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Message from the President



There was a very interesting health article in the South China Morning Post last week titled "Specialist visit may increase hospital stays". This is based on a scientific report by Prof. Samuel Wong and his team at the School of Public Health and Primary Care, The Chinese

University of Hong Kong. If you log onto www.nature. com/scientificreports and browse 20 July 2016 and open "The association between types of regular primary care and hospitalization amongst people with and without multimorbidity: A household survey on 25,780 Chinese". This article will make every hard working and dedicated Primary Care doctor proud.

The results revealed a significant association between having regular source of primary care from general practitioners and reduced hospitalization amongst respondents with multimorbidity. Chronic patients who consulted specialists rather than general practitioners for care were twice more likely to be admitted to hospital! The holistic, comprehensive, patient-centred and community care by us really works. With an ageing population, it is projected that the long term expenditure for elderly healthcare will increase to 4.9% of GDP by 2036. We improve the health outcomes, lower the morbidity and mortalty, provide better preventive and cost effective care. What more can a community ask for!

The next question is how many general practitioners/ family physicians primarily engaged in primary care are existing in Hong Kong? The answer is nobody knows. One of the patient's right groups commented the work of Primary Care Office under the Department of Health has been limited despite the effort to create a primary care directory. The Office is better off to operate directly under the Food and Health Bureau in order to boost its influence. I hope our health officials will listen to our patients' suggestion.

Here comes my favourite topic: MANPOWER. If we do not have well trained family doctors, our crown as the city with the longest life expectancy will soon be dethroned. Back in 2011, Dr. Mark Chan, one of our Council members led a team to provide a written submission to the Manpower Planning Committee of the HKAM. The estimation was based on one family doctor serving 2,450 people and therefore 2,855 trained family doctors were required to serve the 7 million Hong Kong population. Assuming an annual output of 100 Family Medicine specialists, it will take 28 years to achieve the full competence of family physicians (HKAM specialist standard). The reality is over the past five years there is an average annual intake of 35 trainees entering the 4-year basic training and 22 trainees entering the 2-year higher training. The simple arithmetic means we need 130 years to train enough clones of our type. In UK, 50% of medical graduates are trained in general practice. In China, 150,000 primary care doctors will be trained in the next five years. In Hong Kong, each medical graduate costs the taxpayer \$5 million to train as "undifferentiated" doctor and is not a finished product as Family Physician. If the Hospital Authority is not providing more training posts in Family Medicine, my only wish is "Long Live Everybody, Long Live the President." We may have to extend our retirement age to serve the community.





HKCFP Council meeting annual attendance summary (from December 2015 to August 2016)

HKCFP Council meeting attendance summary 2016				
Cou	incil Members	Position	Term	Attended
1	Dr. Angus MW CHAN	President	Dec 2014-Dec 2016	9/9
2	Dr. LAU Ho Lim	Vice-President (General Affairs)	Dec 2015-Dec 2017	9/9
3	Dr. David VK CHAO	Vice-President (Education and Examinations)	Dec 2014-Dec 2016	8/9
4	Dr. Billy CF CHIU	Honorary Secretary	Dec 2014-Dec 2016	8/9
5	Dr. YUEN Shiu Man	Honorary Treasurer	Dec 2014-Dec 2016	6/9
6	Dr. Ruby SY LEE	Immediate Past President	Dec 2014-Dec 2016	7/9
7	Dr. AU Chi Lap	Member	Dec 2015-Dec 2018	8/9
8	Dr. Alvin CY CHAN	Member	Dec 2013-Dec 2016	8/9
9	Dr. CHAN Hung Chiu	Member	Dec 2015-Dec 2018	8/9
10	Dr. CHAN Kin Ling	Member	Dec 2014-Dec 2017	7/9
11	Dr. CHAN King Hong	Member	Dec 2015-Dec 2018	6/9
12	Dr. Mark SH CHAN	Member	Dec 2015-Dec 2018	8/9
13	Dr. CHAN Wing Yan	Member	Dec 2014-Dec 2017	7/9
14	Dr. Daniel WS CHU	Member	Dec 2014-Dec 2017	8/9
15	Dr. Mary BL KWONG	Member	Dec 2013-Dec 2016	7/9
16	Dr. Tony CK LEE	Member	Dec 2013-Dec 2016	3/9
17	Dr. Lorna V NG	Member	Dec 2014-Dec 2017	5/9
18	Dr. NGAN Po Lun	Member	Dec 2014-Dec 2017	7/9
19	Dr. Gene WW TSOI	Member	Dec 2015-Dec 2018	6/9
20	Dr. Wendy WS TSUI	Member	Dec 2013-Dec 2016	6/9

"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 15th September 2016 to 14th Octomber 2016, Dr. Wendy Tsui and Dr. Yuen Shiu Man 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 the College Secretariat by phone: 2871 8899, by fax: 2866 0616, or by email: <u>hkcfp(dhkcfp.org.</u> hk. Once we receive your call or message, we will get in touch with you directly as soon as we can.

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



PRIMARY CARE DIRECTORY





Membership Committee News

The Council approved, on recommendation of the Chairlady of the Membership Committee, the following applications for membership in **July – August 2016**:

Associate Membership (New	Application)
Dr CHAN Yuen Ching Dr CHEUK Yee Hang Dr CHIU Yuen Man Dr HUI Yuk Ting, Candy Dr LEUNG Lai Man Dr NG Kai Man Dr TSAI Hung Yu Dr WANG Amy Yang Dr WONG Chi Yan Dr WONG Ka Wai Dr WONG Ka Wan Dr WONG Sze Man Dr WONG Yu Man Dr YIP Pui Leung	陳卓趙許梁吳蔡汪黃黃黃汪黃葉婉以婉玉麗啟雄 智家家思于沛晴恆雯婷汶文宇洋恩慧韻敏敏良
Transfer from Affiliate Member Member	to Associate
Dr WONG Yiu Ming	黃 耀 明
Resignation from Associate M	1embership
Dr CHAN Yat Ming, Davy Dr PANG Kit Hing Dr LAM Wing Sze Dr WONG Man Ho	陳 溢 明 彭 結 興 林 羪 思 王 文 灝

Suspension from Affiliate Memb	pership
Ms CHAN Lai Kam Ms SU Ka Yi Mr TAM Chi Yin	陳 麗 琴 邵 嘉 儀 譚 志 賢
Suspension from Associate Men	nbership
Dr CHAN Chuen Ying Dr CHAN Lay Si Dr CHAN Sau Lin Dr CHAU Kin Keung Dr CHING Rosemary Hin Nga Dr LAI Chu Kei, Carlton Dr LAI Tina Pui Yum Dr LAM Wing Yi Dr LAM Wing Yi Dr LAM Yip Cheung Dr LEUNG Kwai Chiu, Lawrence Dr LUI Wai Cheung Dr NG Wai Lan Dr SO Kwong Lung Dr TAM Greta, Chun-Huen Dr WAN Siu Fan, Rebecca Dr WONG Chi Hung Dr WONG Chung Dr WONG Loi Foon Dr YEO Hui Kian, Chris Dr YIK Chun Kit	陳曾陳周程黎黎林林梁呂吳蘇譚尹黃王黃楊易傳麗秀建顯柱佩穎業貴慧慧光俊少志 來輝振英施蓮強雅基鑫怡翔超翔蘭隆荃芬雄頌歡健傑
Suspension from Fellowship	
Dr KWOK Kon Hung, Arnold	郭 冠 雄
Suspension from Full Members	hip
Dr WARDMAN Caroline	黃 明 儀





Diploma in Child Health (Syd)

Unique international course to learn global Best Practices in Paediatrics conducted by the

Sydney Children's Hospitals Network, Australia and the Sydney Medical School of the University of Sydney

DCH (Syd) is a quotable qualification approved by the MCHK

Eligibility:	MBBS
Course start:	February 2017
Duration:	1 year (part time)
Course Fees:	AUD \$4, 950
Applications open:	now
Course Structure:	

✓ 112 Webcasts: one Webcast = recorded webcast (lecture), learning outcomes, notes and self-assessment questions

- ✓ 3 Webcasts per week and on-line delivery
- Weekly face to face Tutorials with local Tutor Pediatricians in Hong Kong
- Monthly Newsletters and articles of interest
- Assessment tasks include Case Reports and Oral and Written examinations conducted in Sydney

Key Features:

- Course has commenced in Hong Kong since 2005
- Also Conducted in 20 countries
- An excellent, comprehensive overview of paediatrics from neonates to adolescents
- Content is evidence based and teaches current best practice in caring for children and young people encompassing all subspecialty areas
- Collaborative In Country Learning: Experienced Hong Kong Paediatricians conduct face to face Tutorials each week to reinforce learning and provide a Hong Kong context to webcasts from Sydney Paediatric experts
- Email access to Webcast Presenters for course content questions
- CME/ CPD points are awarded to HK Participants

Online application forms and information are available at <u>www.magga.org.au</u>

HKCFP 40th Anniversary Celebration



Prize Winner: IK\$1.000

Cash Award

LOGO DESIGN COMPETITION

2017 marks the 40th Anniversary of the Hong Kong College of Family Physicians. A logo competition of the HKCFP 40th Anniversary Celebration is now open to all.

The winning logo will become the proud symbol of our 40th Anniversary Celebration, and will be used in various materials and applications related to the celebration activities thoughtout the HKCFP 40th Anniversary year.

Timeline

Submission deadline: 31st October 2016

> Announcement of result: 4th December 2016 at HKCFP Annual Dinner.

The winner will be contacted by our staff at the conclusion of the competition.

Submission details:

- Entries must be the original work(s) of the entrant.
- Entries must be submitted by electronic format. The image size of the file must not exceed 1280 x 1024 pixels. The image can be saved at a resolution that will enable us to zoom in to see details during judging, but the file size must not exceed 10MB. File formats: .gif, .jpeg, .png, .pdf, preferably in RGB colour mode.
- Each entrant may submit upto a maximum of THREE pieces of design work:
- Each entrant must submit the entries together with a submission form which includes the contact details of the entrant, the declaration of originality and authorisation on copyrights. The submission form is available at www.hkcfp.org.hk.
- · All entries will be acknowledged upon receipt.
- All entries will NOT be returned.
- All entries will become the properties of the Hong Kong College of Family Physicians.
- The copyrights of the winning entry would be transferred to the Hong Kong

Judging Panel:

- To be appointed by the 40th Anniversary Celebration Organising Committee.
- The decision of the 40th Anniversary Celebration Organising Committee is final.

Judging Criteria:

The logo should work

- as a symbol of the 40th Anniversary of HKCFP
- across online and print media, and the various applications, in terms of legibility, size/area, graphic strength, etc.

For submission and enquiry please contact: **Mr. Jeff Cheng** Administrative Executive **The Hong Kong College of Family Physicians** Room 803-4, HKAM Jockey Club Bldg. 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. Tel : +852 2871 8899 Fax : +852 2866 0616 Email : jeffcheng@hkcfp.org.hk





Specialty Board News

2017 Full Exit Examination of Vocational Training in Family Medicine

The Specialty Board is pleased to announce the following information on the 2017 Full Examination of Vocational Training in Family Medicine.

ELIGIBILITY AND REQUIREMENT

Applicants must fulfill the following criteria:

- Full registration with the Hong Kong Medical Council
- b.
- Being active Fellows, Full or Associate Members of the Hong Kong College of Family Physicians (HKCFP) Fulfill the CME / CPD requirements under HKCFP Quality Assurance Program in the preceding year Have a qualification in family medicine / general practice; which is recognized by the HKCFP and the Hong Kong Academy of Medicine (HKAM) Had completed higher training in Family Medicine; **OR expected to do so by February 28, 2017**; as certified/ approved by the Board of Vocational Training and Standards (BVTS), HKCFP. d. e.
- The relevant approval may take up to two months, therefore applicants are recommended to apply early to BVTS for
 - Certification of completion of higher training **OR**
 - Recommendation to sit for Exit Examination 2017
- f. Active in clinical practice and able to meet the following requirements in individual Examination segments:
 - Clinical Audit: the starting date must be within 3 years before the exam application deadline
 - Research: the date of ethics approval must be within 3 years before the exam application deadline
 - Practice Assessment: submit valid Practice Management Package (PMP) reports

Eligibility to enroll in Exit Examination is subject to the final approval of the Specialty Board, HKCFP. Application will be processed only if all the required documents are submitted with the examination application form. DATES

First-attempt candidate:

Deadline of Exit Examination application:	1 November 2016				
Collection period for Attachment 12 and 13 (Practice Assessment)	19 September 2016 to 31 October 2016 Inclusive				
Deadline of Clinical Audit Report / Research Report submission	3 January 2017				
tamination periods for Practice Assessment and Consultation Skills Assessment Period A: 1 December 2016 to 26 Jar Period B: 1 February 2017 to 24 Mar					
Re-attempt candidate:					
Deadline of Exit Examination application: 1 December 2016					

Collection period for Attachment 12 and 13 (Practice Assessment)	20 October 2016 to 30 November 2016 Inclusive
Deadline of Clinical Audit Report / Research Report submission	3 January 2017
Examination periods for Practice Assessment and Consultation Skills Assessment	Period B: 1 February 2017 to 24 March 2017

APPLICATION & EXAMINATION FEES

Application forms are available at the College Secretariat, HKCFP or can be downloaded at the College website: http://www.hkcfp.org.hk/pages_6_88.html Following documents are required when submitting the application:

1. A copy of the certificate of completion of higher training, OR recommendation letter to sit for 2017 Exit Examination, from BVTS, HKCFP A cheque of the appropriate fee made payable to "HKCFP Education Ltd.", and

3. For Practice Assessment Segment:

- FOUR COPIES of the all required attachments (Attachment 1 to 13); and
- PMP Reports on or before 1 November 2016 (First-attempt candidate) / 1 December 2016 (for the re-attempt candidate who has changed ii. the practice location)

Completed Application Form and the required documents should be returned to the following address:

The Specialty Board, HKCFP, Room 803-4, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, HK

Candidates are recommended to submit application early. Late application will not be accepted.

Examination fees				
Administrative fee	\$9040			
Clinical Audit	\$4450			
Research	\$4450			
Practice Assessment	\$7500			
Consultation Skills Assessment	\$7500			

A cheque of the appropriate fee made payable to "HKCFP Education Ltd." should be enclosed with the application. All fees paid are neither refundable nor transferable.

Incomplete and ineligible applications will be rejected. An administration fee of HK\$500 will be charged for these unsuccessful applications.

FORMAT AND CONTENTS

Exit Examination consists of three segments. Candidates are required to take all the three segments at their first attempt of the Examination. Non-compliance is subject to disqualification.

Candidate can choose to attempt either Clinical Audit or Research segment.

- Clinical Audit Report **OR** Research Report 1
- Practice Assessment
- 3. Consultation Skills Assessment

Details of the format and contents of each segment can be found in the Guidelines on 2017 Full Exit Examination which are available at the College website www.hkcfp.org.hk

Should you have any enquiries, please contact our College Secretaries Ms. Alky YU or Ms. Carmen TONG at 2871 8899.

(Bui hendy

Dr. Wendy Tsui Chairlady, Specialty Board





HONG KONG SANATORIUM & HOSPITAL CURRENT OG PRACTICE 2016

DateSunday, 23 October 2016VenueBallroom, JW Marriott Hotel Hong Kong

08:30 - 09:00	Registration	
09:00 - 09:10	Welcome	Dr. CHAN Woon Tong, Joseph
Part I	Chairperson: Prof. YEUNG Shu Biu, William Dr. SO Wai Ki, William	
09:10 - 09:30	Development of IVF in Hong Kong	Prof. HO Pak Chung
09:30 - 09:50	Pre-implantation Genetic Testing	Dr. TANG Oi Shan
09:50 – 10:10	Surgical Management of Subfertility	Dr. Joyce CHAI
10:10 – 10:30	Oocyte Freezing - Putting Motherhood On Hold	Dr. LOK Hung, Ingrid
10:30 – 11:00	Coffee Break	
Part II	Chairperson: Dr. LEUNG Wing Cheong Dr. CHAN Chong Pun, Ben	
11:00 - 11:20	Induction of Labour for Post-date Pregnancies - Earlier or Later?	Dr. LAM Sze Wing, Helena
11:20 – 11:40	Hepatitis B Carriers and Pregnancy: Should We Do More?	Dr. CHEUK Kwan Yiu, Queenie
11:40 - 12:00	The Use of Progesterone for Prevention and Treatment of Threatened or Recurrent Miscarriages	Dr. WAN Hei Lok, Tiffany
12:00 - 12:20	Practice of O&G in the Third World Countries	Dr. LI Kandice
12:20 – 13:30	Lunch	
Part III	Chairperson: Dr. LI Wai Hon Dr. WONG Se Hung, Wilfred	
13:30 – 13:50	New Development in Uterine Fibroid Management	Dr. YUEN Pong Mo
13:50 – 14:10	Female Urinary Incontinence	Dr. LAU Nga Ting, Winnie
14:10 – 14:30	The Role of Laparoscopic Surgery in Gynaecological Cancer	Dr. TAM Kar Fai
14:30 – 15:00	Coffee Break	
Part IV	Chairperson: Prof. LEUNG Tak Yeung Dr. LI Fuk Him, Dominic	
15:00 – 15:20	Abnormal NIPT Results – What's Next?	Dr. LEUNG Tse Ngong, Danny
15:20 – 15:40	Should Umbilical Cord Arterial PH be Routinely Measured in Modern Obstetrics?	Dr. CHAN Wan Pang
15:40 – 16:00	Use of Mifegyne (RU486) in Termination of Pregnancy and Management of Miscarriage	Dr. CHAN Woon Tong, Joseph
	*Content is subject to change without prior notice	



REGISTRATION IS ON A FIRST COME, FIRST SERVED BASIS

Reserve your place at www.hksh-hospital.com/og-registration or by phone: 2835 3426CME Accreditations by Various Colleges (Pending)| CNE Accreditations (Pending)Registration Deadline: Friday, 7 October 2016| For Medical and Health Professionals Only



QA & A Committee News

CME/CPD Compliance

Dear Friends and Colleagues,

This message just acts as a reminder to all our Members and Fellows to obtain adequate points of CME/CPD when there is still about 4 months to the end of the 3 year QA cycle (2014 – 2016).

To ensure you can obtain the CME Certificate every year, do remember that you have to obtain **with 30 CME/CPD** points; and for the QA Certificate every 3 years, it requires **no less than 60 CME points** and **at least 30 CPD points**, in a 3 year cycle. All HKAM Fellows are required to obtain a minimum of 90 points, including **at least 15 CPD points** and **no less than 75 CME points**, in a 3-year cycle.

There are also many enquiries concerning the way to gain CPD points, the following lists the examples of gaining CPD points for members' and fellows' reference:

- Continuous Professional Development (CPD) Logs
 - I. self-appraisal activities on lectures, seminars and workshops organized by the Board of Education
 - II. reading journal article published in the HK Practitioners or the Hong Kong Medical Journal
 - III. Evidence Based Practice (EBP) report with the reference to a journal article published in the HK Practitioners, the HK Medical Journal, or in an indexed or refereed Medical Journal
 - IV. Practice Audit, Review and Appraisal; include Clinical Audit, Evidence-Based Medical Protocol and Preventive Care Audit
 - V. Structured Learning Activities, such as Portfolio For Self Learning Plan
- Activities related to Teaching, Educational Development and Research
 - I. Teaching / Tutoring medical students in family medicine
 - II. Clinical supervisor of vocational trainees in Family Medicine
 - III. Acting as examiner for the Conjoint HKCFP / RACGP Fellowship Examination or HKCFP Exit Examination.
 - IV. Being a CPR instructor of the Assessment Enhancement Course organize by the College
 - V. Being a moderator or speaker
 - VI. Being a chairperson / speaker of the pre-approved small discussion
 - VII. Research work related to the field of General Practice / Family Medicine
 - VIII. Publishing journal articles, books or thesis
- Activities related to Professional Development, such as demonstration of competence in family medicine by completing a course of study and passing the Conjoint HKCFP/RACGP Fellowship Examination, Specialty Board Exit examination, the basic life support(CPR) assessment organized by the College, Diploma examinations organized by the College, passing professional examination (Membership / Fellowship, etc) or academic examination (Diploma / Master Degree, etc) relevant to General Practice/Family Medicine
- Activities related to Quality Development; including participating in a quality assurance activity, exercise, workshop or clinical attachment organized by the College.

All the forms can be downloaded from our website; <u>http://www.hkcfp.org.hk/pages_5_84.html</u>. You may also refer to the "The Regulation for Award of Quality Assurance" at <u>http://www.hkcfp.org.hk/Upload/Documents/QA/</u> <u>Regulations_2014-2016.pdf</u> or contact our QA & A Secretariat (Ms. Carmen Tong or Ms. Natalie Ho) at 2871 8899 or email to <u>cmecpd@hkcfp.com.hk</u> for more detail information.

Thank you.

Dr. King Chan Chairman, Quality Assurance & Accreditation Committee





Board of Vocational Training and Standards News

Basic Training Introductory Seminar

A Basic Training Introductory Seminar will be held in October 2016 for all newly enrolled basic trainees, existing trainees and clinical supervisors. The seminar is designed to help basic trainees and supervisors to understand and get more information of our training programme.

Details of the seminar are as follows:

Speakers : Dr. Chiu Chi Fai Billy	(Chairman, Board of Vocational Training and Standards)
Dr. Wong Man Ying Michelle	(Chairlady, Basic Training Subcommittee)
Date : 18 October 2016 (Tuesday)	
Time : 7:00 p.m.	
Venue : Room 802, 8/F, Duke of Winds	sor Social Service Building, 15 Hennessy Road, Wanchai
Please contact Ms. Carmen Tong or Ms. (Charlotte Cheung at 2871 8899 for any queries.
Higher Training Subcommittee Board of Vocational Training and Standard	ds

Internal Affairs Committee News

Debriefing Meeting with Helpers of the Conferment Ceremony

The 29th Fellowship Conferment Ceremony and the 27th Dr. Sun Yat Sen Oration were successfully held on 5 June 2016.

A debriefing meeting with helpers of the Conferment Ceremony was conducted on 13 June 2016. The Committee would like to take this opportunity to thank all the helpers for their valuable time and effort in making this important College annual event a true success. We would also like to thank Dr. Lo Ling to be our volunteer photographer again this year. The ceremony would not have been run so smoothly without their tremendous support and contribution. Thanks again!



Left (from front to back): Dr. David Chao, Ms. Erica So, Dr. Kathy Tsim and Dr. Kinson Lau Right (from front to back): Ms. Teresa Liu, Dr. Raymond Yeung, Dr. Doris Chan and Dr. Peter Anthony Fok

> Many thanks also to helpers who were unable to join the debriefing: Dr. Edmond Chan, Dr. Ko Wai Kit, Dr. Kwan Yu, Dr. Lo Ling and Dr. Jenny Wang.



HKCFP'S got Talent

WANT to PLAY an instrument or SING a few songs?

Did you enjoy the live performances in our College's previous annual dinner? You can be part of the performance team! The Internal Affairs Committee is now looking for College Members and Fellows to form a HKCFP performance team.

If you have a passion in playing musical instruments or in singing, do come and join us and have fun! All College Members and Fellows are welcome to participate!

SHOW US YOUR

TALENT!

Interested Members & Fellows, please email to hkctp@hkctp.org.hk or call the secretariat, Ms. Teresa Liu, (Tel: 2871 8899) for details before 15 October 2016.



Meeting Highlights

Interest Group in Mental Health

Dr. Lo Sze Mon, Dana, Specialist in Family Medicine, delivered a lecture on "Doctor's Own Mental Health: A Burn Out Doctor (Theatre of Medical Humanities) 醫學人文劇場之疲勞醫生篇" on 6 August 2016.



Dr. Chan Suen Ho, Mark (right, Moderator) presenting the souvenirs to Dr. Lo Sze Mon, Dana (middle, Speaker & Facilitator of the Forum Theatre) and Dr. Eva Au (left, Leading Actress in the Drama) during the lecture on 6 August 2016

Certificate Course on Bringing Better Health to Our Community 2016

The 3rd session of the "Certificate Course on Bringing Better Health to Our Community 2016" co-organized with Queen Elizabeth Hospital was held on 30 July 2016. Dr. Chan Sai Kwing, Consultant (Oral Maxillofacial Surgery & Dental), QEH, delivered a lecture on "Common Oral and Dental Disease Management" and Dr. Lai Siu Wai, Specialist in Family Medicine, Resident Specialist (FM & PHC) QEH, delivered a lecture on "GOPC Patient Education" respectively.



Dr. Kwong Bi Lok, Mary (right, Council Member) presenting a souvenir to Dr. Chan Sai Kwing (left, Speaker) during the lecture on 30 July 2016



Dr. Chan Hung Chiu (right, Council Member) presenting a souvenir to Dr. Lai Siu Wai (left, Speaker) during the lecture on 30 July 2016

The 4th session of the "Certificate Course on Bringing Better Health to Our Community 2016" co-organized with Queen Elizabeth Hospital was held on 20 August 2016. Dr. Li Wai Hon, Consultant (Obstetrics and Gynaecology) QEH, delivered a lecture on "HPV Vaccine and Cervical Cancer Prevention" and Dr. Law Tung Chi, Specialist in Family Medicine, Ass. Consultant (FM& PHC) QEH, delivered a lecture on "GOPC Government Vaccine Programme" and Dr. Ngan Kai Cheong, Roger, Chief of Service (Clinical Oncology), QEH, delivered a lecture on "Cancer Survivor care - Breast and Prostate cancer" respectively.



Dr. Kwong Bi Lok, Mary (right, Council Member) presenting a souvenir to Dr. Law Tung Chi (left, Speaker) during the lecture on 20 August 2016



Dr. Kwong Bi Lok, Mary (right, Council Member) presenting a souvenir to Dr. Li Wai Hon (left, Speaker) during the lecture on 20 August 2016



Dr. Kwong Bi Lok, Mary (right, Council Member) presenting a souvenir to Dr. Ngan Kai Cheong, Roger (left, Speaker) during the lecture on 20 August 2016



象拔蚌

唐太

FOOD CORNER

燒鮑魚]]

Dr. T

等用酒當然無難度

人推介留

夜診完畢心情低落血糖亦低落,
當然極度必須對自己好一點。
這家在第三街的燒烤店屬於香港所剩無幾的隱世小店,門面裝橫非常一般,
而且晚上六時才開店,但晚晚滿座,
皆因價錢公道及好好好好味道!
他們賣的就是平常自己動手的港式燒烤,
但他們無論調味或是火候都控制得極好。
一般的燒魚蛋雞翼當然無難度,
他們的燒海鮮鮮嫩多汁,
食完心情好一百倍!

For more, follow my instagram: drtsofriendly 另外還有炸物, 個人推介炸魷魚酥及 南蠻炸雞



"Submissions of articles to After Hours with up to 500 words are always welcome. Gift vouchers will be given as a token of appreciation if the articles are selected for publication. Email: alkyyu@hkcfp.org.hk"



PENG CHAU - A SMALL ISLAND LIFESTYLE

Dr. NGAN Ka Lai Raymond, Specialist in Family Medicine



Peng Chau is an outlying island locating off the northeastern coast of Lantau Island in Hong Kong. It has an area of 0.99 square kilometres, with around 6,000 residents living in this island. Finger Hill, which measures 95

metres in height, is the highest point on the island. A flight of steps leads up to the top of the hill and its pavilion can have panoramic views over Peng Chau, Lamma Island, Hei Ling Chau, Discovery Bay and Disneyland in Lantau Island, Hong Kong Island, part of the Kowloon Peninsula and even Tsing Ma Bridge.

Nowadays, Peng Chau seems to be a miniature version of its neighbour Cheung



Chau but it is quieter, with a more rural character when compared with Cheung Chau. The main village is in the centre of the island and there are hilly areas with trails to the north and south.

Since there are no motor cars apart from small construction and emergency vehicles, bicycle becomes the main mode of



transportation within the island. Children are extremely happy in Peng Chau as there are broad spaces where

they may run all over the place without any dangerous streets or cars. The lack of traffic also makes the broad spaces popular with the elderly.

It is not uncommon to find the elderly sitting under the



Chinese banyan trees, enjoying the sea breeze and gossip. Besides, Peng Chau retains the traditional festive atmosphere, which is rare in the modern metropolis of Hong Kong. Accessibility to fresh seafood and characteristic temples are the main distinguishing features of this island.



In Peng Chau, there are several Chinese restaurants and numerous small cafe shops in traditional style. Seafood, shrimp toast and pork sandwich are delicious and popular in this island. Besides,

there are banks and supermarkets which provide the basic needs for the residents

living in the island. Other public facilities like library, sports centre





and post office are also available in Peng Chau.



Peng Chau can be accessible by ferries from Central Pier 6 in Hong Kong Island, or by ferries from Mui Wo, Chi Ma Wan and Cheung Chau, or by "kai-to" ferries from Discovery Bay in Lantau Island.



Peng Chau Clinic is the only public clinic, which is composed of General Out-patient Clinic (GOPC) and First Aid Post (FAP), in providing a 24-hour medical care to the community in this island. Just the same as urban district, the GOPC provides primary health care to our population on every weekdays and Saturday morning which is supported by a family physician, nursing and supporting staffs within the clinic. In contrast to the urban clinic, there is a FAP which provides emergency care to the residents of the island after closure of the GOPC service (e.g. weekday night-time, Saturday afternoon and public holidays). The emergency service provided by the FAP is supported by nursing and supporting staffs within the clinic as well as the Accident and Emergency Department

of Pamela Youde Nethersole Eastern Hospital. Since there is only one private clinic which opens two half-days per week and no registered community pharmacy in Peng Chau, most of the residents living in this island are relying on Peng Chau Clinic for medical service.



There is a close collaboration between Peng Chau Clinic with the Government Flying Services (GFS) and Hong Kong Police Force



on patient transport from Peng Chau to hospitals in the

urban district. If patient transport from Peng Chau Clinic to the hospital is required (e.g. patient in emergency condition and need

hospitalization for further management etc.), either helicopter or police



launch can be chosen depending on the clinical condition of the patient. Besides, there is an ambulance depot in Peng Chau with a mini ambulance which provides both



emergency and non-emergency transport for patients within the island.



Compulsion to "catch'em all"?



Figure 1 : The mobile game app "Pokémon GO" creating an instant craze in our community (Picture taken in August 2016 in Yau Ma Tei, during which the virtual pet character "Dragonite" appeared). The photo was a good demonstration that the game had successfully attracted attention of people from all walks of life

With the bloom of internet games since the beginning of this century, the nature of the whole gaming industry had become revolutionised, whilst the newer generation internet games are being very different from the console games / video games that were once the mainstream in the last century. Seeing myself solely as a game player and having put aside my position as a doctor, I can see these differences and the potential impacts they can create to the general public:

1. Increased complexity of the games: The video games in the good old days were stored as game "cartridges", meaning the complexity of the games being bound by the physical storage capacity of these consoles. For example as a kid, I remember the first generation Nintendo game "Mario Brothers", which was launched 30 years ago in 1985, was merely only occupying a few megabytes of space. Along with this preset physical constrain, the game design was generally very simple in terms

of its graphics / gameplay and the number of game "stages". Hence with some "intensive" effort (e.g. with few hours of constant game play), players can "beat the game" (or in the local Chinese terms,「打爆 機」) after exhausting all the stages and puzzles set in the game cartridge.



Figure 2: Example of a typical game cartridge.

On the contrary, the internet games nowadays are very different. With the relatively loose storage constrains (as modern mobile phones / computers are all equipped with large hard drives in terms of multi-gigabytes or even terabytes), game developers

can now enjoy immense freedom for making much more complex games. This advantage markedly increases the complexity & "playability" of the games, hence making them more presentable and exciting. Furthermore, with the ability to offer regular "software/app updates", the setting of stages within these games can now extended endlessly, rendering "game ending" never going to happen again. As a result, game players are easily "decoyed" to constantly repay attention on these games, hence making the game playing experience much more sustainable

2. *Enhanced accessibility :* Shrinking the game platforms from the traditional home-based TV consoles or desktop computers to our mobile phones had made these games much more accessible nowadays. It is not difficult for us to encounter game players in all kinds of public places, such as in public transports, restaurants and streets, etc. and these games can be enjoyed in any time, "24-7-365" (24 hours a day, 7 days a week, 365 days a year) literally. Further adding to the phenomenon, the enhanced game accessibility had led us to come across wider range of players, some of whom being the less likely to appear in the past generation (e.g. female game players, elderly, preschoolers etc.), hinting the games' success are flourishing like never before.



Figure 3: "Young phubbers (低頭族) on the move" - Kids engaging in internet games. (Photo aken in Morse Park, Hong Kong)

What are the factors that makes these games psychologically addictive?

Many of us may start to ask "what makes internet games so addictive"? With further observation, I have noticed these games are "designed to be addictive" in a sense that they are usually just made difficult enough to be truly challenging, while allowing players to achieve small accomplishments that compel them to keep playing. In that respect, the design of video games is similar to the design of gambling in casinos, which





will allow players to have small "wins" that keep them playing. In summary, these are the usual "hooks" that are built into games with the intent of making them psychologically "addictive":

- 1. *The High Score:* The high score is one of the most easily recognisable hooks. Trying to chase and beat the high score (even if the player is trying to beat his own score) can keep a player playing for hours.
- 2. Creating an impulsion to "beating the game": As found in nearly every gaming system, these games create a constant desire to beat the game as a player "levels up," or finds the next hidden clue. Further to the trick nowadays, many of these games also offer game players time-limited "virtual awards", "VIP title", etc. that further psychologically reinforces their gaming habit.
- 3. *Role-Playing*: Role-playing games allow players to do more than just play! They get to actually create the characters in the game and embark on an adventure that's somewhat unique to that character. Consequently, there's an emotional attachment to the character, and the story makes it much harder to stop playing.
- 4. *Discovery* : The exploration or discovery tactic is most often used in role-playing games. One of the most popular online games currently is World of Warcraft, and a good portion of the game is spent exploring imaginary worlds. This thrill of discovery (even of places that don't really exist) can be extremely compelling.
- 5. *Relationships :* Online role-playing games allow people to build relationships with other players. For some youngsters, this online community becomes the place where they're most accepted, which draws them back again and again.

Internet Gaming Disorder (IGD)

As Internet access becomes more widespread, Internet addiction becomes a growing concern. The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) does not currently recognise Internet gaming disorder as an official diagnosis. Instead, proposed criteria have been placed in Section III of the DSM-5; the section that proposed diagnoses for future consideration and further study.

The proposed diagnostic criteria closely resemble the criteria for substance use disorders. The nine proposed criteria for IGD^{1,2} include:

- 1. Preoccupation with Internet games
- 2. Withdrawal symptoms (irritability, sadness, anxiety) when the Internet is not available or taken away
- Tolerance indicated by the need to spend increasing amounts of time playing Internet games
- 4. Unsuccessful attempts to control participation
- 5. Loss of interest in other meaningful activities or recreation, except for Internet games
- 6. Continued use despite knowledge that the excessive use of the Internet use is causing problems
- 7. Lying or other form of deceit regarding the amount of Internet gaming
- 8. Using Internet gaming as a means to escape or relieve negative feelings
- 9. Jeopardized important relationships, job, or limited occupational or educational opportunities due to Internet gaming

Despite the well-defined criteria listed above, literature on different IGD treatment methods are scarce, especially studies assessing the efficacy of different intervention types. To date, no standard clinical treatment protocol exists, and treatment techniques are usually derived from the ones applied to substance use or gambling disorders. For those interested to know more on how to assess and handle patients with suspected IGD in primary care settings, there is a recent article talking about it in Australian Family Physician³, issue January/February 2016 - http://www. racgp.org.au/afp/2016/januaryfebruary/just-one-morelevel-identifying-and-addressing-internet-gamingdisorder-within-primary-care/

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Compiled by Dr. John-Hugh Tam



Interest Group in Evidence Based Medicine (EBM) The Meeting on 9th July 2016

Dr. Lee Wan Tsi Francis (Co-ordinator), Board of Education

Theme : Antibiotic Use and Family Doctors

Speakers : Dr. Hui Lai Chi, Primus and Dr. Ip Sui Wah, Victor

Moderator : Dr. Francis Lee, Board of Education

On 9th July 2016, the EBM Interest Group organized a workshop titled "Antibiotic and You". Dr. Hui Lai Chi Primus and Dr. Ip Sui Wah Victor gave two introductory talks. This was followed by group discussions, led by the speakers and the facilitators Dr. Aster Lau, Dr. Ko Siu Hin, Dr. Chan Fu Leung and Dr. Yip Pui Chuen. Prior to the meeting, the participants were requested to submit a simple log sheet recording their antibiotic prescriptions in the two weeks.

The following is a summary of the presentation and discussion, with some updated information.

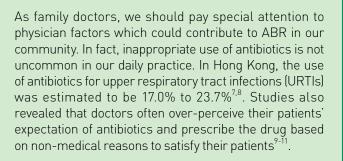
Overview of antibiotic resistance (ABR)

The problem of antimicrobial resistance has become a major public health concern. Today, about 700,000 people die every year from infections due to drug resistant strains¹. Antibiotic is the most commonly used antimicrobial, which serves the purposes of treatment and prophylaxis against bacterial infections. However, continuous emergence of antibiotic resistance (ABR) has undoubtedly threatened the successful treatment of patients with infections². A "postantibiotic era", in which people may be killed by common infections and minor injuries, has become a very real possibility³.

In April 2015, the World Health Organization (WHO) issued updated fact sheets on antimicrobial resistance.⁴ In September 2016, global leaders will meet in the United Nations General Assembly in New York and commit to fighting against antimicrobial resistance together.⁵

Factors contributing to ABR

Multiple factors had contributed to the ABR crisis. Irrational use of antibiotics in agriculture was commonly seen worldwide whereas the public remained unaware of the critical impact of this situation. In hospital and out-patient settings, the compliance to infection control practice was still suboptimal. Patient non-adherence to treatment and the habit of purchasing over-the-counter antibiotics, physicians' over prescription or inappropriate use of the drug may also account for ABR^{1,3,6}.



Tips on antibiotic use in the Community

To enhance safe and appropriate use of antibiotics in out-patient settings, family physicians should provide a careful clinical evaluation (e.g. patient's age, underlying comorbidity, duration and severity of symptoms and physical findings) before deciding on antibiotic use⁶. Education on hygiene, precautions and proper use of antibiotics should be provided to our patients in order to prevent the spread of resistant strains in our community. Explanation to our patients the reasons regarding of not giving antibiotics was also shown to be effective in reduction of antibiotic prescription and increasing patient satisfaction¹². Whenever appropriate, the simplest regimen and shortest duration of treatment should be prescribed¹³.

Recommendations on Prescription of Antibiotics

The recommendations are for reference only. They do not intend to replace or override individual clinical judgment. The recommended dosages are for adults.

Upper Respiratory Tract Infection (URTI)¹⁴: Most are caused by virus in which antibiotics are not useful.

Acute Pharyngitis / Tonsillitis¹⁵⁻¹⁷: Commonly caused by virus. Antibiotics are used for confirmed Group A β -haemolytic Streptococcus infection or based on Centor criteria. Penicillin V 500mg QID PO for 10 days is recommended with low antibiotic resistance.

Acute Otitis Media (AOM)¹⁸⁻²⁰: Can be caused by virus or bacteria, therefore, antibiotics are not routinely indicated. 80% of AOM cases resolve in 3 days without any antibiotic treatment. The first-line agent Amoxicillin 500mg tds PO for 5-7 days. Second line is Augmentin 1g BD PO for 5-7 days.

Acute Sinusitis²⁰⁻²³: Can be caused by virus or bacteria. Antibiotics are reserved for moderately severe to severe cases. Augmentin 1g BD PO for 5-7 days (can be extended to 10-14 days) can be prescribed.



COPD Exacerbation²⁴: Antibiotics are beneficial in patients with increase sputum purulence, increase sputum volume and increased dyspnoea. Augmentin 1g BD PO for 7 days is suggested for mild cases. Augmentin 1.2g Q8H IV for 7 days is suggested for severe cases. For patients with penicillin allergy or at risk for P. aeruginosa infection, Levofloxacin 750mg daily PO for 7 days is suggested.

Urinary Tract Infection (UTI)^{6,25,26}: For uncomplicated UTI in adult female, first line is nitrofurantoin 50-100mg QID PO for 3-7 days. Augmentin 375mg tds PO for 7 days is second line or for pregnant women. UTI in adult male should be regarded as complicated UTI. Urine culture and sensitivity test should be done for choice of antibiotics.

Gastroenteritis (GE)²⁷: For mild cases, fluid and electrolytes replacement are the main-stay of treatment. For moderate to severe cases, Ciprofloxacin 500mg BD PO for 3-5 days can be prescribed. If there is no improvement or Campylobacter is confirmed, one can change to azithromycin 500mg daily PO for 3 days. If recent antibiotic therapy is given and C. difficile toxin colitis is suspected, metronidazole 400mg tds PO for 10-14 days can be added.

All the participating doctors of the workshop had filled in a log sheet for all the infectious diseases they encountered 2 weeks before the workshop. The most common disease is URTI and most doctors would not prescribe antibiotics. The overall prescription rate of antibiotics for the infectious disease is <10%. Most of the choices and duration of antibiotics were appropriate. The doctors seldom did culture except for UTI.

Group Discussion

During the discussion session, participants expressed various views on the problems and difficulties in prescribing antibiotics. While proof of infection often cannot be ascertained (e.g. by bacterial culture), good clinical judgment is important and definite features of infection need to be looked for. Knowledge and evidence on sensitivity and resistance of different bacteria to different antibiotics need to be updated. A group of doctors indicated that their commonly used references are MIMS/ uptodate / emedicine.

It is noted that doctor patient relationship would affect the decision to prescribe antibiotics. Some patients may have misguided knowledge and expectation on antibiotics. Unfamiliar clinical encounters and time constraint to give clearer explanation may lead to overprescription. As doctor shopping is common in this community, doctors may feel the pressure to prescribe antibiotic more often than is indicated. Whether antibiotic is given or not, clear documentation of the rationale behind may safeguard doctor colleagues in

case of dispute. However, doctors need not be over defensive or cautious if judicious care and judgment are exercised.

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Interest Group in Mental Health & Psychiatry in Primary Care The 50th Meeting on 6th Aug 2016

Dr. Chan Suen Ho Mark (Co-ordinator), Board of Education

The 50th Interest Group in Mental Health & Psychiatry in Primary Care Meeting was held on 6th Aug 2016. Dr. Dana Lo, Family Physician, is the speaker.

Meeting Theme: Doctor's Own Mental Health: A Burn Out Doctor (Theatre of Medical Humanities) 醫學人文劇場之疲勞醫生篇

Attendance

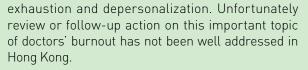
The speaker

: 38 : Dr. Dana Lo is Senior Medical Officer at the University Health Service of the Hong Kong Polytechnic University. Dr. Lo is an active colleague in many areas, including research in campus health, examiner for the College examinations and regular contributor of Public Education in Mass Media, including newspaper and the Radio and Television Hong Kong award winning series My Family Doctor I and II. Her interest is campus health, teaching, counselling and promotion of consultation skill through interactive techniques.

Learning points, prepared by Dr. Dana Lo

It is my pleasure to be invited as the speaker of the mental health interest group again since my sharing on the practical experience of narrative therapy in the 44th meeting in 2015. There are 2 new elements in this 50th meeting: a) the mode of presentation and b) the topic.

- a) Instead of using the traditional one-way lecturing mode, the interactive concept of 'Forum Theatre' 「論壇劇場」 has been introduced into the medical field, whereby audience come across continuous interfaces of forum and drama scenes. The drama was frozen at several controversial moments and people on-the-spot were invited to discuss and even role-played as one of the actors to create an impromptu ending of the drama.
- b) According to a cross-sectional survey conducted in 2012, a high proportion of respondents (31.4%) of public doctors in Hong Kong endured high burn out symptoms. Feeling that their own work was not valued by others was among one of the most significant stressors associated with high emotional



The aim of this meeting is not to "teach" or to provide a "model answer" to the audience on how to solve the problem of burnout, but to open up the possibilities of potential way out for doctors to deal with burn out moments with an open-end approach, with active discussion from more than 30 enthusiastic participants coming from both private and public sectors. As I mentioned in my concluding remarks, this 2-hour discussion is only a kick-off start to initiate the follow up reflections and actions to our daily practice. I would like to express my deepest appreciation to Dr. Eva Au, who accepted my invitation to be the leading actress as the burnout doctor in the drama. Her high level of commitment and advanced skill in acting this role has touched many of the participants. I am also very grateful to Dr. Andy Cheung, Dr. Luke Tsang, Dr. Dorothy To and Dr. Aster Lau who stayed behind after the Forum Theatre to share their own invaluable experience, and further brain stormed on potential follow up actions to address the issue of burnout in Hong Kong.

After thoughts: (Coordinator: Dr. Mark Chan)

The Interest group has met 49 times. As the coordinator, I have thought of what topic to mark the $50^{\rm th}$ occasion.

I have been thinking about the roles of continuous education.

There are many aspects of professional interest, and many have been looked after nicely by the individual cluster or DH programs.

There are areas that the College as academic institution could foster and provide an otherwise not available platform to nurture our Members and Fellows across the boundary of different work places, public or private.

In Family Medicine, we are proud of being a patient centred discipline, and Mcwhinney has emphasized much on this unique characteristic, the element of doctor's own reflective growth.

Medical Humanities are the summation of feeling, interactions, struggles, expressions and thoughts of doctor who has strong affection for fellow humans in his lifelong commitment. The Board of Education is going to set up a new interest group, the Interest Group in





Medical Humanities. In the pilot meeting today, we have a burnt out doctor (played and scripted by the talented Dr. Eva Au) as the centre theme, who could be any of our colleagues or ourselves, with strong drive to serve, facing drawbacks, discouraging patient encounters and self-value challenges. These rich elements were brought up by this Forum Theatre, where actors, audiences and facilitator through interaction in this novice attempt, rightly illustrate the topic. I saw all those attended paid exceptional concentration during the session, and not even one has left early. I enjoyed the quality of the end of session discussion, Drs. Luke Tsang, Andy Cheung, Asther Lau, Dana Lo, Eva Au and Dorothy To, added up with hundred years of experience in family medicine, shared encouraging comments and suggestion for possibilities. I am convinced this platform will serve our colleagues right in the years to come.

Next meeting:

As 1st of October will be National Day, the next meeting will be on Saturday, 3rd December 2016. Due to limited availability of meeting time and venue, the meeting will be a co-meeting with the new Interest Group in Medical Humanities where outline of the historic and current development in Medical Humanities will be shared.

All members of the College are welcome and encouraged to present their cases and problems for discussions or role play. (Please do so 2 weeks beforehand for speakers to review, contact our secretary, at 2871 8899.) Again, those who are experienced can share, less experienced can benefit from participation. Our goal is to enhance our practical skills, promote early awareness and better management of mental health problems in our community.



What can we do when we notice a colleague suffering from burnout? (Left: Dr. Mark Chan, actor of the passing by colleague; Right: Dr. Eva Au, actress of the burnout doctor)



Dr. Wong Ming Shun was creating an impromptu ending to the medical consultation in scene 1.



Dr. Fung Kin Chor attempt to create another impromptu ending to the medical consultation in scene 1.



Dr. Aster Lau provided supportive counseling to her colleague suffering from burnout on-site at scene 3.





Certific	ate Cou	rse on Bringing Better Health	n to Our Community 2016	
	Co-organized	d by Queen Elizabeth Hospital and Hong Kong	College of Family Physicians	
Dates:28 May, 18 June, 30 July, 20 August, 24 September 2016 (Saturdays)Time:1:00pm - 2:00 pm Registration 2:00pm - 4:00 pm Lecture & DiscussionVenue:Lecture Theatre, G/F, Block M, Queen Elizabeth HospitalCourse Fee:FreeAccreditation:HKCFP 2CME Points for each session (Cat4.4) (pending) MCHK: 2CME Points for each session (pending)Capacity:100 doctors				
Programme S	chedule			
Dates	Time	Topics	Speakers	
28 May 2016	2.00 (.00pm	Common Upper & Lower Limb Joint Pain and Tendonitis	Dr. Wong Yau Bun Associate Consultant, Department of Orthopaedics and Traumatology, Queen Elizabeth Hospital	
(Sat)	2:00 – 4:00pm	Practical Tips on Home Exercise for Tendonitis	Mr. Wong Chi Leung Alex/ Ms. Luk Lai Mei May Senior Physiotherapist/ Physiotherapist I, Department of Physiotherapy, Queen Elizabeth Hospital	
	2:00 – 4:00pm	Update on Smoking Cessation (Medication and Brief Counselling)	Dr. Mok Yun Wing, Thomas Chief of Service, Department of Respiratory Medicine, Kowloon Hospital	
18 June 2016 (Sat)		New Service Module on GOPC Smoking Cessation Service	Dr. Leung To Fung Associate Consultant, Department of Family Medicine & General Outpatient Clinic, Queen Elizabeth Hospital	
		Obstructive Pulmonary disease (COPD & Asthma)	Dr. Ng Chun Kong Specialist in Respiratory Medicine, Consultant, Department of Medicine, Queen Elizabeth Hospital	
	2:00 – 4:00pm	Common Oral and Dental Disease Management	Dr. Chan Sai Kwing Consultant, Department of Oral-Maxillofacial Surgery & Dental, Queen Elizabeth Hospital	
30 July 2016 (Sat)		GOPC Patient Education	Dr. Lai Siu Wai Resident Specialist, Department of Family Medicine & General Outpatient Clinic, Queen Elizabeth Hospital	
		Fall prevention & Osteoporosis in Community Setting	Dr. Mak Ying Fai Specialist in Geriatric Medicine, Consultant, Department of Medicine, Queen Elizabeth Hospital	
	2:00 - 4:00pm		HPV vaccine and Cervical Cancer prevention	Dr. Lee Wai Hon Consultant, Department of Obstetrics & Gynaecology, Queen Elizabeth Hospital
20 August 2016 (Sat)		GOPC Government Vaccine Programme	Dr. Law Tung Chi Associate Consultant, Department of Family Medicine & General Outpatient Clinic, Queen Elizabeth Hospital	
		Cancer Survivor care- Breast and Prostate cancer	Dr. Ngan Kai Cheong, Roger Chief of Service, Department of Clinical Oncology, Queen Elizabeth Hospital	
	⁰¹⁶ 2:00 – 4:00pm	Private-Public Partnership-Hypertension	Representative from Department of Family Medicine & General Outpatient Clinic <i>Queen Elizabeth Hospital</i>	
24 September 2016 (Sat)		Update on Management of HT and Stable Coronary Artery Disease	Dr. Chan Kam Tim Specialist in Cardiologist, Consultant, Department of Medicine, Queen Elizabeth Hospital	
		Common Skin Complaints – Prevention and Management (Ultra-Violet & Pigment)	Dr. Chan Hau Ngai, Kingsley Specialist in Dermatology, Private Practice	

*** Registration will be first come first served. For enquiry, please call the College secretariat, Ms. Cherry Chan at 2871 8899 ***

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REPLY SLIP

To: HKCFP, Room 803-4, HKAM Jockey Club Building, 99 Wong Chuk Hang Building, Aberdeen, Hong Kong (Fax: 2866 0616) I am a ***Member / Non-member** of The Hong Kong College of family Physicians. **(*Please delete as appropriate)**

I would like to attend	d the Certificate Cours	e at the following dates	(s) (Please 🗹 as appropria	ateJ	
🗆 28 May 2016	🗆 18 June 2016	□ 30 July 2016	🗆 20 August 2016	🗆 24 September 2016	
Name	:		Tel:	Fax:	

Date:

_____Email: _____

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Activities are supported by HKCFP Foundation Fund.

- 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 hotel for the Scientific Meeting.

Board of Education Interest Group in Neuro-musculoskeletal

Private video recording is not allowed. Members, who wish to review the lecture, please contact our Secretariat.

8 October 2016 _____

Saturday 15 October 2016

Saturday

Tobacco Dependence – Exploring Methods for Smoking Cessation and Reviewing Smoking Cessation Approaches for Patients with Mental Illness

Dr. Cheung Wai Him Specialist in Psychiatry

		/	, ,
Chairman	Dr. Au-Yeung Shiu Hing		
	The Hong Kong College of Family Physicians		
Time	1:00 p.m. – 2:00 p.m. 2:00 p.m. – 3:30 p.m.		
Venue	5/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong		
Admission Fee	College Fellow, Full or Associate Members		Free
	Other Categories of Members Non-Members		HK\$ 350.00 HK\$ 450.00
	All fees received are non-refundable and non-transferable.		
Accreditation	a 2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK		
Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Lo			
Language	Lecture will be conducted in English.		
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.		

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

Sponsored by *Pfizer Corporation Hong Kong Ltd.*

20 October 2016

1. Real Faces of Meningococcal

1. Prof. Lulu C. BRAVO

Thursday

Professor of Pediatric Infectious and Tropical Diseases, University of the Philippines Manila, Philippines

2. Dengue & Japanese Encephalitis (JE) Overview in Asian Countries

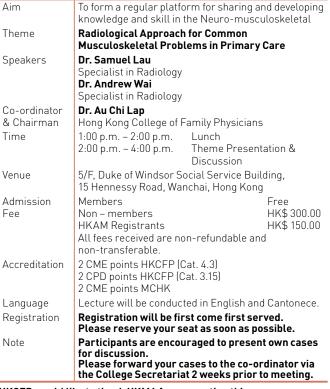
2. Prof. CHEN Po-Yen

Director, Section of Infectious Disease, Department of Pediatrics, Taichung Veterans General Hospital, Taiwan

		Taiwan
Chairman	Dr. Tsui Hing Sing, Robert The Hong Kong College of Family F	hysicians
Time	1:00 p.m. – 2:00 p.m. Registra 2:00 p.m. – 3:30 p.m. Lecture	
Venue	Pearl Ballroom, 2/F, Eaton Hotel, 3 Kowloon	880 Nathan Road,
Admission Fee	College Fellow, Full or Associate Members	Free
	Other Categories of Members Non-Members	HK\$ 350.00 HK\$ 450.00
	All fees received are non-refundab non-transferable.	le and
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK	
	Up to 2 CPD points (Subject to subr satisfactory report of Professional	
Language	Lecture will be conducted in Englis	sh.
Registration	Registration will be first come firs Please reserve your seat as soon	

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12 October 2016

Cognition in Major Depressive Disorder: A Systemically Important Functional Index (SIFI)

Prof. Roger McIntyre

Wednesday

Professor of Psychiatry and Pharmacology, University of Toronto, Canada

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Chairman	Dr. Chan King Hong The Hong Kong College	of Family Physi	cians
Time	1:00 p.m. – 2:00 p.m. 2:00 p.m. – 3:30 p.m.	Registration Lecture and	
Venue	Regency Ballroom, Lobb Hyatt Regency Hong Kor Tsim Sha Tsui, Kowloon,	ng, 18 Hanoi Ro	ad,
Admission	College Fellow, Full or Associate Members		Free
Fee	Other Categories of Men Non-Members All fees received are nor non-transferable.		HK\$ 350.00 HK\$ 450.00 d
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)		
Language	Lecture will be conducte	ed in English.	
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.		
		Lundbe	Sponsored by ck HK Limited



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.

September's session:

September 5	
Date	30 September 2016 (Friday)
Time	2:30 p.m 3:30 p.m.
Торіс	"Practical Approach to LUTS/ BPH" – Dr. Chu Sai Man
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)
Language	Lecture will be conducted in English.

October's session:		
Date	ate 28 October 2016 (Friday)	
Time	2:30 p.m 3:30 p.m.	
Торіс	vic "Clinical Approach to Alopecia" - Dr. Lee Tze Yuen	
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)	
Language	Lecture will be conducted in Cantonese.	

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
15 October 2016 1:30 – 3:45 p.m.	Lecture Theatre, G/F, Block K, UCH, 130 Hip Wo Street, Kwun Tong, Kowloon	Update on Dizziness and Vertigo Dr. Wendy WAN Man Yee (AC, ENT, UCH)	Ms. Polly Tai Tel: 3949 3430 or Ms. Cordy Wong Tel: 3949 3087

Structured Education Programmes

Free to members

HKCFP 2 CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
5 October 16 (We	ed)		
2:00 – 5:00 p.m.	Room 7, 8/F, Yau Ma Tei GOPC	Adult emergency in general practice (BCLS, ACLS, E-trolley, out-reach medical bag) with case presentation Dr. Lee Wing Lam & Dr. Mak Ho Yan, Queenie	Ms. Mandy Leun Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Clinical Approach to Numbness, including Common Neuropathy or Entrapment Syndrome Dr. Yung Hiu Ting	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Management of sleeping disorders Dr. Wong Hong Kiu, Queenie & Dr. Wong Yu Man, Tracy	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-purpose room, Southern District RAMP Clinic, G/F, Block B, Aberdeen GOPC	Disability Allowance granting workshop (for all to attend) Dr. W F Wan	Ms. Cammy Chor Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	STD management Dr. Poon Wing Kwan, Sharon	Ms. Crystal Law Tel: 2632 3480
6 October 16 (Th	u)		·
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Clinical Approach to the Patient's Complaint of Dizziness/ Vertigo Dr. Tsui Sau In & Dr. Tang Hoi Yan	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Video Review: Consultation Skills with LAP Dr. Cheng Long Yee, Eva	Ms. Kwong Tel: 2595 6941





2:00 – 5:00 p.m.	Room 7, 8/F, Yau Ma Tei GOPC	 Introduction of RAMP_HT service to hypertensive patients Introduction of Smoking Counselling and Cessation Program Dr. Law Tung Chi, Dr. Leung To Fung, Ms. Cheang Iao Nga & Ms. Lai Fung Sim, Phoebe 	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Using Family Medicine Approach on Medically Unexplained Symptoms Dr. Pang Kwan	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Conference Room, G/F, Block K, United Christian Hospital	Functional food & dietary supplements Dr. Yeung Ka Yu, Doogie & Dr. Hui Yuk Ting, Candy	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Handling complaint cases in consultations Dr. Leon Ngai	Ms. Cammy Chov Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Angina and choices of investigation Dr. Barry Yan	Ms. Crystal Law Tel: 2632 3480

13 October 16 (Thu)

4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Appropriate Anticipatory Care during Daily Consultations Dr. Chung Ka Chun & Dr. Hsu Kwok Fai	Ms. Eliza Chan Tel: 2468 6813
	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Travel Medicine - infectious disease Dr. Wong Ka Yan	Ms. Kwong Tel: 2595 6941

19 October 16 (Wed)

2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M,	QA, CME, CPD, Postgraduate study in FM & General Practice	Ms. Mandy Leung
	Queen Elizabeth Hospital	Dr. Xu Shaowei & Dr. Ying Gard Ching, Derek	Tel: 3506 8613
2:15 – 4:45p.m.	AB1034, 1/F, Main Block, Tuen Mun	Motivational Interview for Chronic Illness	Ms. Eliza Chan
	Hospital	Dr. Wong Man Kin	Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Update of management of Chronic hepatitis B & C & HCC surveillance Dr. Yau Chi Yan, Davy & Dr. Pun Yat Hei	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-function Room, NAHC clinic,	Updates on osteoporosis management	Ms. Cammy Chow
	G/F, Tsan Yuk Hospital	Dr. YC Woo	Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Government subsidize screening program in HK (CA colon, pap's smear, mammogram, elderly health) Dr. Leung Yuen Yee, Yuki	Ms. Crystal Law Tel: 2632 3480

20 October 16 (Thu)

4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre,	IMHP Case Sharing by GOYO Clinic	Ms. Eliza Chan
	Tuen Mun Hospital	Dr. Chu Tsun Kit	Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde	Sharing on Work Injury Assessment by Labour Department	Ms. Kwong
	Nethersole Eastern Hospital	Dr. Tsui Pun Nang & Dr. Leung Wing Mun, Wanmie	Tel: 2595 6941

26 October 16 (Wed)

2:00 – 5:00 p.m.	Room 7, 8/F, Yau Ma Tei GOPC	Practice Management Dr. Lau Ka Man & Dr. Lee Wing Lam	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun	Motivational Interview for Chronic Illness - Practical Session	Ms. Eliza Chan
	Hospital	Dr. Wong Man Kin	Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F,	Emergency infectious diseases	Ms. Polly Tai
	Block S, United Christian Hospital	Dr. Wong Sze Man & Dr. Lee Shek Hang, Henry	Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-purpose room, Southern District RAMP Clinic, G/F, Block B, Aberdeen GOPC	Management of patients with anxiety disorders in family medicine Dr. Dora Chiu	Ms. Cammy Chow Tel: 2589 2339

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	4:00 – 6:00 p.m.	Rm 614, 6/F, Ambulatory Care Centre, Tuen Mun Hospital	Clinical Approach: Assessment of Fitness for Driving in Primary Care Clinic Dr. Lam Siu Ping & Dr. Kwok Vincci	Ms. Eliza Chan Tel: 2468 6813
	5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Common Office Procedures Dr. Chiu Yuen Man	Ms. Kwong Tel: 2595 6941





Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
18 Səp	19	20 <i>9:00 p.m.</i> Board of Conjoint Examination Meeting	21 <i>2:15 – 7:30 p.m.</i> Structured Education Programme	22 2:15 - 7:00 p.m. Structured Education Programme 8:30 p.m. HKCFP Council Meeting	23 <i>1:00 - 3:30 p.m.</i> CME Lecture	24 2:00 - 4:00 p.m. Certificate Course on Bringing Better Health to Our Community 2016 2:30 - 6:00 p.m. AEC Mock Exam 2:30 - 5:30 p.m. DFM Module V Women's Health Workshop
25	26	27	28 2:15 – 7:30 p.m. Structured Education Programme	29 2:15 – 7:00 p.m. Structured Education Programme	30 <i>2:30 – 3:30 p.m.</i> Video Session	1 Ost
2 <i>2:00 - 5:00 p.m.</i> OSCE Rehearsal	3	4	5 <i>2:15 – 7:30 p.m.</i> Structured Education Programme	6 <i>2:15 – 7:00 p.m.</i> Structured Education Programme	7 <i>8:00 p.m.</i> Specialty Board News	8 <i>1:00 – 4:00 p.m.</i> Interest Group in MSK
9	10	11	12 <i>1:00 – 3:30 p.m.</i> CME Lecture <i>2:15 – 7:30 p.m.</i> Structured Education Programme	13 <i>2:15 – 7:00 p.m.</i> Structured Education Programme	14	15 <i>1:00 – 3:30 p.m.</i> CME Lecture
16	17	18 <i>7:00 p.m.</i> Basic Training Introductory Seminar	19 <i>2:15 – 7:30 p.m.</i> Structured Education Programme	20 1:00 – 3:30 p.m. CME Lecture 2:15 – 7:00 p.m. Structured Education Programme 8:30 p.m. HKCFP Council Meeting	21	22 2:30 – 5:30 p.m. DFM Module V Orthopaedic Injection Workshop 5:30 – 7:15 p.m. DFM Module II Introduction Session
23	24	25	26 <i>2:15 – 7:30 p.m.</i> Structured Education Programme	27 2:15 – 7:00 p.m. Structured Education Programme 8:30 p.m. HKCFP Council Meeting	28 <i>2:30 – 3:30 p.m.</i> Video Session	29
30 OSCE Exam	31	1 Nov	2	3	4	5

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