CURRICULUM VITAE

DR. ALMOTASEM ALOMARI

FRCPI, FACP, FAPA

ASSISTANT PROFESSOR OF PSYCHIATRY

CONSULTANT PSYCHIATRIST

**PERSONAL INFORMATION:**

# Date of Birth : February 4, 1954

# Place of Birth : Jordan

# Citizenship : Jordanian

Home & Job Address : Faculty of Medicine. Mu’tah University,

 P.O.BOX 7, ALKARAK- JORDAN

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# **PRESENT POSITION**:

#  **CONSULTANT PSYCHIATRIST &**

 **ASSISTANT PROFESSOR OF** **PSYCHIATRY**

 **FACULTY OF MEDICINE. MU’TAH**

 **UNIVERSITY**

 **P.O.BOX 7, ALKARAK- JORDAN**

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# **EDUCATION**:

# Medical School: 24/2/1974 – 3/5/1981 Sind Medical College

#  University of Karachi

#  Pakistan

#  MB, BS

# Residency: 15/7/1981–30/5/1982 Al-Bashir Hospital

#  Amman,

#  Jordan

#

#  16/6/982 – 1/9/1985 National Center for Psychiatry,

#  Amman,

#  Jordan

# Fellowship: 1/10/1985–31/10/1987Royal Edinburgh Hospital

#  Royal Hospital for Sick Children

#  Edinburgh, UK

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# **BOARD CERTIFICATION**:

# 20, Nov. 1987 : The Board Certification in Psychiatry

# 1/10/85-31/10/87 of The Institute of Psychiatry

#  University of London.

# 17, Nov. 1988

# 1/11/87-17/11/88 Jordan Medical Council Certification in Psychiatry

**MEDICAL LICENSURE**: British Medical Council (Reg. # 85/0950)

#  6/12/1985-1/10/1987

 Jordan Medical Association (Reg. # 4207)

 21/6/1982- till now

 Saudi Council for Health Specialties

 (Reg. # 03-R-M-17657)

## PREVIOUS PROFESSIONAL POSITION & APPOINTMENTS

**1987 – 1990: Specialist in Psychiatry and Assistant to The**

 **Chief of The Psychiatric Specialty**

 National Center of Psychiatry

 Jordan University Hospital

 Amman, Jordan

***Detailed Description of Duties and Responsibilities:***

Assistant to the Chief of Psychiatry Specialty,

The Jordan Medical Establishment.

Assistant Consultant Specialist (Psychiatry)

Jordan University Hospital.

As a Deputy Head of the Second Unit at the National Center of Psychiatry, I was engaged in the consultative training and teaching activities of the unit.

As Assistant Director of Al-Karamah Hospital (for sub-acute and chronic psychiatric patients) concerned mainly with rehabilitation, I was engaged in administrative as well as clinical activities at the hospital. I was in fact completely responsible for the hospital.

I shared actively in both the outpatient and in-patient work of the center and its other services in the country involving the National Center of Psychiatry and the subsidiary clinics.

I took an active role in the program of training and teaching organized for students, nurses, social workers and postgraduate residents at the National Center for Psychiatry.

Community activities included lectures on Drug Abuse to students at the Police Academy as well as lectures on Adolescent Crisis and Illicit Drug Use to Secondary School Students. Also I participated actively in the scientific activities

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For the Continuing Medical Education of General Practitioners and Primary Health Care Physicians.

Specialist and Consultant in Psychiatry in the OPD at Several General Hospitals in National Medical Establishment.

**1990 – 1993**

 **Consultant Psychiatrist**

##### Prince Abdullah Bin Abdulaziz Hospital

Bisha, Saudi Arabia

# ***Detailed Descriptions of Duties and Responsibilities:***

I was requested by the Director of Bisha Health Directorate to set up a new Psychiatric Care Unit for the treatment of patients with acute psychosis and various psychiatric disorders in the region. This was successfully accomplished under my direction and leadership in the old and closed Bisha General Hospital, following this step; it was named the Convalescence and Psychiatric Health Center.

The Director of the Health Department appointed me as a full supervisor of the Psychiatric Health Services of the Bisha region.

I was leading a psychiatric team consisting of one Registrar and one Resident in Psychiatry, in addition to one Social Worker and one Psychologist.

I was conducting an Out-patient Clinic six (6) sessions per week in Prince Abdullah Hospital and four (4) sessions per week in the Convalescence and Psychiatric Health Center. Conduct family, marital, behavioral, and cognitive therapy sessions to patients and their families on Out and In-patient level. Conduct family and child guidance sessions to children and their families including adolescence with adolescence crisis.

Treatment of psychiatric patients in various psychiatric subspecialties.

Teaching and training the junior staff, resident, registrar, social worker and psychologist.

## *Previous Duties: Ward and In-Patient Services*

* Consultant In-charge of the Psychiatric In-patients in Female and Male Medical Wards in Prince Abdullah Hospital for cases of severe neurosis and psychosomatic disorders, in addition to liaison psychiatric cases, and the psychiatric In-patients in the Male and Female Psychiatric Wards of the Convalescence and Psychiatric Health Center.
* Daily ward rounds**.**
* Weekly grand rounds with colleagues in the department of internal medicine and another weekly grand round with the colleagues in the Convalescence and Psychiatric Health Center.
* Evaluation of medicolegal psychiatric patients.

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* Evaluation and management of acute, sub-acute and chronic organic brain syndrome due to various causes including head injury as result of RTA by using the psychometric technique example the set-test, the mini mental state test, and the ten questions mental test.
* Supervising the rehabilitation program set for the chronically ill psychiatric patients.
* Teaching and training the undergraduate staff, this takes place usually in the daily morning meetings and during the grand ward rounds.

# **1993 to 10/12/2008 Consultant Psychiatrist**

#  Royal Commission Medical Center

#  Madinat, Yanbu Al Sinaiyah

#  Kingdom of Saudi Arabia

*Detailed Description of Duties and Responsibilities*

 Conduct out patient clinic, 8 sessions per week.

Conduct family, marital, behavioral and cognitive therapy sessions to patients and their families in out and in patient level.

Conduct family and child guidance sessions to children and their families including adolescents with adolescence crisis.

Treatment of psychiatric patients in various psychiatric subspecialties including acute and chronic general adult psychiatric disorders, geriatric psychiatry, child and adolescence psychiatric disorders, forensic psychiatric disorders, alcohol and drug dependence syndrome, mental retardation, rehabilitation and epilepsy.

Teaching and training the junior staff, both the undergraduate students and the internship doctors who are interested in psychiatry or psychiatric training is part of their curriculum.

*Present Duties: Ward and In-Patient Services*

Consultant In-Charge of the Psychiatric in-patients in the Male and Female Medical Wards of various psychoses, severe neuroses, alcohol and drug dependence psychosomatic and liaison psychiatric cases.

Daily ward rounds, daily recording progress and current condition and an entry made in the chart, clearly written order in the chart signed and stamped.

Weekly grand round with colleagues in the department’ of internal medicine creating opportunities for continuous learning and re-learning, so vital in the professional arena to update the standard services from time to time.

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Proper progress notes, admission and discharge summaries.

Treatment of psychiatric patients; with extensive experience in dealing with psychotropic medication and psychotherapy. Utilizing all the classical and modified psychotherapy, family, marital, behavioral and cognitive therapy sessions for in-patients and their families or people concerned and/or involved in their psychiatric disorders.

Emergency Psychiatry: Devoting additional time in the diagnosis and management of emergencies as required by the clinical necessity. Experience in dealing with excited patients, crisis intervention and other types of acutely disturbed patients.

Evaluation of medico-legal psychiatric patients.

Evaluation and management of acute, sub-acute and chronic organic brain syndrome due to various causes including head injury as a result of RTA by using the psychometric technique example the set- test, the mini-mental state test, and the ten questions mental test.

Teaching the undergraduate students, the house job doctors and the medical residents who are interested in psychiatry and/or psychiatric training is part of their curriculum. This takes place usually in the daily morning meetings and during the grand ward rounds.

*Present Duties: Consultations*

I am attending to routine and/or emergency consultation/referral from the Departments of Internal Medicine, Surgery, Gynecology and Obstetrics, Pediatrics and Emergency Room.

Consultations are made in some or all the following conditions:

In any case where there are behavioral disorders;

In any case where there are emotional disorders;

In any case where there is strange attitude, character or personality disorder;

In any case where there is psychosomatic disorder;

In any case where there is a suspicion of criminal action;

In any case where there is a negative laboratory and other investigations and procedures;

In any case where patient refuses to eat and drink;

In any case where patient suffers from cognitive impairment;

In any case where there is a violent and destructive behavior;

Psychiatric disorders of women in the child bearing period, during pregnancy and after delivery.

In any case where the diagnosis is obscure.

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In any case where there is doubt as to the best management of the case.

Dealing with the survivors of the RTA and/or other catastrophes associated with

Post traumatic stress disorder.

Dealing with non-compliant patients and problems related to doctor- patient, patient-family, and doctor-doctor relationship.

Occasional community psychiatric services.

*Present Duties: On-Call*

I am on-call everyday including the weekend, since I joined the hospital, from 30 September 1993 till now.

Special arrangement will have to be made with the Chief of the Internal Medicine, the Internist On-Call, the Medical Resident On-Call, and the ER Physicians for the coverage in case I am not available in a weekend.

Current Organizational Relationship:

Introduction

The new trend in psychiatric practice as recommended by the World Health Organization is the establishment of psychiatric care unit in the general hospitals in order to abolish the stigma attached to the psychiatric patients, to encourage and expand the liaison psychiatric services, and to decrease the psychiatric mortality and morbidity rate. Therefore, the load of work upon psychiatrists working in these hospitals has been escalating.

The psychiatric in-patient unit is situated on the 3rd floor of the Royal Commission Medical Center. It includes one male and one female ward each with potential capacity to accommodate a maximum of eleven patients. At present, the unit is not functioning due to lack or rather absence of manpower and equipment's needed to operate the unit. Example: ECT and somlec therapy (electrosleep therapy), thereby limiting the admissions of the psychiatric patients to the male and female medical wards in thee second floor.

Since I am the only psychiatrist in function at the center, it was suggested that I shall have a good coordination and cooperation with the chief of the department of internal medicine and with other consultants, registrars and residents in the department, and in the administration and discharge of professional responsibilities of the department as required and to assist in achieving departments aims within my field and specialty.

Good rapport with the colleagues, paramedics and junior staff and with patients while serving them with optimum and standard care.

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OTHER ACTIVITIES

I was appointed as a member of the supervisory board of the school for special education headed by the Director General of the Royal Commission – Yanbu Project in Yanbu Al Sinaiayah.

Meeting and Committees

Departmental Meetings: - involving all members of the Department of internal medicine to discuss matters affecting the whole department or as needed basis.

Departmental audit meetings: - including mortality and morbidity meetings at regular intervals.

Clinical Meetings: - such as the weekly X-Ray meeting or Journal Club or case presentation on a regular basis.

Morning Reports: - daily morning meetings at which admission and problem cases, that occurred during the preceding 24 hours or weekend are discussed.

Special ad-hoc meetings of chosen consultants or all consultants to address specific problems.

Other assigned tasks within the ambit of my skills, interests and experience, including voluntary work in EEG reading and interpretation.

Proper maintenance of records, charts and documents ensuring high level of confidentiality.

EDUCATION AND TEACHING:

**Lecturer in Psychiatry at Amman College for Nursing**

**1982-1985 - As a lecturer in Amman College for Nursing**

The courses taught in each academic year include the following topics:

1. The first semester included introductory course in psychology, which includes definition and history of psychology, developmental psychology, social psychology, personality, conflict and defensive mechanisms, intelligence, perception and attention, learning and remembering, imagination, thinking and language, emotion and motivation.
2. The second semester included introductory course on clinical psychiatry, which includes the following topics: Definition and the classification of psychiatric disorders (psycho-neuroses, functional psychoses, organic psychoses, personality disorders, psychosomatic disorders, and mental retardation).
3. Treatment in psychiatry.

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1. Psychological treatment (individual psychotherapy, group psychotherapy, abreaction, and behavioral therapy).
2. Physical treatment (major tranquilizers, antidepressant drugs, anti-anxiety drugs, electro-convulsive therapy, and leucotomy).
3. Occupational treatment.
4. Social treatment.
5. Sleep and dreams.
6. Psychology of the hospital milieu (interpersonal relationships in the hospital).
7. **–1990 - Senior Lecturer in Psychiatry at Zarka College for nursing**

HERE IS THE LIST OF THE COURSES TAUGHT IN EACH ACADEMIC YEAR:

The first semester included the following topics:

1. Systematic approach to comprehensive care.
2. Mental status examination.
3. Evaluation of the family in general medical care.
4. Personality types and personality disorders.
5. Recognition, evaluation and differential diagnosis of psychiatric and somatic conditions.
6. Evaluation and management of confusion-organic brain syndromes.
7. Evaluation and management of psychoses.
8. Evaluation and management of depression and affective disorders.
9. Evaluation and management of suicidal potential and attempts.
10. Evaluation and management of anxiety.

The second semester included the following topics:

1. Psycho-physiologic symptoms (headache).
2. Hysteria and hypochondriasis.
3. Problems of everyday living.
4. Evaluation and management of alcoholism.
5. Drug dependence.
6. Violence.
7. Sexual dysfunctions.
8. Chronically ill patients (hemodialysis, diabetes and cancer).
9. Psychotherapy.
10. Psychotropic drugs and their interactions.
11. Evaluation of psychiatric syndromes and disorders in children.
12. Psychiatric problems of adolescence.

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**1997-1990 - As specialist in Psychiatry and Assistant to the Chief of the**

 **Psychiatric Specialty.**

THE FOLLOWING IS THE LIST OF THE COURSES TAUGHT AND SEMINARS PRESENTED:

The first semester included the following topics:

1. Historical aspects of psychoses 19th century issues.
2. Diagnoses and classification of functional psychoses.
3. Epidemiology of schizophrenia and affective psychosis.
4. Genetic influence on the psychoses.
5. The Psychotic Hinterlands or the Fringes of lunacy.
6. Childhood psychoses and their borderlands.
7. The neurology of schizophrenia.
8. The neuropathology of schizophrenia - a progress report.

The second semester included the following topics:

1. Application of imaging techniques.
2. Laterality and psychoses (neuro-psychological evidence).
3. Neurotransmitters and psychoses.
4. Endocrinology and psychoses.
5. Physical treatments.
6. Non-physical treatment of psychoses.
7. Social implications of psychoses.
8. Has the outcome of schizophrenia changed?
9. Psychoses as a continuum and the virogene concept.

On the clinical level, I was the leader of the psychiatric team included one Senior Registrar, one Registrar and two Resident in Psychiatry, in addition to one Social Worker, one Occupational Therapist and one Psychologist. I took an active rule in the program of training and teaching organized for students, nurses, social workers and postgraduate residents at the national center of psychiatry. This takes place usually in the daily morning meetings and during grand ward rounds.

INSTITUTIONAL, DEPARTMENTAL ADMINISTRATIVE RESPONSIBILITIES:

**1987-1990:**

The Deputy Head of the second unit at the national center of psychiatry, I was engaged in the consultative training and teaching activities of the unit.

As Assistant Director of Al-Karamah Hospital (for sub-acute and chronic psychiatric patients) concerned mainly with rehabilitation, I was engaged in administrative as well as clinical activities at the hospital. I was in fact completely responsible for the hospital.

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**1990-1993:**

The Director of the Health Department appointed me as a full supervisor of the psychiatric health services of the Bisha region.

**1993 till now:**

Member of the supervisory board of the school for special education headed by the Director General of the Royal Commission-Yanbu Project in Yanbu Al Sinaiyah.

Member of the mortality and morbidity meeting.

Guest member of the drugs and therapeutics committee meetings.

Guest member of the credentials committee meetings.

Advisory member of special ad–hoc meetings of chosen consultants or all consultants to address specific problems.

Member of the Royal Commission of the Supervisory Board of the school for special education.

**PROFESSIONAL AND SOCIETY MEMBERSHIP :**

1. Fellow of the Royal College of Physicians of Ireland (**FRCPI**)
2. Fellow of the American College of Physicians. (**FACP**)
3. Fellow of the American Psychiatric Association. (**FAPA**)
4. Member of the American Academy of Clinical Psychiatrists.
5. Member of the Jordan Association of Psychiatrists.
6. Member of the Jordan Medical Association.

INTRAMURAL PRESENTATIONS:

1. **As junior psychiatrist – 1982 to 1987**

I took part in Journal Club Meetings by preparing and presenting paper on important topics in general clinical psychiatry and papers from the official reading list of the international journals of psychiatry, in addition to lectures on the following topics:

1. Cognitive therapy.
2. Family treatment of schizophrenia.
3. Psychosocial aspects of drug abuse.
4. Emotional aspects of physical illness.
5. Cancer: Psychiatric aspects.
6. Culture – bound syndromes.
7. Benzodiazepines: Clinical practice and central mechanisms.
8. Drugs in child psychiatry.
9. Neuropeptides and psychiatry.
10. Biological markers in depression.
11. New brain imaging techniques and psychiatry.
12. The sequelae of head injury and the post concussion syndrome.

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1. **As a Senior Psychiatrist – 1987 to 1990**:

 I took part in teaching psychiatry to undergraduate and postgraduate students,

 Nurses and social workers.

Weekly teaching ward rounds for undergraduates and post graduates in

Psychiatry, which included lectures, seminars and journal club in the following

Topics:

1. Suicide.
2. Non-fatal deliberate self-harm.
3. Termination of pregnancy in psychiatric patients.
4. Infantile autism and child psychoses.
5. Enuresis.
6. The psychiatry of adolescence.
7. Non-accidental injury in children.
8. Management of violent patients.

#### As a Consultant Psychiatrist – 1990 till now

I have been actively participating in the CME program of the Royal Commission Medical Center and Prince Abdullah Bin Abdulaziz Hospital by delivering lectures, seminars and journal club in the following topics:

**LECTURES:**

* Depression in primary health care setting
1. Liaison Psychiatry: (Psycho dermatology)
2. Hypochondriasis
3. Introduction to Forensic Psychiatry
4. The slap that is felt for generations (Domestic Violence re-visited)
5. It is a cry for help (Pain and Opio –Phobia)
6. Psychiatric emergencies.
7. It depresses us to say this, but work really can get you down.
8. Frustration re-visited (the tradition of respectful argument).
9. The dilemma of the psychiatric practice (Schizophrenia)
10. Depression from monoamines to neuroplasticity
11. Depression and coronary heart disease.
12. Depression in patients with cancer (diagnosis, biology and treatment).
13. Prevalence of depression in adults with diabetes (an epidemiological Evaluation).
14. Depression, PVC’s and mortality post-MI.
15. Mental stress – induced myocardial ischemia and cardiac events.
16. Depression and prognosis after myocardial infarction.
17. Personality as independent predictor of long-term mortality in patients with Coronary heart disease**.**

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**Journal club included the following topics**:

1. Acute organic brain syndrome in the general hospitals.
2. Evidence of the rule of psychosocial factors in diabetes mellitus.
3. Psychiatric aspects of epilepsy.
4. Assessment and treatment of the chronic pain patients.
5. Antidepressants and chronic pain (effective analgesia in neuropathic pain and other syndromes).
6. A molecular and cellular theory of depression.
7. Treating depression in-patient with ischemic heart disease: which agents are best to use and to avoid?
8. Exaggerated platelets reactivity in major depression.
9. Neuro-anatomic substrates of depression in the elderly.
10. The 5-HT2C Receptor’s Effects on Penile Erection and Implications for SSRIs
11. Psychiatry and Dermatology: Common Patients, Different Perspectives.

 (Factitial Dermatitis)

1. LQTS as a cause of unexplained syncope or sudden death in otherwise healthy young individuals. (Case Study)

CLINICAL PRACTICE INTERESTS AND ACCOMPLISHMENTS:

1. Liaison psychiatric practice
2. Child psychiatry.
3. Behavioral sciences
4. EEG interpretation.

**RESEARCH INTERESTS:**

I am currently involved in publishing a book on work related psychiatric disorders in the industrial cities, however, it is not published yet.

* Psychosomatic disorders.

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**CIVIC ACTIVITIES**:

COMMUNITY ACTIVITIES INCLUDE THE FOLLOWING:

1. Lectures to the students at the police academy on drug abuse and drug trafficking.
2. Lectures to secondary school students on adolescence crisis and illicit drug use, in addition to lectures on social phobia.
3. I am participating actively in the scientific activities for the continuing medical education of general practitioners and primary health care physicians.
4. Member of the supervisory board of the Royal Commission of the school for special education headed by the Director General of the Royal Commission-Yanbu Project in Yanbu Al Sinaiyah.
5. Member of the family-teachers council of Bin Hayan Secondary School in Yanbu Al Sinaiyah.
6. VIP member of Alyasrah Establishment Operation and maintenance operating the Royal Commission recreation centers in Yanbu Al Sinaiyah.
7. Lectures and group discussions during the month of Ramadan and during the month of Hajj about the positive values of the religious beliefs and religious rituals (fasting during Ramadan and performing Hajj) in enhancing sense of well being, limiting and handling stress, coping with illness, recovery from illness, illness prevention and health enhancement, suicide prevention, substance abuse prevention, preventing heart disease and high blood pressure, and enhancing longevity.
8. Lectures to the community of Yanbu Al Sinaiyah about the rule of the traditional healers in the management of psychiatric disorders, possession, jinn and psychiatric disorders.

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THE SYMPOSIA ATTENDED SINCE 1997 :

* 4th International and 30th Annual Convention of The Islamic Medical Association of North America, held in collaboration with The American College of Physicians, Amman, Jordan, from July 26 to August 1, 1997
* The APA 151st Annual meeting, Toronto, Ontario, Canada, from May 30 to June 4, 1998.
* APA 51st Institute on Psychiatric Services 29th October to 2nd November 1999, New Orleans – Louisiana, USA.
* The American College of Physicians Annual Session, 11-14/4/2002, Philadelphia, USA.
* XII World Congress of Psychiatry, 24-29/8/2002, Yokohama, Japan.
* 15th ECNP Congress, 5- 9/10/2002, Barcelona, Spain
* 16th ECNP Congress, 20-24/9/2003, Prague, Czech Republic.
* 3rd European Academy of Forensic Science Meeting, 22-27/9/2003, Istanbul, Turkey.
* The 158th Annual meeting of the APA, May 21-26, 2005, Atlanta, Georgia, USA.
* The XIII WPA World Congress of Psychiatry, September 10-15, 2005 Cairo – Egypt.
* The 159TH Annual Meeting of the APA, May 20-25, 2006, Toronto, Canada
* The 19th ECNP Congress, Paris- France 16-20 September 2006
* The 24th Annual Conference of The Arab Medical Union in Europe (ARABMED) Aleppo University, Aleppo – Syria, October 28th – November 4th 2006
* The 3rd Ain Shams International Congress on Psychiatry: Toward Global Patient Care, March 5-9, 2007, Cairo-Luxor, Egypt.
* 7th Jeddah Psychiatric Symposium: Arab Psychiatrists Across The Globe. Towards an Integrated Approach for Psychological well Being.

 April 4-6, 2007, Jeddah-KSA

* 3rd International Symposium on Psychiatry: Future of Psychiatry as a Neuroscience. 1st – 4th May 2007, Jeddah-KSA.
* The 160th Annual Meeting of The APA, May 19-24, 2007, San Diego, California, USA
* 20th ECNP Congress 2007, Oct. 13-17, Vienna, Austria
* The 9th ISAM Annual Scientific meeting 2007, Oct. 22-25, **Cairo, Egypt**
* WPA International Congress 2007, 28th November - 2nd December 2007, Melbourne Australia
* 8th Jeddah Psychiatric Symposium: Arab Psychiatrists Across The Globe. ((Mental Health of the Family: Multiple approaches, one Goal)) 12-13 March 2008, Jeddah-KSA
* The 4th International Conference on Psychiatry “ Globalization, Psychiatry and Mental Health “ 15 – 17 April, 2008 Jeddah, Saudi Arabia
* Royal College of Psychiatrists Annual meeting, 1st - 4th July 2008 Imperial College, London-U.K

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* The XXVI Congress of the CINP, 13 – 17 July 2008, Munich – Germany
* The 5th International Psychiatry Conference " Challenges in the outcome of Psychiatric Disorders" 28th – 30th of April 2009 Jeddah, Saudi Arabia
* As speaker in the symposium: Primary Mental Health Program, 21-22/11/1430H (8) CME credit hours awarded by Saudi Council for Health Specialties No 9285/2009 dated 13/10/2009AD.
* Multi-National Scientific Meeting "Recovering the Whole Person in Schizophrenia and Bipolar Disorder 6-7 November 2009, Beirut – Lebanon
* The 6th International Conference on Psychiatry " New Models of Psychiatric Management " 13-15th April, 2010, Jeddah, Saudi Arabia(18 CME credit hours)

**BIBLIOGRAPHY**:

PUBLICATIONS:

1. Case work upon (acid-base and water electrolyte disorders / a problem

Oriented approach), RCMHMJ, Vol. 1 No. 2, pp.136, July 1996.

1. C.M.E. Abstract on (it depresses us to say this, but work really can get you

Down), RCMHMJ, Vol. 1 No. 2, pp. 122, July 1996.

1. C.M.E. abstract on (basic principles of emergency psychiatry), RCMHMJ, Vol. 1, No. 1, pp.62, October 1995.