



Organized by :



CLINICAL RESEARCH
CENTRE (CRC)
HOSPITAL TUNKU AZIZAH
KUALA LUMPUR

In Collaboration with :



MALAYSIAN
THORACIC
SOCIETY

16 CPD
Point

Statistical Analysis Using **SPSS** Workshop

Facilitator: Professor Dr Karuthan Chinna

1 & 2 July 2025

8 a.m - 5 p.m

Bilik Makmal Komputer, Cawangan
Teknologi Maklumat,
Tingkat 6,
Hospital Tunku Azizah



**Kindly bring your own laptop with
SPSS software installed**

SCAN ME



Program Tentative

2 July 2025

8:00 am - 8:30 am
Registration and Breakfast
CRC

- 8:30 am - 10:00 am**
- Contingency tables
 - Chi-square test
 - Odds and Risk Ratios

10:00 am - 10:15 am
Break

- 10:15 am - 12:45 am**
Bivariate analysis
- Scatter plots
 - Correlation
 - Regression

12:45 pm - 2:00 pm
Lunch Break

2:00 pm - 3:30 pm
Multiple Linear Regression

3:30 pm - 3:45 pm
Break

3:45 pm - 5:00 pm
Logistic Regression

5:00 p.m
Tea
End of Session

1 July 2025

8:00 am - 8:30 am
Registration and Breakfast
at CRC

- 8:30 am - 10:00 am**
- Introduction to Statistics
 - Data Entry in SPSS
 - Data Management in SPSS

10:00 am - 10:15 am
Break

10:15 am - 11:15 am
Descriptive Statistics

11:15 am - 12:45 pm
Inferential Statistics

12:45 pm - 2:00 pm
Lunch Break

- 2:00 pm - 3:30 pm**
- One sample t-test
 - Paired samples t-test

3:30 pm - 3:45 pm
Break

- 3:45 pm - 5:00 pm**
- Independent samples t-test
 - One-way ANOVA
 - Nonparametric test

5:00 p.m
Tea
End of Session

Statistical Analysis Using SPSS Workshop

| Registration | Registration Fee | / |
|-------------------------|------------------|---|
| MTS Member or MOH staff | RM 300.00 | |
| Others | RM 350.00 | |

On-site registration WILL NOT be accepted. Places are limited. Registration will close once all places are taken.

All payments by cheques should be issued in favour of "**Malaysian Thoracic Society**"
Payments can be made via telegraphic transfer to the following account:

Account Name : Malaysian Thoracic Society
Account Number : 873-1-0420229-5
Name of Bank : Standard Chartered Bank Berhad
Address of Bank : Publika Branch Solaris Dutamas Jalan Dutamas 1,
50480 Kuala Lumpur

*(Please return the remittance advice note along with this form either by fax or email.
Document image by email is also acceptable)*

Each registration per participants

All Information is required

Name : _____ Dr / Ms / Mr

Phone Number : _____ Personal Email : _____

Position : _____ Grade : _____

Department/Klinik Kesihatan : _____

Hospital/Pusat Kesihatan Daerah : _____

MTS Member ? : Yes / No

Payment Amount : _____ Date of Payment : _____

Payment Reference Number : _____

Please include attachments as below :

1. Proof of Payment

Any enquiries please contact :

Clinical Research Centre (CRC),
Hospital Tunku Azizah
Email : researchwchkl@moh.gov.my
Tel : 03-2600-3000 (ext 2120)

Registration
SCAN

