BP is committed to further investing heavily on instrumentation, human capital and secure more ISO accreditations as 1st Choice food and industrial testing provider to our customers.



**Ong Chiang Hock**  
CEO of BP Food Testing &  
BP Lab's Consultant

## OUR MEDICAL ADVISORY COMMITTEE



Dr Tan Kia Gin  
Chief Medical Officer



Dr Zainol Bin Harun  
Consultant  
Pathologist



Dr Julia Munchar  
Bt Munchar Jajuli  
Consultant  
Pathologist



Dr Poh Bee Hoon  
Consultant  
Pathologist



Dr Lim Aik Boon  
Radiologist



Dr Chew Chee Keong  
Area Medical Officer



Dr Quah Say Chuan  
Area Medical Officer



Dr Choy Chun Ngok  
Area Medical Officer



Dr Yap Chee Wei  
Area Medical Officer



Lovy Beh  
Director / Pharmacist



OUR CHAIRMAN & MEDICAL DOCTORS



## BP NEWS



*Dr. Tan Kia Gin - Chief Medical Officer (BP Diagnostic Centre)*

### My Aspiration For BP Diagnostic Centre

When I first stepped into the world of private practice in BP Lab, being the sole doctor in a private laboratory, I was indeed a rare breed and lots of uncertainties awaited. Now after more than a decade on the job with moments of elation as well as anxieties there are now more than 20 full-fledged Diagnostic Centres and 30 doctors and specialists nationwide, working hand in hand with a team of nurses, pharmacists, nutritionists, biochemists, plus laboratory, information technologists, marketing and other supporting personnel.

Nevertheless, we are probably not even half way to where we want to be. The aspiration of BPDC is to become the first choice in wholesome healthcare services.

We shall help to build a healthy nation by reducing the leading diseases and conditions, which are mostly preventable, by focusing on diagnostic and preventive healthcare.

We shall also enhance the life of individuals who wish to live longer, healthier, more productively via regular health screening, lifestyle and nutritional consultation, anti-aging and aesthetic services.

BPDC is built on a non-hospital setting, with resulting comfortable and convenient environment, personalized service, high efficiency and cost effectiveness, while still maintaining well-trained medical professionals and the latest premium quality equipment that runs on high level of IT application. Our services will be readily available nationwide and regionally to fill a gap in the current healthcare system, which still lacks a professionally run diagnostic and consultancy service for preventive healthcare.

BPDC will also be a people building company that provides the best environment and opportunities for our team members to enhance their knowledge, skills and attitude, in developing their successful life-long careers with us. We aim to add more training centres, with a flagship Diagnostic Centre cum regional headquarters in the Klang Valley soon. More specialists and other professionals will be added to our team to provide additional training opportunities.

BPDC is the first in this region to embark on teleradiology. We aim to equip all Diagnostic Centres with colour ultrasound system and digital x-ray. Our doctors will undergo regular training programs on various imaging methods to become better diagnosticians. Other new services in the pipeline include aesthetic services, anti-aging services etc. Our Occupational Health services will also be further enhanced. Specialist Diagnostic Centres and even hospitals will also be a feature of BPDC in the near future as part of our upgrading exercise.

To achieve these dreams, everyone in the team has to have a high level of professionalism and productivity, with a positive attitude, full commitment and enthusiasm, and work as if each is in business on his/her own.

BPDC is expected to achieve ISO 9001 certification within this year, to reflect our effort in pursuing professionalism in our healthcare services.

## BP NEWS

## Cytopathology Section

The Cytopathology Section of BP Lab currently provides testing for vaginal, cervical, endocervical pap smears, non-gynaecological body specimens (urine, sputum, body fluids, thoracentesis, paracentesis, cerebrospinal fluid, etc.) and the reporting of Fine needle aspiration (FNA) samples. These services are offered to hospitals and physician offices throughout the country and any other referred clients.

Consultant pathologists and cytoscientists staff the Cytopathology Section at BP Lab. Most of our cytoscientists hold the international certificate of competence in cervical screening and are fully accredited to examine cervical cytology samples.

At present we provide consultant opinion for both conventional smears and ThinPrep samples. Turnaround time for cervical screening cases is 24 hours. Consultants who are involved in the cervical screening service also report most of the cervical biopsy histology ensuring close correlation of smear and biopsy results.

Non-gynaecological cases may be received as fresh specimens, prepared using conventional or liquid-based techniques, or as un-stained or stained slides. Turnaround times are 24-48 hours or earlier if urgent.

Our future improvement plan is to provide the Fine needle aspiration (FNA) as a service at all our BP Diagnostic Centre. FNA has a widely recognized and established role as the initial diagnostic modality in most neoplastic and inflammatory disorders of the viscera and soft tissues. Our aim is to provide a walk-in FNA clinic, typically serving head & neck specialists, general surgeons, endocrinologists and physicians. Our ad hoc FNA Clinic provides the evaluation of superficial, palpable lesions such as enlarged lymph nodes (cervical, supraclavicular, axillary, inguinal), palpable thyroid nodules, palpable breast masses, and salivary gland masses. Virtually



**Dr. Julia Munchar - Pathologist – Anatomic Pathology (BP Lab)**

any subcutaneous, palpable, discrete nodule is suitable for FNA analysis.

Our "hot" FNA service will provide our clients with a same-day consultation with a consultant pathologist who is accompanied by a technologist to ensure an adequate sample is obtained and sufficient material is taken for ancillary testing. Because a portion of the FNA specimen is analysed at the time of the aspiration, a preliminary impression can usually be provided to both the patient and the referring physician. A final diagnosis can be made available within 24 hours. If necessary an ultrasound examination can be performed at the same consultation to provide additional clinically useful information.

The collaboration between our radiologists and our pathologists will provide clients and their referring physician with the most comprehensive diagnostic picture and the most effective treatment options, if required. This multidisciplinary collaboration provides the highest standard of diagnostic assessment and enhances patient care and treatment.

The foundation of our service is to develop a close working relationship between referring clinician and our radiologists and pathologists. This enables us to deliver a bespoke service to individual doctors, to be responsive to their individual needs, thereby enabling the best possible outcome for patients.

## BP NEWS



**Dr Poh Bee Hoon - Pathologist-Anatomic Pathology (BP Lab)**

### Cervical Cancer

Cervical cancer, a major killer worldwide, was the second most common cancer among Malaysian women in 2002 with an age-standardized incidence rate (ASR) of 21.5 per 100,000 population. It constitutes 12% of total female cancers in the same reporting year.

With the recognition of the preclinical and preinvasive stages and the ability of detection of the preinvasive stages by Papinicolaou testing, the cancer-related mortality rate has been significantly reduced in the last few decades.

Human Papilloma Virus (HPV) has been recognized as the organism that causes cancer of the cervix in nearly all cases. The prevalence of HPV DNA in cancer of cervix is 99.7%. In addition to this, HPV subtypes 16 and 18 causes 70% of the cervical cancer cases.

These findings have prompted extensive research and successful development of:-

- 1) HPV detection by various sensitive molecular methods using cervical cytology fluid, cytobrush, cervicovaginal lavage or swabs. These molecular methods have served as an attractive adjunct to conventional Papinicolaou testing to guide clinicians in the management of women with cervical cytological abnormalities.
- 2) HPV vaccine, a quadrivalent vaccine approved by the US Food and Drug Administration; with

the aim of preventing the cancer especially for women who have not been exposed to the key HPV types.

The current recommendation for HPV vaccination is female children and adults aged 9 to 26, or before the onset of sexual activity. It is protective against HPV types 6, 11, 16 and 18 and is being administered through a course of three intra-muscular injections over a six-month period.

The vaccine will not treat existing HPV infection or other complications. Since the vaccine is not protective against all HPV types, the recipients are advised to continue to practise other preventive strategies such as safe sexual practice and continuous routine cervical screening. For women who have had previous sexual exposure, most will still benefit since they will be protected against other virus types that are contained with the vaccine. A pre-vaccination HPV molecular screening might be beneficial for women who wish to have their pre-vaccination HPV status known.

There are more on-going researches to establish a better understanding of the vaccine potency, the duration of vaccine protection, their side effects and the use of vaccine in males.

BP Lab currently provides Papinicolaou testing in both conventional and liquid based methods. Determined to serve as one of the major health care providers with quality services, with the launching of the HPV molecular test and the introduction of the HPV vaccine in our BP Diagnostic Centres, it is hoped that such services will be available soon to other health care providers and, most importantly, the general population.

#### References:

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## BP NEWS

## Teleradiology

**What is teleradiology?**

Teleradiology is the process of sending radiological patient images, such as x-rays, mammography, ultrasound, PET-CT, Computed Tomography (CT), and Magnetic Resonance Imaging (MRI) from one point to another through digital, computer-assisted transmission, for the purposes of interpretation and/or consultation. Typically this is done over standard telephone lines, wide area network (WAN), or over a local area network (LAN). Through teleradiology, images can be sent to another part of the hospital, or around the world.

**What are the components of teleradiology?**

A basic teleradiology system consists of three major components as shown below:

**Image Sending Station**

Images can be captured either by a video capture (frame grabber) board which connects directly to the composite video signal of either the image processor or the console, or digitally by connecting directly from a modality to a workstation over a network (such as, ethernet) and PACS (Picture Archiving and Communication System). The least expensive method to acquire digital data is through a DICOM (Digital Imaging and Communications in Medicine) file transfer. The digital images are sent to the modem upon command of the equipment operator.

**Transmission Network**

Depending on data-transfer rate requirements and economic considerations, images can be transmitted by means of common telephone lines, digital phone lines (ISDN, switched-56, T1, SMDS etc.), coaxial cable, fiber-optic cable, microwave, satellite, and frame relay or T1 telecommunication links. The most commonly used transmission networks currently in use for teleradiology are those provided by the telephone companies. This network utilizes both wire and fiber optics.



**Dr. Lim Aik Boon - Radiologist (BP Diagnostic Centre)**

**Receiving/Image Review Station**

A receive/image review station is shown in the diagram:



Upon reviewing the sent images, the radiologist will write a report. The report will be sent to the respective hospital through the same transmission network.

**The future**

Teleradiology will develop rapidly in three key areas. Firstly, subspecialty consultation will develop on an established base. This will enable general radiologists to avail themselves to skills in specialties such as neuroradiology or paediatric radiology. Secondly, interactive ultrasound imaging will facilitate the performance of examinations in health centres, general practice surgeries, and satellite hospitals under the distant supervision of a consultant radiologist.

Finally, the role of inexpensive personal computer based systems in providing emergency radiology cover outside normal working hours is likely to expand. The temptation to provide an on call service from home to several hospital sites will become irresistible to increasingly financially competitive hospital trusts.

## BP NEWS



*Dr. Chew Chee Keong - Area Medical Officer (BP Diagnostic Centre)*

### Healthcare : A Changing System

The world of rapid changing life styles affects the healthcare delivery system. BP Healthcare Group, in response to these changing needs has created BP Diagnostic Centres (BPDC).

BPDC, a new one-stop diagnostic centre concept, offers a range of primary health screening. It started in late 2002 in the Klang valley. Over the years, it has expanded to more than 20 DC outlets nationwide and with more than 30 medical officers and specialists offering a more comprehensive range of services to the customers. We incorporate our laboratory services into the service. This brings huge benefits to the clients because of the vast experience and resources that we have. Our services are quality assured. BP lab is an ISO-accredited institution and we have an impressive pool of experts. The sheer number of doctors proves that we are fully committed to fulfilling our clients' needs.

This manpower resource also means that we are most flexible in terms of time and period of service. Our extensive healthcare facilities ensure convenience to clients. We provide all healthcare screening tools and equipment to be employed as a one-stop centre. This will save our clients much time. We also have a nation-wide coverage. We have centres set up to cover every state. In addition, we are expanding rapidly to ensure convenience and delivery of prompt services.

In accordance with our "total health" concept, BP Healthcare Occupational Health Service was established in the early 2007 to see to every single aspect of industrial or occupational health.

BPDC is committed to developing a positive health and safety culture where the inherent risks in healthcare provisions are regulated and minimised through the involvement and commitment of its staff in delivering quality service.

It is the policy of the BPDC to do all that is reasonably practicable to prevent personal injury, damage to property, harm to the environment or any other forms of harm or loss to staff, patients or others in conducting its businesses.

Today, BPDC has expanded and has more than 20 branches spanning the whole of Peninsular Malaysia, Sarawak and Sabah, a process which has realised our major corporate objective which is, to bring healthcare right to your doorstep !

## BP NEWS

## Occupational safety and health (OSH)

Workplace fatalities, injuries and illnesses remain at unacceptably high levels and involve an enormous and unnecessary health burden, suffering, and economic loss amounting to 4–5% of GDP. According to WHO and ILO estimates for the year 2000 there are 2.0 million work-related deaths per year. WHO estimates that there are only 10-15% of workers who have access to a basic standard of occupational health services.

Occupational safety and health (OSH) is a cross-disciplinary area concerned with protecting the safety, health and welfare of people engaged in work or employment. At another level, OSH may also protect co-workers, family members, employers, customers, suppliers, nearby communities and other members of the public who are impacted by the workplace environment.

The functions of an occupational health service are to protect and promote the health of workers, improve working conditions and the working environment and maintain the health of the organization. They also provide expert advice to employers on how to achieve the highest possible standards of health and safety in the interests of the particular working community.

Occupational health should aim at the promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations, the prevention of health hazards caused by their working conditions, the protection of workers from factors adverse to health, the placing and maintenance of the worker in an occupational environment adapted to his physiological and psychological capabilities, in other words, the adaptation of work to man and of each man to his job.



*Dr. Chew Chee Keong - Area Medical Officer (BP Diagnostic Centre)*

Compliance with the law and implementation of Occupational Health programmes in the workplace is the responsibility of the employer if the jobs involve risks. It is recognized that employers are responsible for the provision of occupational health services in their respective workplaces. The Department of Occupational Safety and Health (DOSH) as the main government department responsible for occupational safety, health and welfare of workers in the country plays the role of a facilitator and enforcer of occupational health-related legislation.

The level of occupational health services provided for workers in Malaysia is questionable. The issues of occupational health management at the workplace are far from being addressed if we are to go by the provisions as spelled out in the ILO Occupational Health Services Convention and Recommendations, 1985. Therefore, the timely establishment of BP Occupational Health Department would help Malaysia to improve its occupational health services.

BP Occupational Health Services (OHS) are comprehensive and unique because of our strong belief in OHS. Occupational safety and health (OS&H) is not confined only to the workplace. It actually encompasses all the other areas of the life and health of the workers. With this in mind, we strive to incorporate this into our responsibilities towards our clients.

## BP NEWS

In accordance with our "total health" concept, we have tailored our services to focus on every aspect of industrial or occupational health. Our services are presented under the following categories:

### (I) Consultancy

Consultation service involves giving feedback on the best approach to the management on how occupational and health issues should be handled based on references to regulatory priority, hazard rating, public health importance, company policy, budget and timing.

### (II) Treatment

Our Curative Services will encompass the usual treatment of common illnesses such flu, backache, cough, specific treatments of occupational ailments and follow up treatment of medical conditions such as diabetes, hypertension etc.

### (III) Surveillance

Our surveillance activities would include pre-employment examination, pre-placement examination, fitness for work evaluation, medical surveillance for chemical hazardous to health (USECHH 2000), lung function test, audiometry for hearing assessments, biological monitoring (monitoring of blood, urine, nails and/or hair levels of toxic agents and their metabolites) and biological effect monitoring.

### (IV) Prevention, Training and Health Education

This will encompass education and health talks on various topics such as accidents, arthropod –borne diseases, food poisoning,

personal hygiene, reproductive health, sexual abuse, drug abuse, shift work, and other medical conditions (diabetes, hypertension, stroke, BPH, asthma, cancers, etc)

### (V) Procedural and Record Keeping

In conclusion, you can benefit from the advantages of B.P Occupational Health Services as our strengths are in the following:

1. We incorporate our laboratory services into the service. This brings huge benefits to the clients because of our vast experience and resources in such an area.
2. Our services are quality assured as BP lab is an ISO-qualified institution.
3. We have the expertise. The panel of doctors in our company proves that we are fully committed to meeting our clients' needs. This manpower resource also means that we are most flexible in terms of time and period of service.
4. Our extensive healthcare facility brings convenience to our clients. We provide all the healthcare screening tools and equipment at a one-stop center. This will save our clients plenty of time sourcing different services at different times.
5. Nation-wide coverage. We have centers in every state (some more than one). In addition, we are expanding rapidly to make sure convenience is ascertained and services can be provided by the quickest means.

## BP NEWS

## Tumour Markers - to check or not to check?

Tumour markers are substances, usually proteins that are produced by the body in response to cancer growth or by the cancer tissue itself. Some tumour markers are specific for one type of cancer, while others are seen in several cancer types. Tumour markers are used in health screening for screening of cancer and for early diagnosis of cancer when it is the most treatable and before it has a chance to grow and spread.

Common questions that the public often ask regarding tumour markers are as follows:

1. Is it necessary to check all these tumour markers?
2. How accurate are these tumour markers? What is the percentage of accuracy? If it is not very accurate, why waste our money doing it?
3. If my tumour markers level is raised, does it mean that I have cancer?
4. Why does my family doctor tell me that tumour markers are useless and not accurate?
5. I am diagnosed to have cancer (e.g breast cancer), why is it that my tumour marker (CA153) is normal?

As a medical practitioner, I was taught in medical school that only few tumour markers are really useful i.e PSA, AFP and CEA, and most of the tumour markers are used for monitoring of disease status rather than screening. I am sure a lot of doctors also share this belief. However, after a few years working with BP Healthcare Group, I now realize that tumour markers are not as useless as most doctors think they are. Let me share with you two case scenarios of my patients and, hopefully with that, you can decide for yourself whether checking tumour markers is really necessary in health screening.

### Case 1:

Mr A is a 48 years old businessman. He came to our centre for health screening at the end of 2006. He is a chronic smoker and he came to do the test because he had been suffering from multiple joint pains, mainly small joints of his hands, for a few months. He sought treatment from many doctors but with no improvement. No cough, no weight loss



**Dr. Quah Say Chuan - Area Medical Doctor (BP Diagnostic Centre)**

or loss of appetite. His blood test came out to be normal except his CEA. His CEA = 20 (Normal < 5). Since he is a smoker and his symptoms are suggestive of non-metastatic extrapulmonary manifestations of lung cancer, he was advised to do a chest x-ray and was diagnosed to have lung cancer. Currently he is under follow-up with an oncologist.

### Case 2:

Mr B is a 50 year-old gentleman who has been diagnosed with diabetes for many years. His diabetes is poorly controlled even with insulin injection. He is a health-conscious person and does blood tests every year. Last year he came to our centre again for general health screening. His reports are normal except for his poorly controlled blood sugar and rise in level of CA19-9, about 84 (normal 37), a tumour marker for pancreatic cancer. He was asymptomatic then, experienced no weight loss or loss of appetite. He was referred to a specialist and CT scan was done. The CT scan of pancreas showed a cyst in the tail of the pancreas. No other masses were seen in the abdomen. After the diagnosis, he sought treatment from a Chinese traditional healer and kept on testing his CA19-9 every few months. His CA 19-9 kept rising from below 100 to a few thousand in a few months. Early this year, he came for the blood test again, his CA19-9 had risen to > 10,000, then, he was advised to do an ultrasound again and a tumour was found in the tail of pancreas and, unfortunately for him, the tumour had actually spread to the liver. He is currently under follow-up with an oncologist. However his CA 19-9 still rose each time he came for retest even under chemotherapy, his latest CA19-9 has gone up to 24,000.

## BP NEWS

So, let us go back to the questions again:

**1. Is it necessary to check all these tumour markers?**

If you had asked me this question 3 years ago, I would probably say no. However, now my answer is YES. The two case scenarios are an eye-opener for me and hopefully will be an eye-opener for others who do not believe in tumour markers.

**2. How accurate are these tumour markers? What is the percentage of accuracy? If it is not very accurate, why waste our money doing it?**

It depends on which tumours markers, some can be 60-70 % accurate, some probably only 30-40%. When we talk about accuracy, we are looking at the statistics, but we are humans, not numbers, not statistics. Although some accuracy of some tumour markers can be only 30-40%, it can actually save lives if we can detect cancer early in those 30-40% of people with cancer.

**3. If my tumour markers level is raised, does it mean that I am having cancer?**

Most of the tumour markers are protein, so the level can be affected by other diseases or factors. Tumour markers are just screening test. If your tumour markers are raised, you will need to do further tests to confirm or rule out cancer.

**4. Why does my family doctor tell me that tumour markers are useless and not accurate?**

Doctors are taught not to believe in tumour markers in medical school, just like myself. Doctors always like to claim that they practise evidence-based medicine, based on research and statistics that are available. Again, we are humans, not numbers or statistics. My previous experience taught me otherwise. Well, it is up to you whom you want to believe.

**5. I am diagnosed to have cancer ( e.g breast cancer ), why is it that my tumour marker ( CA153) is normal?**

Not all cancers will have raised tumour marker. As mentioned earlier, the majority of tumour markers are protein. These proteins are secreted by normal cells and cancerous cells, too, but some cancerous cells tend to secrete excessive amount of these proteins, hence, the rise in the level of specific tumour markers. But not all cancerous cells will secrete these proteins, so not all cancer will show a rise in tumour markers.

I hope after reading this article, you will have a better understanding of tumour markers. It is up to you whether to have a check-up or not. However, in my opinion, it is better to go for a test since it is inexpensive and besides, there is no harm in doing it.

BP NEWS

**Are Blood & Urine Tests Enough To Find Out Your Actual Health Status?**

**The answer is NO!**

We often come across people saying that "I have paid RM 100+ to conduct a complete health screening which includes blood and urine tests. It is sufficient and my results reveal that I am healthy. Why do I need to spend extra money to undergo various diagnostic procedures?"

**The facts are:**

- 1) A general blood and urine test package will ONLY tell you your blood count, white/red blood cell abnormalities, blood group, lipids studies, liver function, kidney function, thyroid function, hepatitis etc.
- 2) Blood and urine tests will not be able to reveal abnormalities or diseases which can only be detected via some diagnostic procedures.

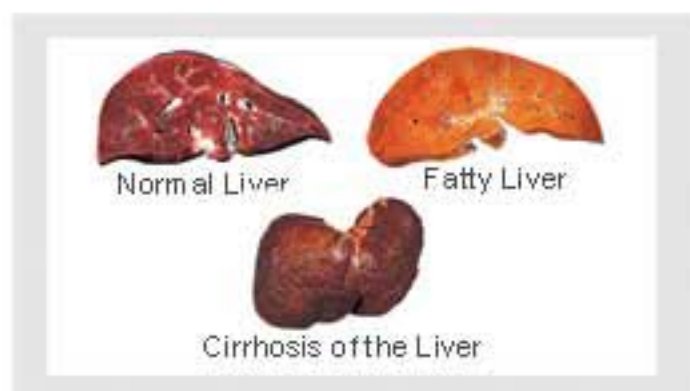
**Examples:**

**Fatty Liver**

It is an excessive accumulation of a type of fat (triglycerides) inside the liver cells. The most common causes of fatty liver are alcoholism, obesity, diabetes and elevated serum triglycerides levels. Other causes include malnutrition, hereditary disorders of metabolism and drugs.

A physical examination that reveals an enlarged liver without any other symptoms suggests fatty liver. *Excess fat in the liver can be detected by abdominal ultrasound.*

Although excessive fat in the liver may not in itself be a serious problem, its underlying cause might be. For example, repeated liver injury from toxic substances such as alcohol may eventually progress from fatty liver to cirrhosis (severe scarring of the liver). Therefore, treatment of fatty liver aims at minimizing or eliminating the underlying cause of the disorder.

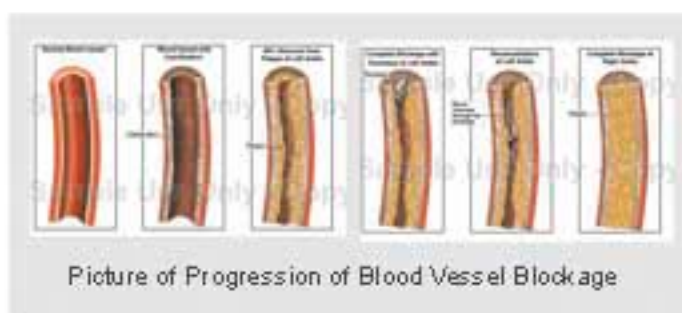


**Dr. Quah Say Chuan - Area Medical Officer (BP Diagnostic Centre)**

**Blocked Arteries**

Your blood cholesterol level will not be able to tell that you do not have blocked arteries. In addition to blood cholesterol tests and blood pressure measurement, the following diagnostic procedures are useful to diagnose blocked arteries

- a) **Electrocardiogram (ECG)**  
Helps detect if your heart has any irregularities, disease or damage by measuring your heart's rhythms and electrical impulses.
- b) **Chest X-ray**  
Image of your heart and surrounding chest anatomy shows your heart size and shape and reveals whether your heart is misshaped or enlarged due to disease. Hardened blockages due to cholesterol buildup in the main blood vessels and fluid in the lungs can also be seen.
- c) **Exercise ECG (Treadmill)**  
The stress test measures and evaluates the reaction of your heart under exertion. This test allows your doctor to evaluate the performance of your heart under strenuous conditions and the presence of coronary artery disease.



Picture of Progression of Blood Vessel Blockage

## BP NEWS

### Respiratory Problems

Blood or urine tests will not be able to tell whether you have any lung or respiratory problems.

Lung Function Test evaluates how well your lungs work. The test determines how much air your lungs can hold, how quickly you can move air in and out of your lungs. It can diagnose lung diseases and help to detect asthma, chronic bronchitis and occupational lung diseases.

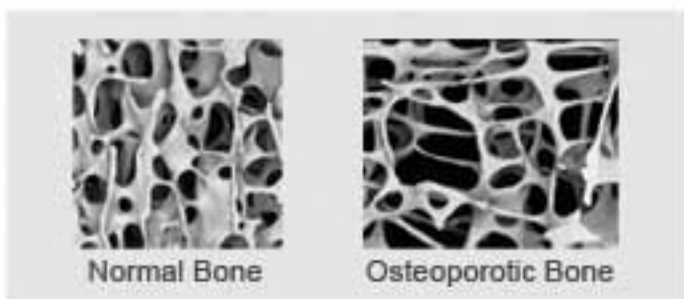


### Osteopenia & Osteoporosis

Osteopenia is the thinning of bone mass. While this decrease in bone mass is not usually considered "severe", it is considered a very serious risk factor for the development of osteoporosis.

Osteoporosis, the "fragile bone disease," is characterized by a loss of bone mass caused by a deficiency in calcium, vitamin D, magnesium and other vitamins and minerals. If it progresses, osteoporosis can lead to loss of height, stooped posture, humpback, and severe pain.

Bone mineral density (BMD) is the measurement of calcium levels in bones, which can estimate the risk of bone fractures. It is also used to determine if a patient has osteopenia or osteoporosis. Bone mineral density tests are non-invasive and painless procedures.



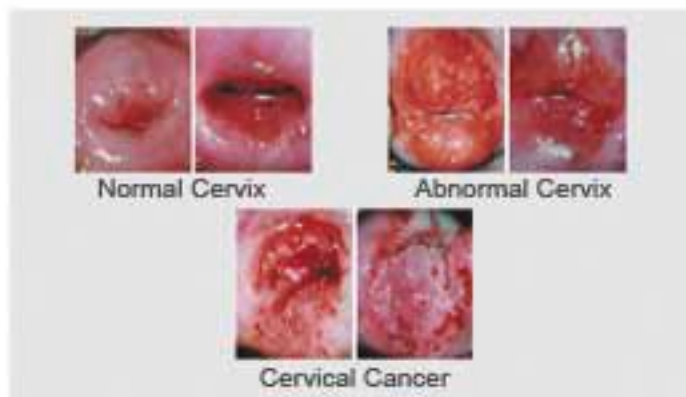
### Cervical Cancer

Cancer of the cervix (also known as cervical cancer) begins in the lining of the cervix. Cervical cancers do not form suddenly. Normal cervical cells

gradually develop pre-cancerous changes that turn into cancer.

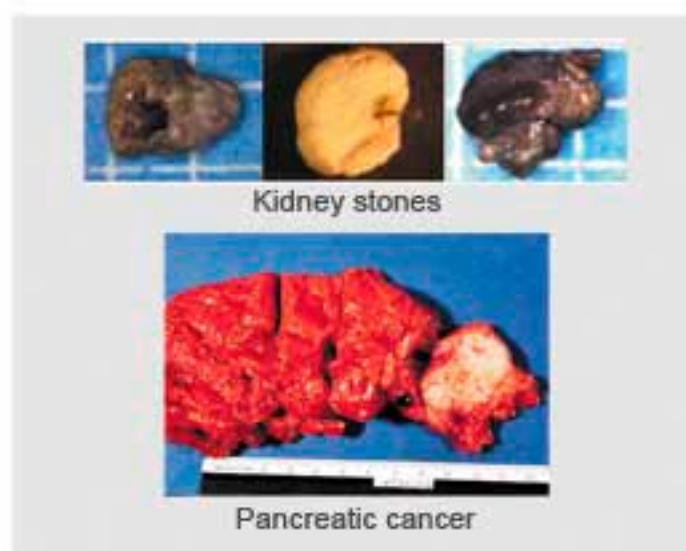
Since the most common form of cervical cancer starts with precancerous changes, there are two ways to stop this disease from developing. The first way is to prevent the precancers and the second way to prevent cervix cancer is to have test (including a Pap Smear test) to detect HPV and precancers. Treatment of precancers can stop cervical cancer before it is fully developed. Most invasive cervical cancers are found in women who have not had regular Pap Smear tests.

At BPDC, we are using a new generation of pap smear method (LC-Prep) where the accuracy is up to 3 times more sensitive compared to the conventional method.



### Abdominal pains, inflamed appendix, enlarged abdominal organ, stones in gallbladder or kidney

Abdominal ultrasound imaging is performed at BPDC to evaluate kidneys, liver, gallbladder, pancreas and spleen to help diagnose abdominal pains, inflamed appendix, enlarged abdominal organ, stones in gallbladder or kidney which cannot be concluded from blood and urine tests alone.



BP NEWS

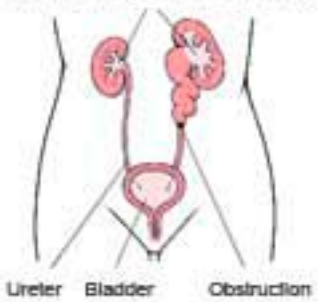


Asymptomatic, ultrasound of abdomen reveals 3 gallstones in gallbladder of a 54 year-old man.



Ultrasound shows multiple liver cysts in 53 year-old lady.

Normal Kidney Distended Kidney



Asymptomatic, abdomen ultrasound scan shows hydronephrosis (dilation of renal pelvis & calyces), hydroureter (dilation of ureter), renal stone causing obstruction in a 62 year-old lady. She was referred to a urologist, and CT urography confirms diagnosis.



Asymptomatic, ultrasound abdomen shows mass at left kidney of 31 year-old lady.



Known case of hypertension on treatment in 77 year-old man. Carotid ultrasound shows atherosclerotic plaque at right carotid artery.

**REMEMBER!**

When you want to do your next health screening, go for a comprehensive check-up which includes **NOT ONLY BLOOD AND URINE TESTS BUT ALSO VARIOUS DIAGNOSTIC PROCEDURES** such as ultrasound, stress test, bone mineral density test, lung function test etc in order to **GIVE YOU THE TRUE PICTURE OF YOUR HEALTH STATUS !!!** Spend your health check money wisely !

## BP NEWS



*Dr. Kee Yong Seng - Medical Officer (BP Diagnostic Centre)*

### The Use of Botox in Smoothing Skin Texture

Whenever you smile, laugh or frown, underlying facial muscles contract and expand causing wrinkles. Wrinkles, lines and lack of elasticity are standard symptoms of the aging process often accelerated by various factors like exposure to the sun, smoking, poor nutrition and repeated muscle contraction.

The traditional facelift was the most popular method for facial wrinkle reduction. Many hesitate to undergo facial surgery due to its prolonged downtime and risk of complications.

However, recently a minimally invasive procedure has become immensely popular. Interestingly, the product was developed from a purified strain of the toxin that causes botulism (food poisoning), but is perfectly safe when injected in minute quantities.

The procedure, known as cosmetic denervation, involves the injection of a product called Botox (botulinum toxin) into the facial muscles to reduce the appearance of worry lines, crow's feet and other dynamic wrinkles. The classic post-facelift 'startled' look is eliminated and unlike lasers, Botox does not cause permanent skin pigmentation.

Botox is the fastest growing and most popular cosmetic procedure nowadays owing to the swift, painless and non-surgical cosmetic treatment that smooths out facial lines, leaving the patient looking

naturally refreshed. Two to three times a year, or every four months is the standard treatment pattern and less frequent visits are needed after a certain number of treatments.

The success of this product has caused a change of opinion towards cosmetic facial enhancement. Instead of waiting till wrinkles become too set-in or defined, you can arrest the problem earlier and with less pain or stress with regular Botox treatments as a maintenance-based approach. The results of this procedure are effective and noticeable without dramatically changing your natural facial structure. No one will even realize that you have undergone a facial rejuvenation procedure.

Botox combats dynamic wrinkles by binding the motor nerve terminals in the body to prevent the release of a chemical known as acetylcholine, which causes muscle contractions. When injected locally near or into a muscle, Botox produces a reversible yet effectively relaxant to the muscles that contribute to facial line expressions. The use of Botox is a very precise treatment that must be performed carefully to ensure its success. Firstly, a specific muscle is chosen, depending on the area of the desired result. The fine disposable syringe used to inject Botox is much smaller than the needle used for routine blood tests, so there are only a few seconds of mild discomfort. Many patients liken it to an insect bite or sting. The entire procedure takes only ten minutes and the patient can resume normal activities immediately. The cosmetic effects of Botox are usually noticeable within one week of injection.

The safety profile of Botox is encouraging. It has been used on patients for more than 10 years in over 60 countries. The most common side effects are tenderness or slight bruising at the site of injection, and in some cases, the Botox can migrate and cause a temporary weakness in nearby muscles. In very rare cases, there can be a slight and temporary drooping of an eyelid or eyebrow lasting one to two weeks. A doctor can prescribe eye drops to reverse this side effect. At worst, these side effects will last no longer than a few weeks. There have been no permanent side effects of Botox reported to date.

## BP NEWS

In our BP aesthetic service, we offer a simple non-surgical facelift by combining two of the most popular FDA-approved wrinkle fighters, Filler and Botox. Botox prevents new wrinkles from appearing and filling agents smooth the ones that already exist. Their combined use will increase the longevity of tissue dwell time of the filling agent, thereby removing wrinkles by restoring volume and also relaxing the pull of muscles that create negative facial expressions. Remarkably sophisticated and refined results can now be achieved by using these noninvasive techniques.

Botox is becoming increasingly useful for both cosmetic and medical purposes. The ease of the treatment and the relative safety make it one of the most popular ways of removing lines from the face.



## BP NEWS



*Dr. Lim Yew Chien - Medical Officer (BP Diagnostic Centre)*

### Can Seven Habits be useful in personal health management?

The Seven Habits of Highly Effective People, written by Steven Covey and published in 1989 is a very well known self-help book. It is particularly useful for people working in a highly competitive environment, like the corporate world or people doing sales.

This book is also useful in various other aspects of personal life, for instance, in personal health management.

The seven habits outlined by Steven Covey are:

1. Be proactive
2. Begin with the end in mind
3. Put first things first
4. Think win/win
5. Seek first to understand, then to be understood
6. Synergize
7. Sharpen the Saw

#### First Habit: Be proactive

In personal health management, it is important to be proactive. Often, people tend to neglect their health until it is too late. Most modern diseases take a long time to really develop into full-blown diseases. Therefore early detection will make treatment easier

and hence a quicker cure can be found. BP Diagnostic Centre, with its years of experience in providing screening services, will be able to detect diseases at the earliest possible stage.

We conduct the following:

1. Blood tests to detect haematological problems, kidney and lung abnormalities, diabetes, hepatitis B infection etc.
2. Ultrasound scans of the abdomen, pelvis, carotid and breasts to detect diseases in these organs
3. Chest X-ray to detect abnormality in our lungs
4. ECG and stress tests to detect cardiovascular problems
5. Bone scan to aid in the prevention of osteoporosis in the later stages of life

In health management, people need to be proactive.

#### Second Habit: Begin with the end in mind

Nowadays, with the increased level of health awareness, many people undergo so-called "medical check-ups" regularly. They should choose a health management plan bearing in mind this principle- "Begin with the end in mind". One crucial question to ask should be, "Why am I doing these medical tests?" Can the oft-promoted health screening "cheap sale" provide adequate and satisfactory health screening? This principle reminds us that there is a need for discussion with qualified medical personnel before they embark on a health plan. At BP Diagnostic Centre, our qualified medical staff will advise our clients to enable them to understand the examination they need and know what they are doing.

#### Third Habit: Put First Thing First

Steven Covey categorized things to be done in life under four titles:

1. Urgent and important
2. Urgent and not important
3. Not urgent and important
4. Not urgent and not important

## BP NEWS

For example:

	Urgent	Not Urgent
Important	1 Crying baby Kitchen Fire Some calls	2 Exercise Vocation Planning
Not Important	3 Interruptions Distractions Other calls	4 Trivia Busy work Time wasters

Health problems are both urgent and important. They arise when we do not take care of our health before it needs urgent attention.. Health screening, including medical consultation with professionals is important but may not seem too urgent to many. We should take health management seriously even when we are feeling healthy. BP Diagnostic Centres provide various packages for health screening. With the many BP Diagnostic Centres around the country, it is very convenient to get a health check done.

#### Fourth Habit: Think Win/Win

Thinking Win/Win has been BP's business philosophy also. We believe by providing the best medical and health screening services, clients will benefit and remain loyal to us. This definitely creates a Win/Win situation. The BP membership program is to express our gratitude to our regular clients and achieve a win/win situation.

#### Fifth Habit: Seek to Understand, then to be Understood

This principle of communication is crucial in the doctor-client relationship. When doctors do not really understand the needs of the clients, the clients will be dissatisfied. Similarly, if the clients choose to believe some questionable health myths and refuse to have an open mind to the health information offered, they will not benefit from a

proper health management plan. Doctors in BP Diagnostic Centre are selected not only based on their professional knowledge but also their communication skills.

#### Sixth Habit: Synergize

A proper health management plan involves a team of personnel of different disciplines or special skills. Apart from medical doctors, a health management team must have a very solid and reliable backup from the medical laboratory, qualified nutritionists and pharmacists. The synergy of these professionals can ensure a holistic health management plan. Our standard Diagnostic Centre is backed up by the internationally accredited laboratory services that have been long-established in Malaysia. We have professionals like Centre Managers, doctors, nutritionists and nurses at every centre. A state of the art information technology back-up will also mean that our teams in different parts of the country can discuss cases and continuously improve the services.

#### Seventh Habit: Sharpen the saw

Steven Covey describes this as regaining "production capabilities" by engaging in carefully selected recreational activities. For health management, exercise planning is important. One of the most popular services in BP Diagnostic Centre to help in exercise planning is the Body Composition Analysis technology. This technology together with the professional advice of a nutritionist enables us to plan the type and frequency of exercise suitable to individual needs. To ensure the success of our healthy living plan, we have also come up with an innovative Wellness Coaching Program. In this program, a team of professionals will study each individual's needs and come up with a customized plan. Motivation to implement the plan is taken seriously. We will have personnel contacting the client to inform them about the progress of the plan, remind them to keep track, and also to motivate the client to follow the plan.

## BP NEWS



**Sin Yong Wai - Head of Wellness Coaching Department  
cum Manager (BP Diagnostic Centre)**

### Watch out! Your body shape may put you at risk to various diseases!

Being overweight or obese is now a global health hazard. The prevalence of overweight or obesity is showing worrying trends; they are not only increasing rapidly in both developed and developing countries but are also contributing to the growing number of chronic diseases.

Generally, more than 1 billion adults worldwide are overweight, and at least 300 million of them are obese. WHO further projects that by 2015, approximately 2.3 billion adults will be overweight and more than 700 million will be obese. In the past 30 years, the prevalence of overweight and obesity has increased dramatically. Data from two \*NHANES surveys show that among adults aged 20–74 years, the prevalence of obesity increased from 15.0% (in the 1976–1980 survey) to 32.9% (in the 2003–2004 survey).

The increasing rate raised concern because of their implications on a person's health and hence a significant impact on the economy. People who are overweight or obese have increased risk to heart disease, high blood pressure, type 2 diabetes, gallbladder disease, arthritis-related disabilities, sleep apnea, respiratory problems and some cancers. The estimated total cost of obesity and their related health problems in the United States in 2000 was about \$117 billion. In several developed countries, obesity accounts for 2-6% of total health care costs. The true costs are certainly much greater as not all obesity-related conditions are included in the calculations.

Overweight and obesity is commonly assessed with Body Mass Index (BMI), a number calculated based on a person's body weight in kilograms divided by the square of height in meters ( $\text{kg}/\text{m}^2$ ). A BMI over  $25 \text{ kg}/\text{m}^2$  is defined as overweight, and a BMI of over  $30 \text{ kg}/\text{m}^2$  as obese. BMI can also be combined with the waist circumference of the person for a more accurate health risk. It is a good indicator of abdominal fat. A man who has waist circumference more than 90cm, and women with waist circumference of more than 80 cm is considered to have a higher risk to obesity-related diseases. Waist-Hip Ratio (WHR) is also a useful measure to differentiate between android (Apple-shape fat distribution) and gynoid (pear-shape distribution) obesity. A WHR over 1.0 among male or over 0.85 among female is indicative of android obesity and at increased risk to obesity-related diseases.

#### Why is this happening?

Overweight and obesity can be inherited or caused by energy imbalance. Genes are important in determining an individual's susceptibility to weight gain, while energy balance is determined by calorie intake and its expenditure (physical activity). A positive energy balance can cause weight gain which means calorie intake is exceeding energy expenditure, while a negative energy balance can cause weight loss when energy expenditure is more than calorie intake. Prevention of weight gain requires that energy balance is maintained over a period of time, therefore daily activities and balanced diets are the key factors in controlling weight gain.

Owing to modernization, social changes, and better incomes, traditional diets that are high in fiber and nutrients have been replaced by modern fast food with more calories, saturated fats and sugars. Nowadays, inactive lifestyles are the result of the increasing use of automated transport, lifts or escalators, labor-saving devices and more passive leisure activities such as watching TV and playing computer games. Increased consumption of more energy-dense, nutrient-poor foods with high levels of saturated fats and sugars, combined with reduced physical activity contribute to the rise in overweight and obesity cases.

## BP NEWS

### What should we do?

Overweight and obesity, as well as their related health problems, are largely preventable. It has become clear that effective weight management is essential. In response to this health issue, one of the National Health Objectives for the year 2010 is to reduce the prevalence of obesity among adults to less than 15% (US DHHS, Healthy people 2010). Weight loss, as modest as 5% to 10% of total body weight in an individual who is overweight or obese, reduces the risk factors for various diseases, particularly heart disease.

Today, there are hundreds of diet books and weight loss programs in the market. However, quick weight loss methods do not provide lasting results. Weight loss methods that rely on diet aids such as prepackaged foods, drinks, or diet pills do not work in the long run. Reviews of many weight loss programs have shown that the best way to lose weight is by following a healthy diet and active lifestyle that are maintained consistently.

The World Health Assembly (WHO, 2004) has made strategy calls to all stakeholders to take action at global, regional and local levels to reduce the prevalence of chronic diseases and their common risk factors, primarily unhealthy diets and lack of physical activity.

### Wellness Coaching

Life is a course-corrections series: if something doesn't work, change it. We do better with support and encouragement.

Overweight or obese people should be advised by their doctors or healthcare provider to control their weight. However, these people may find it difficult to adopt a healthy lifestyle. Most of the time, they know that they need to make changes, but how? Where do they start? Are they doing it right? How do they overcome the obstacles to change? How do they maintain their weight after achieving their goal? Their confusion is due to lack of guidance, encouragement and support.

In this situation, they need a person to guide them, to encourage them when they do the right things and to support them when they feel like giving up. In other words, they need a COACH; A Wellness Coach understands what is needed to support the adoption of healthy diets and regular physical activity. With this background in mind,

BP Healthcare group is now leading the way by providing wellness coaching services to individuals, groups or corporate bodies. At BP Diagnostic Centre, a team of qualified healthcare professionals complements our wellness coaching service; they are doctors, nutritionists, dietitians, pharmacists and registered nurses.

### How does it work?

Wellness coaching is a profession to help a person master his own wellness. Wellness refers to a person's physical and mental wellbeing, such as fitness, nutrition, physical activity and stress level. A wellness coach won't promise a quick fix. He will not order or ask you to do anything. He will be your personal guide, motivator, supporter and encourager. He will guide you through a personalized program that fits your unique situation and overcome barriers to success.

Through coaching sessions, you will find it easy and interesting to make lasting lifestyle changes to help you achieve a healthy weight. The wellness coach will guide you through phone, email or in person. Furthermore, you will receive regular updated health newsletters about nutrition, exercise, fitness as well as self-care tips for various health conditions. In the United States, many people with health problems such as overweight, obesity, joint pain and depression have been enjoying the benefits of wellness coaching. They are now leading healthy lifestyles and better quality lives. So, what are you waiting for? Call us and register with us to get yourself a wellness coach!

### Reference source:

1. \*National Health and Nutrition Examination Survey, Centers for Disease Control and Prevention
2. ACSM (American College of Sports Medicine)
3. IARC (International Agency For Research on Cancer)
4. The Surgeon General's Call to Action to Prevent and Decrease Overweight, 2007
5. US DHHS (U.S Department of Health and Human Services).
6. World Health Organization (WHO)

## BP NEWS



*Ms Ho Pooi Yee - Group Purchaser (BP Headquarter)*

### My Challenge As A Group Purchaser

With the diverse activities of the group, the Group Purchasing Department is never easy to handle especially in a rapidly growing group, which supply ongoing needs. The group now has more than 60 branches nationwide and more will be established soon. Imagine the packing of hundreds of items within 15 days for distribution to the various branches nationwide in addition to the thousands of orders and supplies from the suppliers may it be local or overseas to meet the group's requirements. This is indeed a mammoth task!

The department used to receive endless complaints from branches on delay, shortage, defective goods etc. However, such complaints do not discourage us. Instead, we react positively and accept it as a challenge to improve the operations. With the help of the in-house IT department, now all BP branches are equipped with our own unique Branch Inventory System (BIS) for stock monitoring. The system has enabled the Purchasing Department to monitor branches on stock consumption and keep track as well as to mobilize excess stock to meet urgent requests from branches facing a shortfall and eventually bringing down stock holding costs of the group. In the near future, the system will be further improved to enable branches to make online requisitions for the supply of goods.

By early 2008, BP shall have its new Headquarters in Glenmarie, Selangor. It is a more appropriate building for the purchasing department. It is strategically located and hopefully as planned will further improve our department's efficiency.

## **Ex-Government Servants Who Are Currently Serving With BP HEALTHCARE GROUP**

**The Management of BP Healthcare Group is appreciative of the valuable contribution rendered by the following people (who were ex-government employees) to the organization. A brief write-up of them appear in the following pages.**

## EX GOVERNMENT STAFF



Mr Yoon Weng Sum  
74 Years



Mr Donald Wee  
D.S.M., K.M.N., A.M.N.  
58 Years



Assoc. Prof. Dr.  
Soo Hoo Tuck Soon  
71 Years



Mrs Ang  
(Tan Chiew Guat)  
59 Years



Mrs Donald Wee  
(Mah Ai Ching)  
61 Years



Mdm. Kuan Joon Sam  
60 Years



Mrs Donald Wee  
(Mah Ai Ching)  
61 Years



Mdm. Lai Poh Choo  
57 Years



Haji Ismail Bin Mat  
65 Years



Encik Zainal Abidin  
Bin Bajuri  
75 Years



## EX GOVERNMENT STAFF

### Mr Yoon Weng Sum

Mr Yoon, aged 74, is a proud record-holder – he holds the distinction of being the longest serving employee of BP! All in, he has been in the laboratory line for 53 years, that is, 29 years with the government service and 24 years with BP!

He was trained in Institute for Medical Research, Kuala Lumpur. Upon graduation in 1957, he was posted to General Hospital, Ipoh. He was the first Lab. Assistant to serve in a hospital in Perak. In 1961, he was awarded the Sino-British Fellowship Scholarship to pursue a course in haematology but turned it down.

In 1972, he was promoted to Lab. Assistant (Special Grade). In government service, he had to accompany the Senior Physician (Dr. Khaira) to the state palace and was fondly addressed as “Dracula” by the late Sultan Idris of Perak.

Due to his enthusiasm and hard work, he was promoted in 1974 to the post of Lab. Technologist (Superscale grade) and was stationed in the Biochemistry Division of Institute for Medical Research, K.L. Here, he acquired in-depth knowledge of biochemistry and was also given the task to teach 2nd year trainee Lab. Technologists. Two years later, again he was transferred to General Hospital, Ipoh to take charge of laboratory administration as well as assigned the responsibility to inspect all the government hospital laboratories in Perak. In addition, he also taught 3rd year trainee Lab. Technologists.

The year 1983 saw a turning point in his career for he received an attractive job offer from Dato’ Beh (founder and Chairman of BP Healthcare Group). From 1983, he was Chief Technologist with BP Clinical Lab. (Ipoh), then a Manager and later a General Manager until he fell ill and had to undergo a by-pass. Upon recovery, he requested for a less demanding job and remains to this day a Technical Consultant in matters pertaining to lab. administration and management.

A humble and devoted Christian, Mr Yoon says “he is thankful to God for giving him the opportunity to contribute so many years of service to the government service as well as to BP Group” He fondly recollects when he first joined BP “it was a humble lab. With less than 10 staff but today, under the dynamic leadership of Dato’ Beh, the company has grown to such a big organization with more than 50 outlets nationwide!”

### Mr Donald Wee

As a fresh young graduate, Mr Wee took the less traveled road in 1972 when he opted for a career with the Prison Service. It was a stressful and demanding job but eventually proved to be rewarding. Little did he know that 33 years later, he would retire as a 3-star Prison General or Deputy Director General of Prisons (Malaysia) (JUSA grade).

He is a graduate of University of Malaya (1972) and University of Wales (1977). In the course of his career, he served in various capacities such as Director of the Prison College, Director of Research & Planning Division and Director of Rehabilitation and Vocational Division at the Prison Headquarters. At the ground or operational level, he headed several mega or maximum-security prisons such as Pulau Jerejak Rehabilitation Centre in Penang (known as Alcatraz of Malaysia), Pudu Prison and Simpang Renggam Prison & Rehabilitation Centre in Johore (which housed many of the nation’s most notorious and dangerous criminals!) Also, he represented the department in several international conferences and official overseas trips to United Kingdom, South-East Asian countries, Hong Kong, Japan, Australia, U.S.A., Canada and Italy.

Upon retirement in October 2005, he joined BP Healthcare Group (BPHG) in early February 2006. Currently, he serves as the Non-Executive Chairman and renders a helping hand to Dato’ Beh on specific matters or assignments.

## EX GOVERNMENT STAFF

Below are mentioned two interesting observations of Mr Wee:

- 1) **In respect of his new working environment, this is what he has to say:**  
"While the public sector such as the government service is service-oriented, the corporate sector such as BPHG is more aggressively productivity driven and, therefore, has to excel to be more business-oriented in all its daily operations and activities."
- 2) **On the future prospects of BPHG, his view is as follows:**  
"I don't think I need a crystal ball to enable me to predict its future. To me, it will be 3Gs all the way – growth, growth and more growth! BPHG will undoubtedly continue to soar to be a global player in a global market with wings spread out to foreign shores, carving a name or niche in the ever challenging healthcare sector. I'm certainly proud to be associated with BPHG!"

### **Assoc. Prof. Dr. Soo Hoo Tuck Soon**

Dr Soo, aged 71 years old, is undoubtedly an authority in his field of specialisation. He is a proud record holder of 3 degrees: B.Sc.(Hons) from University of Bombay in 1961, M.Sc. from University of New South Wales in 1963 and a Ph.D. from University of Malaya in 1980.

A dedicated mycologist, he displays an excellent track record of 37 years with the government service. During the course of his career, he served in various capacities such as Unit Head of Clinical Mycology, Mycobacteriology & Antinomycete, Consultant

in Clinical Mycology and Medical Specialist in Microbiology at the University Hospital and as Associate Professor in the Department of Microbiology at the University of Malaya.

He retired in 1990 and has been re-employed to the same post to the present day. He has been BP's consultant since 2000. With his vast knowledge, he is definitely an asset to the BP Healthcare Group.

### **Mrs Ang (Tan Chiew Guat)**

Mrs Ang served as a Scientific Officer in various government hospital laboratories for 24 years (1972 - 1996). Her job responsibilities then entailed overall administration and management of the diagnostic laboratory department and consultative and advisory roles pertaining to diagnostic laboratory matters.

Her career with BP commenced in 1996. She was employed as a Senior Biochemist in BP Clinical Lab.(Pantai Puteri Hospital, Ipoh) from 1996 to 1999. Currently, she serves as a Technical Consultant based in BP Lab HQ, Ipoh. Her present duties/responsibilities include consultative and advisory roles pertaining to diagnostic matters, as well as involvement in planning and management of diagnostic developments and expansion and, as a Quality Manager, to ensure the optimum quality of the Quality Management System.

### **Madam Kuan Joon Sam**

Madam Kuan is a lady with vast experience in her area of expertise. She put in 36 years of

## EX GOVERNMENT STAFF

faithful service as a nurse with the government service. Upon her retirement as a Hospital Matron in June 2003, she joined MARSA (Malaysian Allied Health Science Academy) as a clinical instructor.

In June 2005, she joined BP in Melaka as a staff nurse. Her current scope of duties include registration and taking of blood samples, followed by performing machinery tests e.g. BMD (bone mineral density), LFT (lung function test), ECG (electrocardiogram) and assisting the doctor in treadmill ECG and LC-prep procedure.

Madam Kuan is very enthusiastic about the BP working environment. This is what she has to say:

"Work in BP is very challenging – here I have to tune myself to be business oriented. Also, it is interesting working here because I can put to use my communication skills, continue to contribute to the community and help to create awareness among my clients on the importance of having annual medical check-ups for early detection of abnormalities and treatment."

### **Mrs Donald Wee (Mah Ai Ching)**

Mrs Wee took optional retirement to work with BP in 1994 as an administrator. Currently her work is more focused in the area of auditing. Prior to joining BP, she was a trained teacher with 25 years of experience and had served in several states from Penang to Johor. She graduated from Malayan Teachers' College (MTC) Johore Bahru in 1968 and her option was Home Science and Art & Craft. She is happy working with BP and has put in 13 years of service with BP.

During her leisure time, her passion is painting! She has participated in several local and

foreign art exhibitions such as the following:

1989 – Penang Art Society Annual Art Show (1989-2006), Penang State Art Society

1990 – Penang Watercolour Society Exhibition (1990-2007), Penang State Art Society

1991 – Salon Malaysia (1991 & 1992), National Art Gallery, K.L.

1991 – Open Art Show (1991, 1992 & 2001), National Art Gallery, K.L.

1991 – Pameran Lukisan Estetika, Kedah State Art Gallery

1993 – Solo Art Exhibition, Creative Centre, National Art Gallery, K.L. (officiated by the late Datin Seri Endon bt Mahmood, wife of P.M. of Malaysia)

1994 – Impressions on Native Canvas, Shangrila Hotel, K.L.

1996 – International Artists Exchange, Kaohsiung, Taiwan

2000 – Ten Malaysian Women Artists, Siam Art Exhibition, Hat Yai, Songkla, Thailand

2004 – Malaysian Contemporary Artists' Exhibition, Henan Province Museum, China

2007 – Artists' Favourite, Penang State Museum & Art Gallery

2007 – Aesthetic Exploration by Malaysian & Taiwanese Women Artists, China.

**Note:** Several of her paintings have been featured in the BP Chinese New Year Greetings cards!

### **Madam Lai Poh Choo**

Ms Lai has a track record of 36 years with the government service. She started her career as a coder with the Statistics Department in 1970 and over the years specialized as a finance clerk working in several departments such as National Unity Board, Ministry of Science & Technology and finally the Forestry Department.

Upon her retirement, she joined BP Pharmacy as an administrative assistant in 2006. Currently she is based in BP Pharmacy, Subang and her job in the pharmacy involves stock checking of goods before they are sent out to clinics, scanning of invoices, sticking of bar codes and doing a bit of sales. According to her, since working with BP, she has learnt a lot of new things and has been able to increase her knowledge.

### **Haji Ismail Bin Mat**

Tuan Haji Ismail, aged 66, is another record-holder for he has been in the pharmaceutical line for more than 40 years! He received his training at the Government Pharmaceutical Institute, Kuala Lumpur. After the training, he was posted to General Hospital, Ipoh, where he served and gained promotion to Pharmacy Assistant (Special Grade) and eventually Pharmacy Assistant (Superscale). In the pharmacy department, he was involved in therapeutic drug monitoring, aseptic dispensing, intravenous additives and cytotoxic reconstitution. From time to time,

he also delivered simple educational talks to nurses and paramedics.

He started work with BP in 2002 as a Pharmacy Assistant. On his experience with BP, he has this to say:

"I am glad to have been given this opportunity to work in this company. Even at this age, I have learnt a great deal in this well-organised company especially thanks to the advanced IT system."

### **Encik Zainal Abidin Bin Bajuri**

Encik Zainal is the oldest BP employee in terms of age. Prior to joining BP, he was a Lab. Assistant based at General Hospital, Ipoh.

Upon his retirement from the government service (1987) at the age of 55, he joined BP Clinical Lab. in the year of 1988 as a courier personnel.

He has put in 19 years of service with BP. On his experience with BP, let us hear what this senior citizen (warga emas) has to comment:

"I am indeed happy to work with BP because I feel that the top management takes good care of employees' welfare and Dato' Beh has always been generous to his workers. I am glad that I am still being given a chance to contribute to the company although I am 75 years old.

Thank you!"

## Our New Products

**BP Travel Kit**



The advertisement features two BP Travel Kits, one orange and one black, with the BP logo. The text 'BP TRAVEL KIT' is displayed in large, colorful, rounded letters. The background has vertical stripes in green and orange.

# Travel Kit 旅行小药箱

With the BP travel kit, you are assured of a care-free and enjoyable holiday!

有了BP旅行小药箱, 您的旅程必定安心愉快!

**BP Wellness Coaching Card**



The advertisement shows a woman and a child smiling, with a BP Wellness Coaching Card overlaid. The card is yellow and red with the BP logo. The background is a soft-focus image of people in traditional attire.

# Wellness Coaching Card

Enjoy fantastic services at BP one-stop Diagnostic Centre (BPDC) throughout Malaysia with BP Wellness Coaching Card

**BP Lab  
MS ISO 15189  
Full Scope Accreditation Status**



MS ISO 15189

## Certificate of Accreditation

No: SMM 326

(Issue 3, 12 February 2008 replacement of SMM 326 dated 18 July 2007)

Valid Until: 12 April 2009

This is to certify that

**B.P. CLINICAL LAB SDN. BHD.  
IPOH, PERAK  
MALAYSIA**

(FIELDS OF MEDICAL TESTING: CHEMICAL PATHOLOGY, CYTOPATHOLOGY, HISTOPATHOLOGY, HAEMATOLOGY, MEDICAL MICROBIOLOGY, AND VIROLOGY)

has been granted accreditation in respect of the scope of accreditation described in the SCHEDULE attached, subject to the terms and conditions governing the *Skim Akreditasi Makmal Malaysia* (SMM), the Laboratory Accreditation Scheme of Malaysia.

Laboratories accredited under SMM meet the requirements of MS ISO 15189 'Medical laboratories - Particular requirements for quality and competence'. This Malaysian Standard is identical with ISO 15189 published by the International Organization for Standardization (ISO).



( FADILAH BAHARIN )

Director-General

Department of Standards Malaysia

Date of Issue: 12 February 2008

**BP Diagnostic Centre  
MS ISO 9001 : 2000**



# CERTIFICATE



SIRIM QAS International Sdn. Bhd. hereby certifies that

**BP DIAGNOSTIC CENTRE SDN. BHD.**  
275 JALAN KAMPAR  
30250 IPOH  
PERAK DARUL RIDZUAN  
MALAYSIA



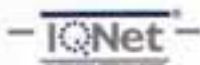
has implemented a Quality Management System complying with

**MS ISO 9001 : 2000**  
*MS ISO 9001 : 2000 Quality Management Systems - Requirements*



Scope of Certification

**PROVISION OF DIAGNOSTIC AND PREVENTIVE HEALTHCARE SERVICES**



Original Certification Date : **07 March 2008**  
Issue Date : **11 March 2008**  
Expiry Date : **06 March 2011**  
Certification No. : **AR 4556**

SIRIM QAS International Sdn. Bhd.  
(Company No. 410334-X)  
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<http://www.malysiancertified.com.my>

**Dato' Mariani Mohammad**  
Managing Director  
SIRIM QAS International Sdn. Bhd.

**Ir. Hj. Yahaya Ahmad**  
Chairman  
SIRIM QAS International Sdn. Bhd.

This certificate is granted subject to the terms and conditions as stated in the Certification Agreement.

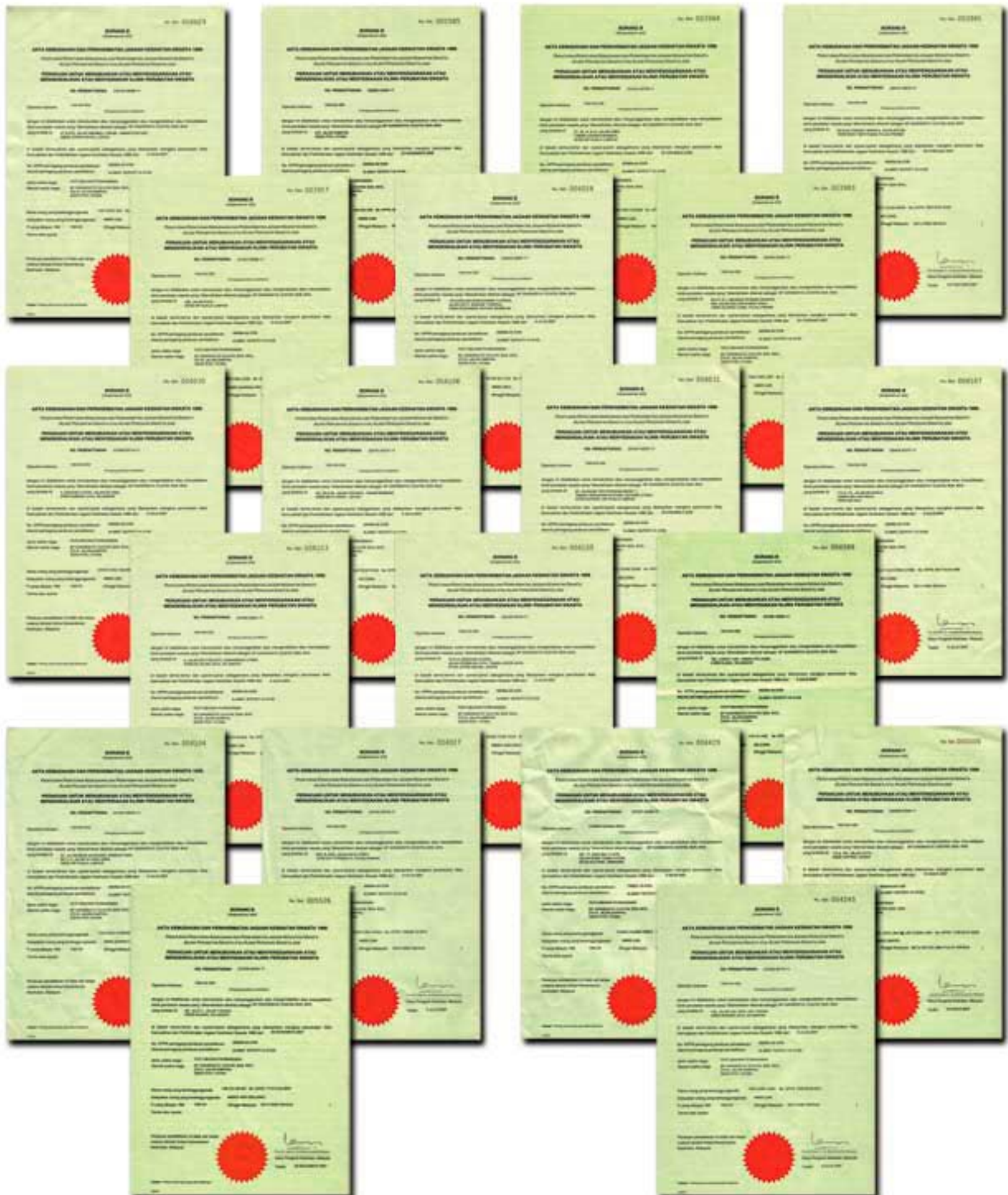


**BP Diagnostic Centre  
Certificates of Registration with  
Ministry of Health**

# BPDC - CERTIFICATES OF REGISTRATION WITH MINISTRY OF HEALTH

All our BPDC are registered under the Private Healthcare Facilities and Services Act 1998 with Ministry of Health.

The Form B, Certification to Establish, Maintain, Operate or Provide Private Medical Clinic of our respective Diagnostic Centres as shown below.



## Community Project by BP

## COMMUNITY PROJECT BY BP

I was honoured to be invited by Penang Seagate Industries to be a workshop facilitator in 'Expanding Your Horizons Conference (EYH)' held in Universiti Sains Malaysia, Penang on the 14th of July 2007. They were among the all female 250 form two students from 10 secondary schools, mainly in rural areas in Penang who attended this conference with the objective to motivate these students to pursue careers in science, technology, engineering or mathematics fields.

During these interactive workshops, I had the chance to share my career experiences and medical knowledge with these students and they were encouraged to participate in hands-on activities where they were taught some basic procedures like venepuncture, BP (blood pressure) measurement and CPR (Cardiopulmonary Resuscitation), a common life-saving procedure, thus nurturing enjoyment and confidence in the medical field.

"EYH is indeed an exciting programme and it is in line with the mission of providing innovative learning programmes for these girls to become innovative and creative thinkers ready to meet 21st Century challenges."

The conference was an exciting and interesting day for everyone. As a workshop facilitator, it was indeed a pleasure to be able to have a strong positive influence on the future of many young women. I thank the sponsor and everyone for the great effort and hopefully, more of these programmes will be organised in the future.



**Dr. Jessie Lim Yee Meng**  
*Trainer cum Medical Officer*  
*BP Diagnostic Centre*

## **BP POLO Sport Activities**

- ◆ **2nd Malaysia Open Champion 2006**
- ◆ **Dubai Cup, Ham Polo Club, London**
- ◆ **Chevy's Achievement USPA All Star**
- ◆ **Garvy Received Prize From His Majesty The King of Malaysia**

2nd Malaysia Open Champion 2006



Garvy Receives Prize From His Majesty The Yang Dipertuan Agung of Malaysia



Chevy's Achievements - USPA All Star 2007



Joevy's Achievements - USPA All Star 2008



Dubai Cup, Ham Polo Club, London

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# BPDC GALLERY



**Alor Setar**



**Batu Pahat**



**Bayan Lepas**



**Bukit Mertajam**



**Butterworth**



**Cheras**



**Damansara Utama**



**Ipoh**



**Johor Bahru**



**Johor Jaya**



**Kajang**



**Kepong**



**Klang**



**Kota Kinabalu**



**Kuching**

# BPDC GALLERY



Melaka



OUG



Penang



Pudu



Rawang



Seremban



Subang Jaya



Taiping



USJ Taipan



Kuchai Lama



Parit Buntar

Coming Soon...



Sungai Petani

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- ◆ Will be operational in early 2008.



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