# **Message from the President**

# **Happy Year of Horse!**

This year is not only the Year of Horse but also the Hong Kong Academy of Medicine entering into its third decade. In December 2013, a series of events were organized to celebrate its 20<sup>th</sup> anniversary. This included a most interesting Congress held on 8-11 December 2013 at the Academy building in Hong Kong. The theme of the Congress is "Manpower needs in medicine: moving with the times".

Dr. Margaret Chan, Director General of WHO, was one of the keynote speakers. In her speech – "Human resources for medical care: black-out, burn-out or turn-about?", she said "Here is a final personal conviction that I will share. I am a huge fan of family physicians, the people-centred care they provide, and the values they represent. Unfortunately, Family Medicine is a vanishing specialty worldwide right at the time when it is needed most. Governments must provide the right incentives and environment so that more doctors will specialize in Family Medicine."

The HKAM 20<sup>th</sup> anniversary celebration also marks the opening of the Hong Kong Jockey Club Innovative Learning Center for Medicine, situated on the seventh floor of the Academy building. In 2010, the Hong Kong Academy of Medicine adopted a position that "Colleges should be encouraged to build more skill / simulation laboratories and develop simulation-based training."



(from left to right) Dr. Billy Chiu, Dr. Catherine Chen, Dr. Gene Tsoi, Dr. Margaret Chan, Dr. Ruby Lee, Dr. Stephen Foo, Dr. Cynthia Chan and Dr. Angus Chan

# **Curriculum Review**

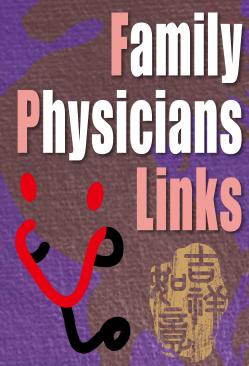
With today's burden of non-communicable diseases, aging population, and culture of "excess": excessive diagnostic tests and intervention, a strong Family Medicine system is necessary. The council reckoned that our curriculum could be updated to include the newer, contemporary core competencies that are necessary for practicing within an evolving environment. Curriculum renewal should be an ongoing process because of the changing environment of medicine. Our sister colleges RACGP and RCGP have both reviewed their curricula in recent years. The Vocational Training Programme Review Subcommittee was therefore set up under the Board or Vocational Training and Standards.

Congratulations to Dr. Edmund Lam who was accredited clinical fellowship of the AAMFT, a very honoured and rare achievement for a family therapist outside of the US.

(Continued on page 2)

THE HONG KONG COLLEGE OF FAMILY PHYSICIANS





# **ISSUE 120** February 2014

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# **COLLEGE NEWS**

(Continued from page 1)

# Message from the President



Prof. Donald Li contributed a tribute to the late Dr. Peter CY Lee with moment of silence at the WONCA world executive meeting in London January 2014



At annual dinner of Hong Kong West Cluster on 30<sup>th</sup> November

## "Council Member-On-Duty" (CMOD) System

Dear College members,

We are still providing this alternative channel of communication for you to reach us. Do let us have your ideas and comments so that we can further improve our services to all the members.

From 15<sup>th</sup> February 2014 to 14<sup>th</sup> March 2014, Dr. Chan Hung Chiu and Dr. Chan Suen Ho, Mark will be the Council Members On Duty. Please feel free to make use of this channel to voice your doubts, concerns, queries, and comments on anything related to our College and Family Medicine. You can reach us by contacting our College Secretariat by phone: 2528 6618, by fax: 2866 0616, or by email: <u>hkcfp@hkcfp.org.hk</u>. Once we receive your call or message, we will get in touch with you directly as soon as we can.



Dr. Chan Hung Chiu

Dr. Chan Suen Ho, Mark

Dr. Tony C. K. Lee Co-ordinator, CMOD System

### Membership Committee News

The Membership Committee approved, on recommendation of the Chairman of the Membership Committee, the following applications for membership in **December 2013 - January 2014** :

Associate Membership (New Application)	Dr. Wong Ka Kei	黃 家 淇
Dr. Cheuk Hiu Ying 卓晓		
Dr. Choi Hiu Yeung蔡曉Dr. Chow Yuet Wah周月		何 潔 儀

### **Classified Advertisements**

**Positions Vacant** 

United Christian Nethersole CHS, pioneer of primary healthcare service, invites FT/PT/Locum Family Physician to join our professional team. Flexible hours, good work-life balance. Please send CV to Ms. Law : <u>hr@ucn.org.hk</u>.

Accredited Private FM Centre invites full time / part time Doctors for expanding services (Tuen Mun / Kwai Fong). FM Trainee, specialists welcomed. Basic + Profit Sharing ± Partnership.



# **COLLEGE NEWS**

## **Board of Diploma in Family Medicine (DFM) - Lectures**

#### **Topics and Speakers :**

Date	Time	Торіс	Speaker
1 Mar 2014 (Sat	) 2:30 p.m. – 5:00 p.m.	Module III – Anticipatory Care	Dr. Chao Vai Kiong, David
8 Mar 2014 (Sat	) 2:30 p.m. – 5:00 p.m.	2:30 p.m. – 5:00 p.m. Module III – Research & Teaching in Family Medicine	
Co-ordinator	: Dr. Au-yeung Shiu Hi Board Member, The B	<b>ng</b> oard of Diploma in Family Medicine, HKC	CFP
Venue	: Council Chamber, Roon Wanchai, Hong Kong	n 802, 8/F, Duke of Windsor Social Service B	uilding, 15 Hennessy Road,
Accreditation	: 3 CME points HKCFP ( 3 CME points MCHK	Category 4.4)	

**Registration Fees** (Please tick as appropriate):

Date	Торіс	HKCFP Member	Non-member
1 Mar 2014 (Sat)	Module III – Anticipatory Care	□ HK\$ 200	□ HK\$ 400
8 Mar 2014 (Sat)	Module III – Research & Teaching in Family Medicine	□ HK\$ 200	□ HK\$ 400

### Capacity : 40 Doctors

**Registration** : Registration will be first come first served. For registration or any enquiry, please call the College secretariat, Mr. John Lee at 2528 6618. All cheques are payable to "HKCFP Holdings and Development Limited". Please mail the cheque to Rm 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen. All fees received are non-refundable and non-transferable.

To: HKCFP, Room 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. (Fax: 2866 0616)

Dear Sir/ Madam,

I am a \*Member / Non-Member of the Hong Kong College of Family Physicians. (\*Please delete as appropriate)

I would like to attend lecture of **Module III** at Council Chamber, Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong.

Name	:	
Tel No.	:	
Email	:	
Date	:	



# **COLLEGE NEWS**

## TWENTY- EIGHTH CONJOINT HKCFP/RACGP Fellowship Examination SECOND Announcement

The Board of Conjoint Examination is pleased to announce the following information on the Twenty-eighth Conjoint Fellowship Examination with the Royal Australian College of General Practitioners to be held in 2014.

#### (1) REQUIREMENTS AND ELIGIBILITY

All candidates **MUST** be at the time of application for the Examination and at the time of the Conjoint Examination:

- 1. FULL OR ASSOCIATE members of BOTH HKCFP AND RACGP\*
- 2. FULLY REGISTERED with the Hong Kong Medical Council\*

(\*Documentary evidence is required with the application - including a valid RACGP number.)

(**Note** : All candidates are required to renew their RACGP membership for the year 2014/2015 before 31 July 2014. Failure to comply with the rule may result in denial of admission to the Exam.)

In addition, they must be EITHER CATEGORY I OR CATEGORY II CANDIDATES: -

(a) **CATEGORY I CANDIDATES** are graduate doctors who are undergoing or have completed a fully approved vocational training programme as outlined in the College's Handbook for Vocational Training in Family Medicine.

After satisfactory completion of two years of approved training, Category I candidates or trainees may apply to sit for the Written Examination, where both segments of which must be taken at the same attempt. After satisfactory completion of four years of supervised training, Category I candidates may apply to sit for the Clinical Examination.

(**Note** : All Category I candidates who are current vocational trainees and apply to sit for the Written Examination <u>**MUST**</u> submit evidence of completion of at least 15 months of approved training by 31 March 2014, together with the application. Those current vocational trainees who apply for the Clinical Examination <u>**MUST**</u> submit evidence of completion of at least 39 months of approved training by 31 March 2014, together with the application. Candidates who have already completed vocational training <u>**MUST**</u> submit evidence of completion of vocational training, together with the application.

Part-time trainees must submit evidence of completion of their vocational training by the time of the Written Examination before they can apply to sit for the examination.)

(b) **CATEGORY II CANDIDATES** are doctors who have been predominantly in general practice for not less than five years by 30 June 2014.

Category II candidates may opt to only sit for the Written Examination at the first and subsequent application.

Enquiries about eligibility to sit for the examination should be directed to the Chairman of the Board of Conjoint Examination.

The eligibility of candidates of both categories is subject to the final approval of the Board of Conjoint Examination, HKCFP.

Application will not be processed unless all the documents are submitted with the application form.

#### (2) FORMAT AND CONTENTS

- A. Written Examination Key Feature Problems (KFP), and, Applied Knowledge Multiple Choice Questions (MCQ)
- B. Clinical Examination Objective Structured Clinical Examination (OSCE)

#### (3) PRE-REQUISITE FOR CLINICAL SEGMENTS

All candidates applying to sit for the Clinical Examination of the Conjoint Fellowship Examination MUST possess a CPR (Competence in Cardiopulmonary Resuscitation) certificate issued by the HKCFP\*. This validity of this certificate must span the time at which the application for the Examination is made AND the time of the Clinical Examination.

Application will not be processed unless the pre-requisite is fulfilled.

\*Note: Regarding the CPR certificate issued by the HKCFP, the CPR workshop & examination for 2014 will be held on 22 - 23 February 2014. Details regarding the workshop / examination can be referred to the News of Board of Education (on page 16). Please register with our College secretariat at 2528 6618 IMMEDIATELY if you do not hold a valid CPR certificate issued by HKCFP and intend to sit for the Conjoint Examination 2014.

#### (4) CRITERIA FOR A PASS IN THE EXAMINATION

A candidate will be required to pass the entire Written Examination in one sitting. That is, if one fails the Written Examination, both the KFP and MCQ segments have to be re-taken. Successful Written Examination result can be retained for three years (until the Clinical Examination of 2017).

The Clinical Examination can only be taken after successful attempt of the Written Examination. If one fails the Clinical Examination, all the OSCE stations have to be re-taken.

A candidate has to pass both the Written and the Clinical Examinations in order to pass the Conjoint HKCFP/ RACGP Fellowship Examination.

#### (5) APPLICATION AND EXAMINATION FEES

Application forms are available from the College Secretariat at Room 803-4, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. You may also download the application forms from our College website, <u>www.hkcfp.org.hk</u>. Please note that the deadline for application is **15 April 2014**.

\$26,000

\$10,100

#### For both CATEGORY I or CATEGORY II CANDIDATES:

- Full Examination (Written + Clinical)

- Written Examination

- First attempt on Clinical Examination

- Subsequent attempt on Clinical Examination

Please make the cheque payable to "HKCFP Education Limited". If a candidate applies for the Full Examination and fails the Written Examination, the fee (\$10,100) paid for the Clinical Examination will be refunded.

\$7,500 plus Administrative Fee \$8,400

\$10,100 plus Administrative Fee \$8,400

#### (6) REFUND POLICY

If a candidate wishes to withdraw from the examination, and written notification of withdrawal is received by the College 60 days or more prior to the date of the examination, he will receive a refund of \$17,600 (for the whole examination), \$7,500 (for the written examination) or \$10,100 (for the clinical examination). The administration fee of \$8,400 will not be refunded.

No refund of any amount will be given if written notice of withdrawal is received by the College within 60 days of the date of the examination.

#### (7) IMPORTANT DATES

- 15 April 2014 (Tuesday)
- 24 August 2014 (Sunday) (Tentative)
- 31 August 2014 (Sunday) (Tentative)

Just 2014 (Sunday) (Tentative) Con

• 26 October 2014 (Sunday) (Tentative)

#### (8) ELECTION TO FELLOWSHIP

Members should be aware that passing the Conjoint Fellowship Examination does NOT equate with election to the Fellowship of either the Hong Kong College of Family Physicians or the Royal Australian College of General Practitioners. Those wishing to apply for Fellowship of either or both College(s) should ensure that they satisfy the requirements of the College(s) concerned.

Entry forms for Fellowship, Membership and Associateship of the Hong Kong College of Family Physicians and the Royal Australian College of General Practitioners are available from both College website (<u>www.hkcfp.org.hk</u> / <u>www.racgp.org.au</u>). You may also contact the HKCFP Secretariat, Room 803-4, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. Tel: 2528 6618, Fax: 2866 0616.

CCHAN

Dr. Chan Hung Chiu Chairman Board of Conjoint Examination

Closing Date for Applications Conjoint Examination – Written Examination (KFP) Conjoint Examination – Written Examination (MCQ) Conjoint Examination - OSCE



# **HKCFP Research Fellowship 2014**

### Introduction

The HKCFP Research Fellowship was established by the Hong Kong College of Family Physicians to promote research in Family Medicine. The Grant is up to the value of HK\$ 100,000. Applicants are expected to have regular contact with a nominated supervisor with Master or equivalent degree or above.

### Eligibility

Applicants for the HKCFP Research Fellowship must be active Fellow, Full member or Associate Member of the HKCFP. New and emerging researchers are particularly encouraged to apply.

### Selection criteria

Applications will be judged on\*:

- Training potential of applicants;
- Relevance to Family Medicine and community health;
- Quality;
- Value for money;
- Completeness (incomplete or late applications will not be assessed further).

\* Please note that new researchers and those at an early stage of their research careers are defined as those who have not led a major research project or have fewer than 5 years of research experience.

### How to apply

- Application form, terms and conditions of the Fellowship can be downloaded from <u>www.hkcfp.org.hk</u> or obtained from the College Secretariat, HKCFP at Rm 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. Tel: 2528 6618 Fax: 2866 0616.
- 2. Applicants must submit:
  - The completed application form;
  - The signed terms and conditions of the HKCFP Research Fellowship;
  - Curriculum vitae from the principal investigator;
  - Curriculum vitae from the co-investigator(s) (no more than two pages) AND,
  - Curriculum vitae from the supervisor.
- 3. Applications close on: March 31, 2014. Late applications will not be accepted.
- 4. Applications can be either sent:

**By post** to Chairman, Research Committee, The Hong Kong College of Family Physicians, Rm 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong; Or, **by email** to johnlee@hkcfp.org.hk

# The HKCFP Award for the Best Research of 2013

The Research Committee of the Hong Kong College of Family Physicians is calling for The Award for The Best Research of the Year 2013. All members and fellows of the College are invited to participate and submit their research papers to the Research Committee for selection. The Award will be presented at the Conferment Ceremony in 2014.

### Entry and assessment criteria are listed below:

### Entry Criteria:

- 1. The principal investigator has to be a Member or a Fellow of the Hong Kong College of Family Physicians.
- 2. The research must be original work of the investigator(s).
- 3. The research should be conducted in Hong Kong.
- 4. The research must have been completed.
- 5. The paper should be presented under the standard headings of Abstract, Introduction, Methodology, Results, Discussion and Conclusion. References should be listed in full at the end in Vancouver format.

### Assessment Criteria:

- 1. How relevant are the topic and findings to Family Medicine?
- 2. How original is the research?
- 3. How well designed is the methodology?
- 4. How well are the results analyzed and presented?
- 5. How appropriate are the discussion and conclusion(s) drawn?
- 6. How useful are the results for patient care in the discipline of Family Medicine?
- 7. How much effort is required to complete the research study?

Each research project submitted will be assessed according to the seven criteria listed above by a selection panel. Each criterion may attract a different weighting to be decided by the selection panel. Please send your submission to: Research Committee, HKCFP, Rm 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong.

DEADLINE OF SUBMISSION: 31 March, 2014

### Publication Committee : Problem-based Approach to Family Medicine

The Committee is pleased to announce the publication of the first academic book from the College - Problem-based Approach to Family Medicine. This comprehensive 500-paged book, full of coloured illustrations and photos, was written by a group of experienced family physicians using a scenario-based approach that simulates the work of a family physician. It contains 24 different clinical scenarios commonly encountered in family practice to illustrate the content and principles of Family Medicine. It is an excellent reference book in Family Medicine for undergraduates, practising family physicians and doctors of other specialties locally and world-wide. For non-members, the price of the book is \$300 and college members are entitled to a 30% discount\*\*\* (postage fee excluded). For those who are interested, please fill in the order form below. We know that you will find this book a valuable tool to further your learning as well as a way to appreciate the fine art of Family Medicine.

\*\*\* \$210 (for members) & \$300 (for non-members) is for self-collection at Wan Chai or Wong Chuk Hang office. The amount of postage fee depends on the no. of books ordered. For details, please contact Ms. Priscilla Li at 2528 6618.

#### SECTION I - THE TOOLS

- A. Problem-based learning Trevor J GIBBS
- B. Evidence-based medicine *Keith KW CHAN*
- C. Literature Search *Keith KW CHAN*
- D. Literature Appraisal *Keith KW CHAN*
- E. Some EBM jargons *Keith KW CHAN*

To: HKCFP

Room 803-4, 8/F,

#### SECTION II - THE SCENARIOS

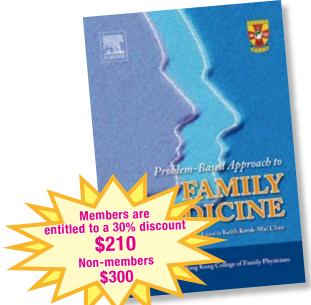
- 1. A women with a swollen red leg *Keith KW CHAN*
- 2. The boy with a fever and sore throat *Yvonne CY LO, Julie CHEN, TP LAM, Cindy LK LAM*
- 3. A young man with chronic cough *Ricky WK WU*
- 4. A 15 month-old child with fever *Albert LEE*

HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong (Fax No. 2866 0241)

# CONTENTS

- 5. A child with wheeze *Alvin CY CHAN*
- 6. A child with a rash *Mary BL KWONG*
- 7. The dysonoeic Mr. Chow *YT WUN*
- 8. A man with low back pain *WW LAI*
- 9. A lady with sprained ankle *MP YIU, Kenith KW CHAN*
- 10. A woman with knee pain *Andrew KK IP*
- 11. A woman with headache Julie Y CHEN, TP LAM, Yvonne YC LO, Cindy LK LAM
- 12. A man with chest pain TP LAM, Vonne YC LO, Julie Y CHEN, Cindy LK LAM
- 13. A man with white-coat hypertension *Amy KL CHAN*

### **ORDER FORM**



- 14. An elderly man with high blood pressure *KK NG, Keith KW CHAN*
- 15. A middle aged woman with dizziness Stanley KH LAM
- 16. A Lady with glycosuria *Allen HY NGAI*
- 17. A man with chronic abdominal pain *HC CHAN*
- 18. A woman with vaginal discharge *Winnie CHAN, Janet CY TAM*
- 19. A woman with heavy menstrual bleeding *SN FU*
- 20. A gentleman with hand tremor Natalie YK YUEN, Natalis CL YUEN
- 21. A woman with forgetfulness *Ruby SY LEE*
- 22. A man requesting colorectal cancer screening
- *Douglas TC LAI, Tammy KW TAM* 23. An elderly man with pruritus
- Antonio CHUH
- 24. A lady with a red eye *Donald KT LI*

I am a (an) \*Affiliate / Student / Associate / Full / Fellow member / Non-member of the Hong Kong College of Family Physicians. I would like to purchase \_\_\_\_\_\_ copy / copies of Problem-based Approach to Family Medicine.

Enclosed please find cheque payment of HK\$ *** All cheques are payable to "HKCFP Education Ltd".***					
Name :		Email address :			
Postal address :					
Tel No. :		Date :			

\*Please circle your category of membership.

# OASIS



# Struggles of our Life

Once upon a time a daughter complained to her father that her life was miserable and that she didn't know how she was going to make it. She was tired of fighting and struggling all the time. It seemed just as one problem was solved, another one soon followed. Her father, a chef, took her to the kitchen. He filled three pots with water and placed each on a high fire.

Once the three pots began to boil, he placed potatoes in one pot, eggs in the second pot and ground coffee beans in the third pot. He then let them sit and boil, without saying a word to his daughter. The daughter, moaned and impatiently waited, wondering what he was doing. After twenty minutes he turned off the burners. He took the potatoes out of the pot and placed them in a bowl. He then ladled the coffee out and placed it in a cup.

Turning to her, he asked. "Daughter, what do you see?" "Potatoes, eggs and coffee," she hastily replied.

"Look closer", he said, "and touch the potatoes." She did and noted that they were soft. He then asked her to take an egg and break it. After pulling off the shell, she observed the hard-boiled egg.

Finally, he asked her to sip the coffee. Its rich aroma brought a smile to her face.

"Father, what does this mean?" she asked.

He then explained that the potatoes, the eggs and coffee beans had each faced the same adversity-the boiling water. However, each one reacted differently. The potato went in strong, hard and unrelenting, but in boiling water, it became soft and weak. The egg was fragile, with the thin outer shell protecting its liquid interior until it was put in the boiling water. Then the inside of the egg became hard. However, the ground coffee beans were unique. After they were exposed to the boiling water, they changed the water and created something new.

"Which one are you?" he asked his daughter. "When adversity knocks on your door, how do you respond? Are you a potato, an egg, or a coffee bean?"

In life, things happen around us, things happen to us, but the only thing that truly matters is how you choose to react to it and what you make out of it. Life is all about leaning, adopting and converting all the struggles that we experience into something positive.

<u>http://www.moralstories.org/struggles-of-our-life/</u> (本欄資料由 心靈綠洲一個人成長及危機處理中心 提供,特此鳴謝。)



# FEATURE

# How to Prepare for the Conjoint HKCFP/RACGP Fellowship Examination (Written Segment) - My Sharing of Study Experience

### Dr John-Hugh Tam, Specialist in Family Medicine Department of Family Medicine & Primary Health Care, Kowloon West Cluster, Hospital Authority

Throughout the recent years, I have been approached by juniors and colleagues asking how we should get ready for the written segment of our college's conjoint examination (written segment, also known by many of us as "Part 1"). I think everyone has his own study method, but here is how I prepared for mine.

## Aim: PASSING THE EXAM (Obviously!)

### Syllabus:

Unfortunately, there is <u>NO ACTUAL SYLLABUS!</u> But in fact, it may not be too hard to guess what we should focus on if we think carefully and look at the design of the examination.... 正所謂「知己知彼,百戰百勝」(a popular Chinese saying originating from the ancient literature, "Sun Tzu's Art of War", which literally means "to know your opponent like knowing yourself to win a hundred battles").

As far as I understand, this examination is designed to ensure you have a <u>good range of clinical knowledge</u> <u>AS A GENERAL PRACTITIONER IN THE COMMUNITY</u>, which means all doctors working in PRIVATE + PUBLIC settings. So for colleagues serving in public GOPCs, you need to think much broader and not just about things that happen only inside our clinics. As the range of knowledge that a family physician should know is very broad, we must appreciate the impossibility for us to get tested on absolutely everything, and there ought to be things that are of "higher priority". If we dare to postulate using reverse thinking (逆向思維), these higher priority "must know" knowledge usually lies under the following categories:

- <u>Medical emergencies</u>: that you may encounter in your clinic → to ensure you are a <u>safe</u> doctor when you are working independently in the community.
- <u>"Hot" topics</u> (e.g. What was mentioned recently in press release? What are the important issues that the news and media concern about recently?) → hence being an <u>"in"</u> doctor (things that even the general public knows about, you should know better than them to avoid embarrassing yourself!).
- <u>"Important but treatable"</u> conditions  $\rightarrow$  To make sure you don't miss out important diagnoses.
- <u>"Rare but interesting"</u> conditions  $\rightarrow$  To ensure you have a broad knowledge range.
- <u>Practical issues</u> you encounter at work and discuss with your patients everyday: e.g. contraception, travel advice, smoking cessation advice, etc. → Aiming at issues which are <u>realistic</u> to daily work and paying

attention to <u>what actually happen</u> every day in your clinic and what your <u>patients often like to ask</u>.

- Things that are <u>so typical that can be diagnosed as</u> <u>spot diagnosis "at a glance"</u> → e.g. <u>Clinical photos</u> (If all your fellow colleagues know this, why shouldn't you?).
- Basic medical statistics → you are always expected to know a bit about this, as understanding this would help you to tackle the journals that you will read; it will also set as a good knowledge basis for those interested in research works during later stage of the vocational training (e.g. during exit exam).
- Your <u>PATIENTS</u> are also part of your syllabus! → Yes! Your <u>clinical experience</u> is also very important (hence the wider range of cases you encounter at work, the less extra revision you would need as you should have already learnt from your patients, <u>providing that</u> <u>you managed them properly</u>)..... it may sound "old fashioned" to say so but it is so true!

### My Preparation Strategy:

- Consider planning ahead and start around <u>February</u>
   <u>- March</u> if you aim at taking examination during
   autumn of the same year (this would make a <u>soft but</u>
   <u>comfortable start with ample time</u> and hence no need
   to be too stressed at the beginning).
- 2) NEVER just focus on a single reading source (e.g. spending 100% of time reading only 1 big text book "from cover to cover"), as unfortunately, this would still be <u>inadequate</u> in terms of the range of knowledge you need for this exam (also you will easily lose focus as the book is too big + NOT have enough time to complete the reading!)



# FEATURE

As discussed in the last section, at least we need to have a good understanding on:

- Important Conditions;
- <u>Common practical problems / Common things that</u> <u>occur in our clinic;</u>
- <u>Up-to-date topics;</u>
- Medical Emergencies;
- Medical Statistics.

In the past, here was how I gained my knowledge:

• Reading from the latest medical journals to get the most up-to-date medical information, for example Australian Family Physician (AFP), The American Family Physicians (AAFP) & our college journal, The Hong Kong Practitioner. But since there are many issues to cover (usually friends and seniors would tell you to cover 2-3 years), try extract a few KEY points from the important articles during skim reading (since it is impossible to remember everything) e.g. tables with solid information that you may be tested on. (Even better if you can copy those important points in a note pad or a pack of cue cards, so during the last moments just before the exam, you only need to take a quick look at those points to have "LAST MINUTE RECALL" on the most important bits).

John Murtagh's General Practice (also known by us as the "Big GP") is a famous reference text that is commonly used by many of us. It is a good text that serves to supplement knowledge of important topics that the journals have not covered. Try skim through the contents page and highlight the <u>topics that are either "important",</u> <u>"common", "emergent" & "up-to-date"</u> and read those specific sections → This should help you to fill-up the RANGE of knowledge on things that are not yet touched by your journal reading. From this, it would be even better if you can be systemic & spare some time to prepare a "topic checklist" to help you remember what to cover, so you can plan ahead on topics to read up about, e.g.:

	Dermatology	Cardiovascular	Paediatric	O&G	Etc
Emergencies					
Important					
Common					
Up-to-date					
Others					

- A brief glance on <u>international guidelines</u> on how certain common chronic diseases are managed nowadays (e.g. GOLD guideline for COPD...) to ensure you are "up-to-date" and "up-to-standard".
- Never forget those little "tool books" you have at home → spend a few hours glancing at your <u>ECG book</u> / <u>clinical picture tests books</u> / <u>intern pocket handbook</u> just to refresh your memory (as there are often some related topics during exam).
- FRIENDS are important! → For colleagues working in GOPCs, do you have classmates and friends working in PRIVATE (and vice versa)? <u>TREAT THEM A DINNER</u> (OR HOLD AN INFORMAL DINNER GATHERING) and chat with them to see what they often encounter in their clinics. This should help you uncover the "blind spots" topics and knowledge that you have never thought about in your preparation.
- Look around your clinic and keep your senses sharp
   → are there any forms around the clinic that you don't
   always look thoroughly at? These may give further
   hints... e.g. How is dementia categorised in terms of
   MMSE scores? What are the communicable diseases
   that need to be reported to the Department of Health

(DH)? etc.... these may help to keep you in the right track.

- Don't forget the letters issued by DH, take a quick look every time you receive those letters in your mail box (e.g. those letters informing us about disease outbreaks, substance poisoning, etc), appreciate these as they are "in" this year.... If you appreciate those as important, your examiners may find it inspirational as well.
- And for basic medical statistics, spare a bit of time to read about it and do a few practice calculations.
- Also, please <u>never fight this battle alone!</u> Usually you will benefit a lot more by discussing regularly with your study mates, best if you are able to form some kind of study groups and share your knowledge, hence everyone benefit and read less....

**Finally:** <u>Good luck!</u> Relax and get plenty of sleep the night before the exam as it WILL BE BEST FOR YOU TO HAVE A REFRESHED MIND WHILST WALKING INTO THE EXAM ROOM.





# The Two Types of Pneumococcal Vaccine

There are two types of pneumococcal vaccine — pneumococcal polysaccharide vaccine (PPSV) and pneumococcal conjugate vaccine (PCV).

The first PPSV, containing 14 serotypes, was licensed in the United States in 1977. In 1983, an improved PPSV was licensed, containing purified protein from 23 types of pneumococcal bacteria. This PPSV is commonly known as PPSV23. The PPSV23 vaccine is licensed for routine use in adults 65 years and older and persons with certain risk factors who are aged 2–64 years.

The first PCV, PCV7, was licensed in early 2000. Ten years later, in 2010, a new PCV product (PCV13) was licensed and replaced PCV7 for use in the routine vaccination of children. PCV13 offers additional protection against the types of pneumococcal bacteria that cause the majority of invasive pneumococcal disease (IPD) in the USA. PCV13 is recommended for use in preventing pneumococcal disease in all infants and young children, beginning as young as 6 weeks, as well as in certain adults with underlying medical conditions.

	PCV13	PPSV23
Mechanism	It includes purified capsular polysaccharides from the bacteria that are "conjugated" to a harmless variety of diphtheria toxin. This combination provokes a significantly more robust immune response by recruiting CRM197-specific type 2 helper T cells, which allow for immunoglobulin type switching (to produce non-IgM immunoglobulin) and production of memory B cells. The resultant conjugate vaccine is able to produce an immune response in infants and antibody booster response with multiple doses of vaccine.	It contains long chains of polysaccharide molecules that make up the surface capsule of the bacteria. Immunity is induced primarily through stimulation of B-cells which release IgM without the assistance of T cells. Generally speaking, a pure polysaccharide vaccine induces only short-term immunity and doesn't work as well in children younger than 2 years, presumably due to their less mature immune systems.
Vaccination schedule	All infants beginning at two months of age should receive a four-dose series of vaccine; catch-up vaccination is recommended for children younger than age 5 years who did not receive the vaccination on schedule. In addition, all healthy children younger than 5 years who have completed an age-appropriate schedule of vaccination with the former PCV7/ PCV10 vaccine are recommended to receive one additional dose of PCV13 as are children with specific medical conditions who haven't yet reached their 6th birthday. Children at high risk of IPD should receive PCV13 and then also receive PPSV23 when they reach their 2 <sup>nd</sup> birthday. PPSV23 is not given routinely to healthy children.	Second vaccination is not done routinely; however an additional dose is recommended for groups of people at the highest risk of serious infection. All adults, including those who are not vaccinated previously, will need to get a dose once they are aged 65. For example, persons who received a first dose when they were younger than age 65 years should receive a second dose at age 65 years if at least five years have elapsed since the previous dose. Likewise, persons aged 2 years through 64 years who are at high risk for pneumococcal disease due to certain long-term health problems, in particular immunosuppression, HIV infection, and hyposplenism/ asplenia should get a second dose five or more years after the first dose, and then the final dose once they are aged 65 years.
Effectiveness	89% effectiveness of >1 dose PCV13 vs. PCV13-type IPD.	Overall, PPSV23 is 60%–70% effective in preventing IPD. Older adults (e.g., older than 65 years) and persons with significant underlying illnesses do not respond as well, but vaccination with PPSV23 is still recommended because such persons are at high risk of developing IPD.
Side effects	Most reactions are mild, and on average, about half of the children were drowsy after the shot, had a temporary loss of appetite, or had redness or tenderness where the shot was given. About 1 out of 3 had swelling where the shot was given, about 1 in 3 had a mild fever, about 1 in 20 had a higher fever (over 38.9°C), and about 8 out of 10 became fussy or irritable.	About 30%–50% of the people who got the vaccine had very mild side effects, such as redness or pain where the shot was given. Fewer than 1% of recipients developed a fever, muscle aches, or more severe local reactions. Serious allergic reactions have been reported very rarely.

#### **References:**

Centre for Health Prevention. Scientific Committee on Vaccine Preventable Diseases, Recommendations on the Use of 13-valent Pneumococcal, Conjugate Vaccine in Childhood Immunisation Programme.

 Pletz MW, Maus U, Krug N, Welte T, Lode H (September 2008). Pneumococcal vaccines: mechanism of action, impact on epidemiology and adaption of the species. Int. J. Antimicrob. Agents 32 (3): 199–206.

The Centers for Disease Control and Prevention. Pneumococcus: Questions and Answers, Information about the disease and vaccines.

• Matthew R. Moore. Update on Effectiveness and Impact of PCV13 use among U.S. Children.

Compiled by Dr Sze Hon Ho



# **Post AEC Group**

#### Dr Lee Kar Yun, Peter (Co-ordinator) Board of Education

The Post AEC Group is a College-organized, small learning group, and operates in conjunction with the AEC course. The main objective is to form a structured, intense study group catering for Category 2 candidates who have enrolled in the AEC (Assessment Enhancement Course) and wish to sit for the Conjoint Examination.

Category 1 or FM trainees receive structured training organized under the HKCFP guidelines during their basic training, and the Conjoint Examination is really Part 1 of the assessment for FM training, with a subsequent Exit examination at the end of 6 years of approved training. For Category 2 candidates, they may not have the structure or training facilities which fulfill the learning requirements necessary to prepare and sit for the Conjoint Examination. The AEC and Post AEC Group attempt to fill in the details for Category 2 candidates, so that they can better understand and prepare for what's required.

The Post AEC group concentrates on the OSCE component of the Conjoint examination. The Written section of the Conjoint Examination is covered by the Written Enhancement Training Course, offered separately by the College.

The Post AEC group normally have 12 – 14 meetings, and these sessions cover the basics, and help participating candidates learn how to prepare for the OSCE cases, learn how to construct cases, understand how cases can be marked, and practice applying these principles to improve their knowledge in family medicine and exam performance.

All the tutors are volunteers from the College. With the diversity of their background, these tutors can provide participating candidates with a better and wider preparation experience and learning methods. For all candidates who wish to sit for the Conjoint examination, the advice is:

'Be well prepared and focus on the learning objectives'

- To deal with the Written section, start the bookwork early, as the depth of the topics tested might not be easily encountered during clinical practice. Start at least 1 year before the intended year of taking the examination. Do practice written questions from a variety of sources.
- You must have a valid CPR certificate for the year you intend to sit for the Conjoint Examination.
- You should have accumulated at least 3 consecutive years of CME & CPD prior to sitting the Conjoint examination (otherwise you have to wait till you have 3 years of points only after which the Certification can be officially given to you!). You must be a current associate member of both RACGP and HKCFP in order to validate the CME and CPD points.

Finally, ask yourself the reasons why you wish to obtain this qualification, and be willing to change your way of thinking and practice in order to achieve the proper mindset and attitude to help you pass. The changes you make could become a lifelong habit that will improve and enrich your Family Medicine practice in the future. Don't forget to thank all your supporters when you finally pass the examination!



- Please wear a surgical mask if you have respiratory tract infection and confirm that you are afebrile before coming to the meeting.
- Please wear an appropriate dress code to the hospital for the clinical attachment.
- Private Video Recording is not allowed. Members, who wish to review the lecture, please contact our secretariat.

## ASSESSMENT ENHANCEMENT COURSE (AEC) FOR FAMILY PHYSICIANS 2014

Organizer	:	Assessment Enhancement Sub-committee, Board of Education, HKCFP
Tutors	:	Family Medicine Specialists, Fellows of HKCFP and RACGP
Supervisors	:	Dr. Tam Chung Yin, Janet and Dr. Chan Chi Wai
Co-ordinator	:	Dr. Lai Sheung Siu
Objectives	:	1. To improve clinical knowledge, problem solving and consultation skills through different workshops
		<ol> <li>To improve physical examination technique and clinic procedural skills through hands-on experience</li> </ol>
		<ol> <li>To provide opportunity for inter-professional communication and social network expansion through self-help groups</li> </ol>
		4. To improve time management through simulated examination
Venue	:	Duke of Windsor Social Service Building and HKAM Jockey Club Building
Date	:	7 months' course starting from April 2014
Course Structure	:	The course will consist of 4 main components: 1. Seminars
		2. Workshops
		3. Self-help Group Support
		4. Mock Exam
		Seminars and Workshops will be arranged on Saturday afternoons (2:30 p.m. to 5:30 p.m.)
Accreditation	:	Up to 15 CME points (Category 4.4) & 5 CPD points (Category 3.15) for the whole course
Course Fee	:	Members : HK\$3,200 (Whole course)
		HK\$900 (Spot admission for each seminar or workshop only)
		All cheques payable to " <b>HKCFP Education Ltd</b> " All Fees received are non-refundable and non-transferable.
Capacity	:	50 doctors maximum
Enrolment	:	Enrolment is now open. Please call the College Secretariat, Ms. Yvonne Lam, at 2528 6618 for details. Successful applications will be informed later.
Disclaimer	:	All cases and answers are suggested by our tutors only. They are not standard answers for examination.
Remarks	:	Post-AEC training course will be organized for category 2 candidates who have enrolled in AEC.

### Assessment Enhancement Course 2014 Timetable for Workshop

Date	Topics	Venue
12 Apr 2014 (Sat) 2:30 – 5:30 p.m.	Introduction	Duke of Windsor Social Service Building, Wanchai
24 May 2014 (Sat) 2:30 – 5:30 p.m.	Approach to Physical Complaints	Duke of Windsor Social Service Building, Wanchai
21 Jun 2014 (Sat) 2:30 – 5:30 p.m.	Proper Physical Examination & Common Clinic Procedures	Duke of Windsor Social Service Building, Wanchai
26 Jul 2014 (Sat) 2:30 – 5:30 p.m.	Viva Practice: Enhance Interprofessional Communication	Duke of Windsor Social Service Building, Wanchai
23 Aug 2013 (Sat) 2:30 – 5:30 p.m.	Problem Solving Skills	Duke of Windsor Social Service Building, Wanchai
4 Oct 2014 (Sat) 2:30 – 6:00 p.m.	Mock Exam	HKAM Jockey Club Building, 99 Wong Chuk Hang Road



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# **Diabetes Clinical Attachment for Family Physicians**

Dates	Lectures and Ward Round Sessions on Wednesday ( 12, 19, 26 March 2014 and 9 April 2014 ) followed by OPD Attachments from March to June 2013 : Every Tuesday a.m./ p.m. sessions				
Organizers & Course Directors	Diabetes Ambulatory Care Centre, Department of Medicine & Geriatrics, United Christian Hospital Dr. Grace Kam Associate Consultant Diabetes Team, United Christian Hospital The Hong Kong College of Family Physicians Dr. Kwong Bi Lok, Mary Chairlady, Board of Education, The Hong Kong College of Family Physicians				
Objectives	<ul> <li>To update Family Physicians with current management of DM problems</li> <li>To provide opportunities to gain knowledge and practical experience in outpatient management of DM patients, emphasizing on comprehensive DM complication screening and goal of management</li> <li>To facilitate public private interface relationship between Hospital and the graduates of this course</li> </ul>				
Course Structure and Time		chment will consist of ase round and worksl	-	ssions on lectures, outpatient	
		Lecture sessions	Ward round sessions	OPD sessions	
	Time:	2:00 p.m. – 4:00 p.m.	4:00 – 5:00 p.m.	10:30 a.m. – 12:30 p.m. (Insulin Clinic) 2:00 – 5:00 p.m. (DM Clinic)	
	Venue:	Seminar Room, 13/F, Block S, UCH	12B Ward	Diabetes Ambulatory Care Centre	
Exemption	be exem	- ·	e sessions and will be	nt in the past 5 years will allowed to attend the OPD	
Venue	United Cł	nristian Hospital, Kwur	n Tong, Kowloon		
Topics	Obesity & metabolic syndrome, DM classification & case round, Microvascular complications, Complication screening, Oral hypoglycemic agents, GLP-1 & Insulin, BP & lipids management, Initiation of ambulatory Insulin.				
Course Fee	HK\$2,600 All cheques payable to <b>"HKCFP Education Ltd"</b>				
Enrolment	Please call Ms. Yvonne Lam or Mr. John Lee at 2528 6618 for details <b>on or before 1<sup>st</sup> Mar 2014.</b> Registration will be first come first served.				
Certification	Reaching the minimum attendance record of Lectures (75%) and required OPD sessions (80%), participant will be awarded a certificate of attendance under the names of organizers.				
Accreditation	-	Up to 15 CME points (Category 4.8) & 5 CPD points (Category 3.16) for the whole attachment.			



## **CPR Training and Examination Workshop 2014**

*Only 2* CPR Training and Examination Workshops will be held in 2014 (22, 23 February and 22, 23 March).

As no one is guaranteed to pass in the first attempt, members who plan to sit for the 2014 Conjoint Examination and who do not possess a valid HKCFP CPR Certificate are strongly advised to register in our CPR session. Members are reminded that a valid HKCFP CPR Certificate is a pre-requisite for enrolment of the Conjoint Examination. Members who plan to sit for the 2014 Conjoint Examination are also reminded to check the validity of their HKCFP CPR Certificate to make sure that it is valid at the time of application and also at the time Clinical Examination. HKCFP CPR certificates are valid for 2 years.

### 22 – 23 March 2014 Saturday and Sunday

#### **CPR Training and Examination Workshop**

Time	2:00 p.m 6:00 p.m.
Venue	8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong
Talks	<ol> <li>CPR Basic Life Support-Principles and Techniques</li> <li>Pitfalls in CPR and Demonstration on Automated Defibrillator</li> <li>Medico-legal Aspect of CPR</li> <li>Updates in Guidelines</li> </ol>
Training	Hands-on training, supervised by HKCFP CPR Instructors
Accreditation	3 CME points HKCFP (Cat. 4.4) 3 CPD points HKCFP (Cat. 3.11) for passing CPR Examination
Co-organizer	The Hong Kong College of Cardiology
Capacity	50 doctors

Admission Fee:

Members (Attend Training and Examination Workshop)	HK\$600.00
Non-members (Attend Training and Examination Workshop)	HK\$1,200.00
Members with expired CPR certificate (HKCFP) (Attend Training and Examination Workshop)	HK\$200.00
Members with valid AHA Certificates (Require to sit for Examination Only)	HK\$200.00
Non-members with expired CPR certificate (HKCFP) (Attend Training Workshop and Examination)	HK\$400.00
All cheques payable to "HKCFP Education Ltd".	
All fees received are non-refundable and non-transfera	able.
Each successful candidate will be awarded a CPR Cert	tificate valid for

Each successful candidate will be awarded a CPR Certificate valid for 2 years, also accredited by RCHK. Please contact Ms. Windy Lau at 2528 6618 for registration on/ before **19 March 2014**.

#### LATE APPLICATIONS WILL NOT BE ENTERTAINED.

#### Conjoint examination application deadline: 15 April 2014

\* **REMARKS:** you are not suggested to take the CPR training workshop and examination during your pregnancy.

1 March 20	14 Saturday
Board of Ed	ucation Interest Group in Dermatology
Aim	To form a regular platform for interactive sharing and discussion of interesting dermatological cases commonly seen in our daily practice
Theme	Family Practice with Special Interest in Skin Diseas
Speaker	<b>Dr. Shih Tai Cho</b> Specialist in Dermatology and Venereology
Co-ordinator & Chairman	<b>Dr. Lam Wing Wo, Edmund</b> The Hong Kong College of Family Physicians
Time	1:00 p.m. – 2:00 p.m. Lunch 2:00 p.m. – 4:00 p.m. Theme Presentation & Discussion
Venue	5/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong
Admission Fee	MembersFreeNon – membersHK\$ 300.00HKAM RegistrantsHK\$ 150.00
	All fees received are non-refundable and non-transferable.
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CPD points HKCFP (Cat. 3.15) 2 CME points MCHK
Language	Lecture will be conducted in English and Cantonese
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.
Note	Participants are encouraged to present own cases for discussion. Please forward your cases to the Co-ordinator via the College secretariat 2 weeks prior to meeting.

HKCFP would like to thank HKMA for supporting this educational activity.

Sponsored by Galderma Hong Kong Limited

#### 13 March 2014 Thursday

Management of Common Sh	houlder Problems
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	Dr. Chen Specialist in Orthopaedics and	<b>ig Sze Chung</b> Traumatology
Chairman	<b>Dr. Chan Chung Yuk, Alvin</b> The Hong Kong College of Family Phy	ysicians
Time	1:00 p.m. – 2:00 p.m. Registration 2:00 p.m. – 3:30 p.m. Lecture and	
Venue	Jade Ballroom, 2/F, Eaton Hotel, 380 I Kowloon	Nathan Road,
Admission Fee	College Fellow, Full or Associate Members	Free
166	Other Categories of Members Non-Members	HK\$ 350.00 HK\$ 450.00
	All fees received are non-refundable a non-transferable.	and
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK Up to 2 CPD points (Subject to submis satisfactory report of Professional Deve	
Language	Lecture will be conducted in English.	
Registration	Registration will be first come first serve Please reserve your seat as soon as poss	

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Family Physicians Links

28 March 2	014 Friday	Admission Fee	College Fellow, Full or Associate Free Members	е
Acne and Ro External Fac	sacea: Role of the Environment and Critical		Other Categories of Members HK\$	\$ 350.00 \$ 450.00
	<b>Prof. Brigitte Dreno</b> Head of the Dermato-Cancerology Department Director of the Gene & Cell Therapy Unit Dean for Research at the Nantes Faculty of Medicine France	Accreditation	All fees received are non-refundable and non-transferable. 2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK Up to 2 CPD points (Subject to submission c	of
Chairman	<b>Dr. Ma Ping Kwan, Danny</b> The Hong Kong College of Family Physicians	Language	satisfactory report of Professional Developm Lecture will be conducted in English.	
Time	1:00 p.m 2:00 p.m.Registration and Lunch2:00 p.m 3:30 p.m.Lecture and Discussion	Registration	Registration will be first come first served. Please reserve your seat as soon as possible.	
Venue	Crystal Ballroom A, Level B3, Holiday Inn Golden Mile Hotel, 50 Nathan Road, Tsim Sha Tsui, Kowloon		Spor Supergo Company	nsored by <b>y Limited</b>

## **Monthly Video Viewing Session**

Monthly video viewing sessions will be scheduled on the last Friday of each month at 2:30 – 3:30 p.m. at 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong.

	Fe	bru	ary's	session:
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February's s	session:	March's ses	sion:
Date	28 February 2014 (Friday)	Date	28 March 2014 (Friday)
Time	2:30 p.m 3:30 p.m.	Time	2:30 p.m 3:30 p.m.
Торіс	Osteoporosis: Where Are We Now? What Shall We Go Next? – Dr. Lee Ka Wing	Торіс	Management of Hypertension – Dr. Leung Wai Suen, Albert
Admission	Free for Members	Admission	Free for Members
Accreditation	1 CME point HKCFP (Cat. 4.2) 1 CME point MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)	Accreditation	1 CME point HKCFP (Cat. 4.2) 1 CME point MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)
Language	Lecture will be conducted in English.	Language	Lecture will be conducted in English.

## **Community Education Programme**

Open and free to all members HKCFP CME points accreditation (Cat 5.2)

Date/Time/CME	Venue	Topic/Speaker/Co-organizer	Registration
<b>8 March 2014</b> 2:15 – 4:15 p.m.	Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, 118 Shatin Pass Road, Wong Tai Sin, Kowloon	<b>Practical Dermatology in Primary Care</b> Dr. Cheng Tin Sik Specialist in Dermatology, Social Hygiene Service, Department of Health	Ms. Clara Tsang Tel: 2354 2440 Fax: 2327 6852

# **Structured Education Programmes**

Free to members

HKCFP 2 CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
5 March 14 (We	d)		
2:15 – 4:45 p.m.	E1034AB, 1/F, Main Block, Tuen Mun Hospital	<b>Case Base Discussion</b> Dr. Lam Siu Ping and Dr. Chan Yin Hang	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m.	Meeting Room 2, 1/F, Block F, United Christian Hospital	Management of Grief Dr. Lee Tin Wai, Edna and Dr. Pun Yat Hei	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m.	Lecture Hall, 5/F, 30 Hospital Road, Tsan Yuk Hospital	<b>Fever - Adults, Children</b> Dr. TT Kam	Ms. Man Chan Tel: 2589 2337



#### 6 March 14 (Thur)

2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	Management of Grief Dr. Xu Shaowei and Dr. Wan Pui Chu, Christina	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Keeping of Drugs and Equipment in GOPCs Dr. Wong Man Kin and Dr. So Chi Kin	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Sharing on Visiting Medical Practitioner Programme Dr. Lam Chi Yuen, Johnny	Ms. Kwong Tel: 2595 6941
12 March 14 (W	ed)		
2:15 – 4:45 p.m.	E1034AB, 1/F, Main Block, Tuen Mun Hospital	How to Handle Angry Patients? Dr. Lui Wai Cheung	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m.	Meeting Room 2, 1/F, Block F, United Christian Hospital	<b>O&amp;G Emergency in General Practice</b> Dr. Chung Sze Ting and Dr. Chow Pui Yin, Melody	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m.	Lecture Hall, 5/F, 30 Hospital Road, Tsan Yuk Hospital	Allied Health Talk: Medical Social Work Dr. Danny Lee	Ms. Man Chan Tel: 2589 2337
5:00 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Anxiety Disorder and OCD Dr. Lee Tin Ho, Gary	Ms. Crystal Law Tel: 2632 3480
13 March 14 (Th	ur)		
2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	<b>O&amp;G Emergency in General Practice</b> Dr. Chan So Wai, Sara and Dr. Yuen Ming Wai	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	How to Conduct a Research Dr. Wong Chun Fai	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Grief – Normal and Complicated Reactions Dr. Leung Wing Mun	Ms. Kwong Tel: 2595 6941
19 March 14 (W	ed)		
2:15 – 4:45 p.m.	E1034AB, 1/F, Main Block, Tuen Mun Hospital	Handling Patients with Multiple Somatic Symptoms Example: Multiple Joint Pain Dr. So Mei Kuen	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m.	Meeting Room 2, 1/F, Block F, United Christian Hospital	Common Symptoms in Surgery Part I (Abdominal Pain, Neck Mass) Dr. Ho Pui Gi and Dr. Leung Ching Ching	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m.	Lecture Hall, 5/F, 30 Hospital Road, Tsan Yuk Hospital	Drug Incidents in GOPC Dr. Nicole Chan	Ms. Man Chan Tel: 2589 2337
20 March 14 (Th	ur)		
2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	Common Symptoms in Surgery Part I (Abdominal Pain, Neck Mass) Dr. Chan Kam Sum and Dr. Kwong Lok See	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	How to Deliver Emergency Care Outside your Clinic Dr. Sze Chung Fai and Dr. Ho Chung Yu	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	<b>Palliative Care in Hong Kong</b> Dr. Cheng Long Yee, Eva	Ms. Kwong Tel: 2595 6941
26 March 14 (W	ed)		
2:15 – 4:45 p.m.	E1034AB, 1/F, Main Block, Tuen Mun Hospital	<b>Principles of Medical Ethics</b> Dr. Felix Tsui	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m.	Meeting Room 2, 1/F, Block F, United Christian Hospital	How to Prepare for Medical Litigation & Medical Witness Dr. Wong Sze Kei and Dr. Kwong Sheung Li	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m.	Lecture Hall, 5/F, 30 Hospital Road, Tsan Yuk Hospital	<b>Vocational Training Review</b> Dr. Anita Fan	Ms. Man Chan Tel: 2589 2337
5:00 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	<b>Screening for the Elderly</b> Dr. Lam Wing Yi	Ms. Crystal Law Tel: 2632 3480
27 March 14 (Th	ur)		
2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	How to Prepare for Medical Litigation & Medical Witness Dr. Chan Fu Leung and Dr. Cheung Yan Kit	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Current Problems in the Health Care Delivery System of Hong Kong Dr. Hsu Kwok Fai and Dr. Mok Kwan Yeung	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	<b>Consultation Skills Video Review</b> Dr. Leung Ka Fai	Ms. Kwong Tel: 2595 6941

Family Physicians Links

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insulin lispro (rDNA origin) injection

25% insulin lispro (rDNA origin) injection 75% insulin lispro protamine suspension

50% insulin lispro (rDNA origin) injection 50% insulin lispro protamine suspension



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For complete instructions on Humalog<sup>®</sup> KwikPen™, Humalog<sup>®</sup> Mix25™ KwikPen™, Humalog<sup>®</sup> Mix50™ KwikPen™ please refer to the full user manual provided with the Pen.

Ignaut DA, Schwartz SL, Sarwat S and Murphy HL. Diabetes Educ 2009;35:789-788
 Ignaut DA, Opincar M and Lenux S. J Diabetea Sci Technol 2008;2:533-537.



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# **COLLEGE CALENDAR**

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
16 <b>Fed</b>	17	18	19 2:15 – 7:30 p.m. Structured Education Programme	20 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Council Meeting	21	22 2:00 – 6:00 p.m. CPR Workshop
23 <b>2:00 – 6:00 p.m.</b> CPR Examination	24 7:00 p.m. HKPCC Meeting	25	26 2:15 – 7:30 p.m. Structured Education Programme	27 2:15 - 7:00 p.m. Structured Education Programme 9:00 p.m. Board of Conjoint Examination Meeting	28 2:30 - 3:30 p.m. Board of Education - Video Session	1 Mar 1:00 – 4:00 p.m. Interest Group in Dermatology
2	3	4	5 2:15 – 7:15 p.m. Structured Education Programme	6 2:15 – 7:00 p.m. Structured Education Programme	7	8
9	10	11	12 2:15 – 7:30 .p.m. Structured Education Programme	13 <b>1:00 – 3:30 p.m.</b> CME Lecture <b>2:15 – 7:00 p.m.</b> Structured Education Programme	14	15
16	17	18	19 2:15 – 7:15 p.m. Structured Education Programme	20 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Council Meeting	21	22 <b>2:00 – 6:00 p.m.</b> CPR Workshop
23 <b>2:00 – 6:00 p.m.</b> CPR Examination	24	25	26 2:15 – 7:30 p.m. Structured Education Programme	27 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Board of Conjoint Examination Meeting	CME Lecture 2:30 – 3:30 p.m. Board of Education –	29

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Ms. Carmen Cheng Tel: 2528 6618 Fax: 2866 0616 E-mail: carmen@hkcfp.org.hk

The Hong Kong College of Family Physicians Room 803-4, 8<sup>th</sup> Floor, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Hong Kong

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