



THE HONG KONG
COLLEGE OF
FAMILY PHYSICIANS

FP Links

Issue 152
October 2016

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Message from the President



I am sure you are sick of me talking about policies, advices to Government on Primary Care and Medical Council Amendment Bill. Let's talk about an action packed month.

Last month the Academy arranged a special dinner for the young fellows and each College can invite two superstars. I always pick the best candidate from the Conjoint Examination and the best candidate from the Exit Examination. This year I welcomed Dr. Kwan Sin Man and Dr. Lai Sum Yin to accompany me at this wonderful evening. Prof. Rosie Young and Dr. Donald Li set the evening in motion. There was a lucky draw for the young fellows and three of them had to deliver a speech to an audience of five tables. The lucky three all had the symptoms of hand tremors, dysphagia and dysarthria and they recovered in time to enjoy the Norwegian Salmon with spring onion or lemon sauce. The 30th Conjoint Examination is just round the corner and I wish all the candidates to pass the examination with flying colours. Remember a free meal is waiting for the hard working one!

Dr. Stephen Foo and Dr. Chan Hung Chiu had represented the College to attend the RACGP conferment in Perth. They had a good exchange with international guests from Fiji, Malaysia, New Zealand and Sri Lanka. RACGP will commence the new accreditation process next year. Both Stephen and HC are at the forefront of this whole process and our preparation has been meticulous. I sorely missed the GP16, the RACGP Conference for General Practice which was incredibly well organized. I also missed the visit to Perth Mint, one of my main numismatic mints.

Dr. Donald Li had organized a lunch meeting for us with Ms Shalini Mahtani of The Zubin Foundation, the founder of HospitalAdvisor. It is an independent online platform for patients. Its aim is to give patients information about

quality of care in Hong Kong's hospitals so that patients can make informed decisions about their hospital choice. HospitalAdvisor covers all hospitals in Hong Kong, both public and private.

It rates quality of care in hospitals using patient experiences to answer a short survey of questions. This survey of questions and its unique methodology, developed by The Zubin Foundation together with the Harvard Global Health Institute and School of Public Health, The University of Hong Kong, rates and ranks hospitals based on a Quality of Care Index. This is a completely new experience for us. If you are interested, do look up <https://hospitaladvisor.org.hk>

On 2nd October 2016, "The International NO Alcohol Day", Prof. Frances Wong Kam Yuet of Hong Kong Academy of Nursing, Dr. Mak Sin Ping of Hong Kong College of Community Medicine and I had a briefing with the media. The man behind the scene was Prof. Martin Wong and luckily he was not drunk on the day but was shy from the media cameras.

The survey conducted by Prof. Frances Wong at Hong Kong Polytechnic University revealed that 38% of Form Three students had drinking experience and on average respondents started drinking at 10.9 years old. Students with friends that drank were almost 33 times more likely to consume alcohol than those without the peer influence.

We called for the government to bolster regulation to ensure alcohol is not sold to people aged below 18. I was glad to hear Dr. Ko Wing-man, the Secretary for Food and Health Bureau had come out the same evening mentioning the government was investigating ways to regulate the sale of alcohol to youngsters in retail sites without liquor licences.



“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 October 2016 to 14th November 2016, Dr. Mark Chan and Dr. David Chao 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: hkcfp@hkcfp.org.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



DR. MARK CHAN



DR. DAVID CHAO

Classified Advertisement

Accredited Private FM Centre invites full time / part time Doctors for expanding services (Tuen Mun / Kwai Fong). FM Trainee, Paediatricians welcomed. Basic + Profit Sharing ± Partnership. Send CV enquiry@adecmed.com (Amy CHAN) 9212-6654.

Membership Committee News

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

Associate Membership (New Application)

Dr LO Wei	盧偉
Dr LO Yuen Man	勞婉文
Dr SHEN Yu Wei	沈瑜璋
Dr SIU Wing Yee	蕭穎怡
Dr WEN Yongna	溫詠娜
Dr WONG Ka Yan	黃嘉恩
Dr WONG Man Ho	黃文浩
Dr WONG Wing Ning, Rosanna	黃泳寧
Dr ZHAO Haifeng	趙海峰

家長照顧嬰兒經常會遇到各種疑難，衛生署製作了嬰兒護理影片，方便家長隨時隨地收看有關育兒的資訊。

若各位醫生對此有興趣，歡迎聯絡37960855（鄧小姐）索取有關的單張。



視像資訊

影片內容：

洗白白

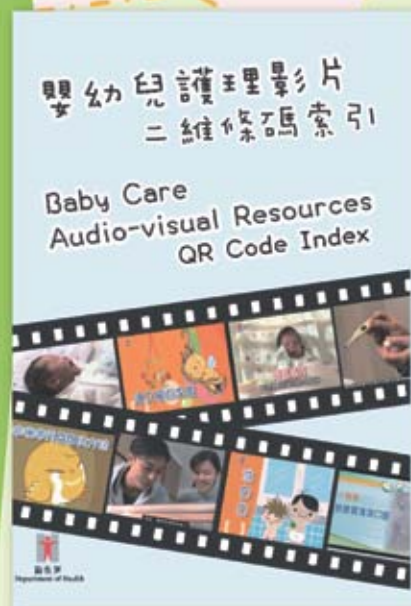
如何清潔眼睛

電子探熱針的使用步驟

常見嬰兒皮膚問題

家居安全

G6PD缺乏症



衛生署



家庭健康服務
Family Health Service



Board of Conjoint Examination News

The Board of Conjoint Examination is pleased to announce that the following candidates passed the 30th Conjoint HKCFP/RACGP Fellowship Examination (Written Segment) 2016.

Dr. Chan Lam	Dr. Wong Ching Keung
Dr. Chang Wells	Dr. Wong Hang Fai
Dr. Choi Man Kei	Dr. Xu Shao Wei
Dr. Chui Winnie Wan Ying	Dr. Yau King Sun
Dr. Lee Shek Hang	Dr. Yeung Ka Yu Doogie
Dr. Leung Hung Cho	Dr. Yip Hoi Man
Dr. Li Shun Hoi	Dr. Yuen Ching Yan
Dr. Poon Wing Kwan	Dr. Chau Ka Vai
Dr. Tsang Pui Lim	Dr. Cho Tze Yan
Dr. Tsui Sau In	Dr. Yen Pang Fei

Congratulations to you all!



Dr. Chan Hung Chiu
Chairman
Board of Conjoint Examination

UNIVERSITY HEALTH SERVICE Medical Officer

The University Health Service (UHS) of The Hong Kong Polytechnic University is a community-based Family Medicine training centre, as accredited by The Hong Kong College of Family Physicians. UHS provides primary care to students, staff members and their dependants and other eligible users. The University invites applications for the Medical Officer post in UHS. Duties: provide primary health care, health counselling, promote health education and perform administrative duties. Qualifications: registrable with The Medical Council of Hong Kong and fluency in spoken English and Cantonese. A higher qualification in Internal Medicine and / or Family Medicine is an advantage. Doctors enrolled in vocational training in Family Medicine are also welcome. Please visit <http://www.polyu.edu.hk/uhs/en> for more information about UHS. Post specification and application form are available from the Human Resources Office (Homepage: <http://www.polyu.edu.hk/hro/job.htm>, Email: hrstaff@polyu.edu.hk, Fax: 2764 3374). Application closing date: 11 November 2016.

39th HKCFP Annual General Meeting

The 39th Annual General Meeting (AGM) of the Hong Kong College of Family Physicians will be held on 4 December 2016, Sunday with the following details.

Time : 17:00
Venue : FYSK Meeting Room 2, 2/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen
Admission : Members only

39th HKCFP Annual Dinner

The College 39th Annual Dinner will be held on 4 December 2016, Sunday

Venue : Run Run Shaw Hall, 1/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Hong Kong
Time : 19:00 Annual Dinner Reception
19:30 Chinese-style Dinner

College Members, Fellows and their spouses are welcome to register for the Annual Dinner free of charge on a first-come-first-serve basis until all the available seats are filled.

Complimentary transportation between Admiralty MTR station and HKAM Jockey Club Building would be arranged and reserved on a first-come-first-serve basis. Details would be announced in due course.

To register for the **Annual General Meeting** and / or **Annual Dinner** and / or **complimentary transportation**, please contact Ms. Teresa Liu or Ms. Windy Lau on Tel: 2871 8899, or email to teresaliu@hkcfp.org.hk or windylau@hkcfp.org.hk for registration.



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
- 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 Programme 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.

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
- 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
Examination periods for Practice Assessment and Consultation Skills Assessment	Period A: 1 December 2016 to 26 January 2017 Period B: 1 February 2017 to 24 March 2017

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:

- 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
- 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 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
- Practice Assessment
- 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.

Wendy Tsui

Dr. Wendy Tsui
Chairlady, Specialty Board

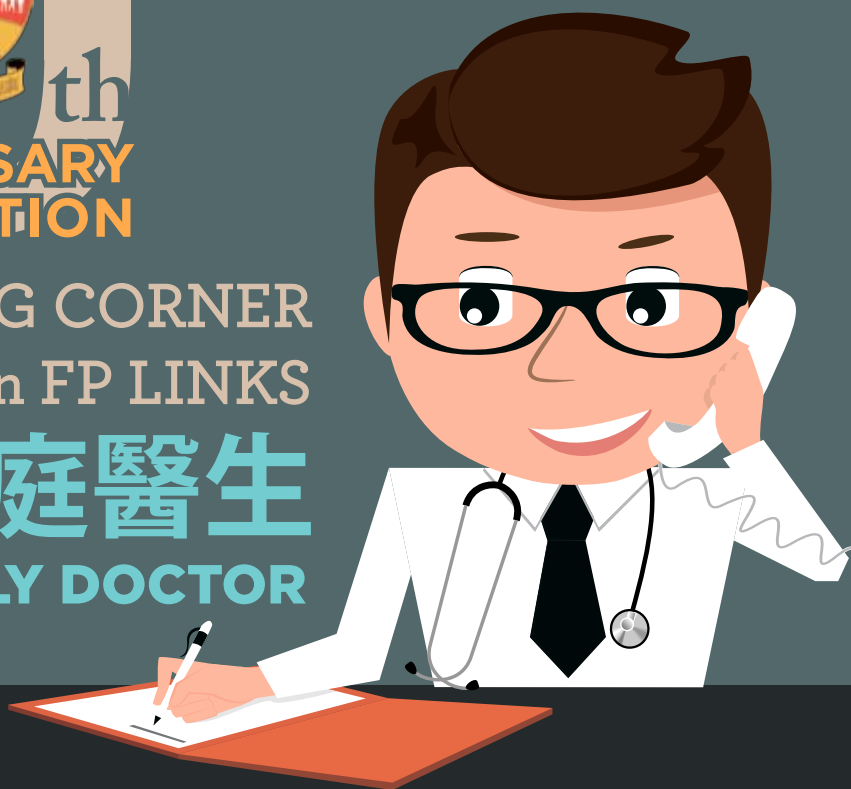


40th ANNIVERSARY CELEBRATION



WRITING CORNER
in FP LINKS

我是家庭醫生
I AM A FAMILY DOCTOR



2017 marks the 40th Anniversary of the Hong Kong College of Family Physicians. Writing Corner in FP Links is now open for submission. College Members and Fellows are invited to write on the topic “I am a Family Doctor” (我是家庭醫生). Submissions can be related to case sharing, interesting encounters, reflections and aspirations as a family doctor.

The selected articles would be published in FP Links and College website during the period of HKCFP 40th Anniversary year according to the tentative schedule below:

Submission Deadlines	FP Links Publication Schedule (maybe subject to change without notice)
30 th November 2016	January - March 2017 Issues
28 th February 2017	April - June 2017 Issues
31 st May 2017	July - September 2017 Issues
31 st August 2017	October - December 2017 Issues

Selection Panel :

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

Submission details :

- Articles must be the original work(s) of the doctor.
- Articles must be submitted by electronic format. The word count should NOT exceed 500 words (English or Chinese). All submissions must be in Microsoft Word format.
- Each member could submit **ONE** piece of article for this event.
- The copyrights of the submitted articles would be transferred to the Hong Kong College of Family Physicians.

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

HKCFP

40th Anniversary Celebration



Prize

Winner:
HK\$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 throughout 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 up to 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 College of Family Physicians.

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

Meeting Highlights

Interest Group in Dermatology

Dr. Chung Chun Kin, Specialist in Dermatology and Venereology, delivered a lecture on "Review of Atopic Dermatitis and Psoriasis" on 3 September 2016.



Dr. Lam Wing Wo, Edmund (right, Moderator) presenting the souvenir to Dr. Chung Chun Kin (left, Speaker) during the lecture on 3 September 2016

CME Lecture on 7 September 2016

Prof. Ralph Mosges, FAAAAI (MD, PhD, MSEE), Otorhinolaryngologist and Allergologist, The University of Cologne, Germany, delivered a lecture on "State-of-the-art Concepts in Antihistamine Therapy" on 7 September 2016.



Dr. Tsui Hing Sing, Robert (right, Moderator) presenting the souvenir to Prof. Ralph Mosges (left, Speaker) during the lecture on 7 September 2016

Interest Group in Evidence-Based Medicine (EBM)

Dr. Lau Kin Sang, Kinson, delivered a lecture on "How to Appraise Clinical Evidence" and Dr. Ngan Po Lun, delivered a lecture on "How EBM helps us Deal with Difficult Patients (Part II)" on 10 September 2016.



Dr. Lee Wan Tsi, Francis (right, Moderator) presenting the souvenirs to Dr. Lau Kin Sang, Kinson (middle, Speaker) and Dr. Ngan Po Lun (left, Speaker) during the lecture on 10 September 2016



Dr. Au-Yeung Shiu Hing (left, Moderator) presenting the souvenir to Prof. Claus Bachert (right, Speaker) during the lecture on 23 September 2016

CME Lecture on 23 September 2016

Prof. Claus Bachert, Professor and Head of Clinics of the Department of Otorhinolaryngology, University of Ghent, Belgium, delivered a lecture on "Gaps in currently available Allergic Rhinitis Treatment Options: Need for Something New" on 23 September 2016.

Certificate Course on Bringing Better Health to Our Community 2016

The last session of the "Certificate Course on Bringing Better Health to Our Community 2016" co-organized with Queen Elizabeth Hospital was held on 24 September 2016. Representative from Department of FM & GOPC, (FM & PHC) QEH, delivered a lecture on "Private-Public Partnership-Hypertension" and Dr. Chan Kam Tim, Specialist in Cardiologist, Consultant (MED) QEH, delivered a lecture on "Update on Management of HT and Stable Coronary Artery Disease" and Dr. Chan Hau Ngai, Kingsley, Specialist in Dermatology, Private Practice, delivered a lecture on "Common Skin Complaints- Prevention and Management (Ultra-Violet & Pigment)".



Dr. Chan King Hong (right, Council Member) presenting a souvenir to Dr. Chan Kam Tim (left, Speaker) during the lecture on 24 September 2016



Dr. Chan Hung Chiu (right, Council Member) presenting a souvenir to Dr. Chan Hau Ngai, Kingsley (left, Speaker) during the lecture on 24 September 2016



Ready for the Next Running Season: Medical Risk Assessment for Your Patients

Dr. John-Hugh Tam, Specialist in Family Medicine
Mr. Mak Cheuk-Hang, Physiotherapist, Alice Ho Miu Ling Nethersole Hospital

Every year between autumn and spring is the “peak season” for running, with the calendar clustered with the famous Hong Kong Marathon and countless running races of various distance. This kind of races attract participants from all walks of life and is getting increasingly popular during the recent years, with runners ranging from the most experienced and competitive ones to the amateur runners who just aim to “challenge their fitness” and experience the fun.

During the recent years, we encountered news about sudden deaths of runners in midst of these races, and this often raises concerns from our patients planning for future runs. From the literature, the American Heart Association (AHA) estimated the prevalence of cardiovascular disorder at risk for sudden cardiac death (SCD) in young sportspeople being 0.3% (i.e. 1 in 500 young sportspeople)¹. Harmon et al (2011) had done a 5 years review on etiology and incidence of sudden death in US National Collegiate Athletic Association athletes (age 17-24), showing the incident of SCD was 1:44 000 per year which is far greater than deaths from the combination of heat stroke, head/neck trauma, and sickle cell trait². Whereas in terms

of marathon-specific statistics, an analysis in the US revealed that the overall, male, and female death rates for a 10-year period were 0.75 (95% confidence interval [CI], 0.38-1.13), 0.98 (95% CI, 0.48-1.36), and 0.41 (95% CI, 0.21-0.79) deaths per 100,000 race completers, respectively³ and similar death rate of 0.8 per 100 000 participants had also been quoted in another similar analysis⁴. If this figure also applies to our local community, for a large running event like the Hong Kong Marathon (e.g. the 2016 race catered with 61,000 runners), with our local weather being generally warmer with higher humidity level, which further affects the sweating and cooling mechanism during running and hence making the running experience even more difficult, it would not be surprising for us to see news about SCD from this kind of annual event^{5,6}.

In terms of the etiology of SCD in younger sportspeople (<35 years old), literature revealed this being most commonly caused by a variety of congenital electrical and structural cardiac abnormalities. 37% of deaths were classified as congenital and anatomical anomalies, 36% as cardiomyopathies, 14% as arrhythmias and remaining 13% as acquired causes⁷.

Congenital Pathology	Acquired Causes
<p>Disease of the myocardium</p> <ul style="list-style-type: none"> Hypertrophic cardiomyopathy (HCM) Arrhythmogenic ventricular cardiomyopathy (ARVC) Dilated cardiomyopathy (DCM) 	<p>Myocarditis</p>
<p>Coronary artery disease</p> <ul style="list-style-type: none"> Congenital coronary artery anomalies (CCAA) Premature atheromatous coronary artery disease 	<p>Drugs</p> <p>Electrolyte disturbances</p>
<p>Cardiac conduction tissue abnormalities</p> <ul style="list-style-type: none"> Wolff-Parkinson-White Syndrome (WPW) Right Ventricular outflow tachycardia 	<p>Hypo / Hyperthermia</p>
<p>Valvular heart disease and disorders of the aorta</p> <ul style="list-style-type: none"> Mitral valve prolapse Congenital aortic stenosis Marfan syndrome 	<p>Commotion cordis [lethal disruption of heart rhythm that occurs as a result of a blow to the area directly over the heart (the precordial region)]</p>
<p>Ion Channelopathies</p> <ul style="list-style-type: none"> Congenital long QT syndrome (LQTS) Catecholaminergic polymorphic ventricular tachycardia (CPVT) 	



I often wonder if there are ways to systemically assess our patients who request for pre-race medical assessment in general practice settings, and how we should advice them to get ready for it. Here are some information summarized from the literature.

Medical Risk Assessment / Pre-participation Screening (PPS)

AHA states that PPS aims at reducing cardiovascular risk associated with athletic participation and physical activity¹. PPS is now mandatory for some competitive sports such as soccer in some international associations (e.g. FIFA) and in some countries by law (Italy and U.S.).

Section 1: History

A) General

It is always nice to know more about your patients - especially their training background and upcoming race plans. This can provide clinicians with some ideas and help us and our patients decide if they can cope and *realistically* plan ahead before the run.

Background information may include:

- Previous sports habit
 - o Type(s) of sports done in past
 - o How long (in terms of months / years) has this kind of sports been taken
 - o Whether he/she is a regular / irregular participant (e.g. frequency of exercises per week, intensity and duration per session)
 - o For runners : usual running distance covered, time for finishing it
 - o Any prior race(s) taken, and distance completed
- For the upcoming race
 - o Details of the upcoming race(s)
 - o How will he/she get ready for it (e.g. any change in training plan in terms of exercise frequency, intensity, duration?)
 - o Any specific target(s) (e.g. targeted finishing time)

B) Specific Conditions

Since SCD in young sportspeople are highly related to congenital/ genetic factor, questions related to our patients and their first degree relatives should be assessed. The personal and family history of the athlete reveals 64 to 78 percent of conditions that could prohibit or alter sports participation, making it a more sensitive tool than the physical examination⁸. Questions recommended by AHA were listed in following table⁹:

Questions relating to cardiovascular problems

1. *Have you ever passed out, become dizzy / had unexpected fatigue, or had chest pain during or after exercise?*
2. *Has anyone in the family died suddenly and unexpectedly before the age of 50?*
3. *Have you ever had a heart abnormality or murmur diagnosed by a doctor?*
4. *Have you ever had an abnormal heart rate, palpitation, or irregular heartbeats?*
5. *Have you had high blood pressure or high cholesterol?*
6. *Has a physician ever denied or restricted your participation in sport because of heart problem?*
7. *Have any of your relatives ever had cardiomyopathy, Marfan syndrome, long QT syndrome, or a significant heart arrhythmia?*

Further to these questions, it is also useful to ask about other concurrent medical conditions and drug history (e.g. prescribed, over-the-counter, and illicit drugs especially cocaine and anabolic steroids due to the known cardiotoxic effects¹⁰).

Section 2: Physical Assessment in General Clinic Settings

Physical examination would always be useful for helping us to pick up signs that may suggest more severe physical conditions. Considering cardiac and musculoskeletal conditions being the major problems concerned for runners, here may be some initial examinations to consider in GP settings:

- ✓ **General appearance:** To look for pallor, jaundice, cyanosis, finger clubbing, stigmata of familial hypercholesterolemia and other more specific clinical features such as that of Marfan syndrome (e.g. long limbs and fingers, curved spine, chest deformities, hyperflexible joints, flat feet, crowded teeth, etc.) that may suggest possibility of significant medical especially cardiovascular conditions.
- ✓ **Vital signs:** Checking of blood pressure as a baseline reference and screening for hypertension for those prior healthy individuals.
- ✓ A comprehensive **cardiovascular examination**¹⁷ especially palpation of the carotid pulse and **auscultation** to look for abnormal heart sounds that may raise suspicion of aortic stenosis and



hypertrophic cardiomyopathy (HCM). (The classic auscultatory finding for HCM is a harsh, crescendo-decrescendo systolic murmur along the upper left sternal border that increases with the Valsalva maneuver, which is indicative of dynamic left ventricular outflow tract obstruction.)

- ✓ Musculoskeletal examination: To observe for abnormal gait, look for leg deformities, feel for tender points that may cause problems during running.
- ✓ Bedside 12 Lead ECG: This would help us pick up specific cardiac conditions such as WPW and congenital LQTS. Abnormal signals would also be present in over 90% of individuals of HCM¹¹ (though not reliable for localizing and quantifying the hypertrophy). Features to look for may include:
 - o ST-T changes in lateral precordial leads
 - o Deep T wave inversions in lateral leads
 - o Left atrial enlargement (“P mitrale”)
 - o Deep narrow “dagger-like” Q waves
 - o WPW patterns, low voltage complexes

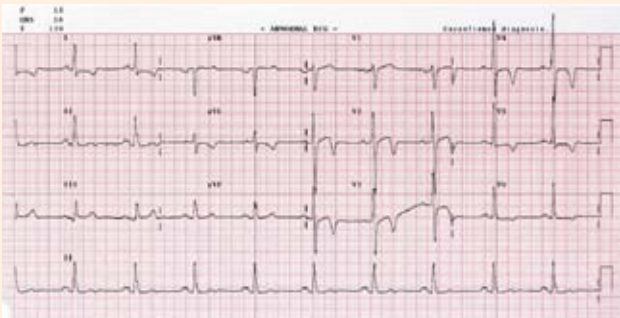


Fig 1. Example of apical HCM with high precordial voltages, deep T wave inversions in the precordial and high-lateral leads as well as P mitrale. [Source: <http://lifeinthefastlane.com/ecg-library/hcm/>]

Section 3: More Specific Investigation Tools + Referral Needs

Though not generally available in our clinics and not being the expertise of Family Physicians, when appropriate, we should also consider to refer patients to specialist for further assessment and handling:

- ✓ Echocardiography (ECHO) : Though not coming cheap, it is the gold standard diagnostic tool for HCM, advanced ARVC and valvular heart disease. It also helps look at the origin of coronary ostia and screen for anomalous coronary arteries¹².
- ✓ For symptomatic sportspeople with unknown cause and sportspeople with suspicious family history, exercise treadmill test, 24-hour Holter monitoring, magnetic resonance coronary angiography, radionuclide imaging etc. would also be useful diagnostic tools for other specific cardiac pathologies¹³. These tests are not considered as routine.

Note: Despite the list of examples raised above, this is just a brief taste but not considered a comprehensive pre-participation physical assessment yet. For colleagues who are interested to learn more, here are some related articles to further read about in American Family Physician (Kurowski K., Chandran S. “The Preparticipation Athletic Evaluation” Am Fam Physician. 2000 May 1;61(9):2683-2690. Available on - <http://www.aafp.org/afp/2000/0501/p2683.html>) and the American College of Sports Medicine (<https://www.acsm.org/docs/brochures/pre-participation-physical-examinations.pdf>)

Finally, to consider some advice to help runners getting ready....

General¹⁴

- ✓ Healthy lifestyle - Adequate rest prior to the race, opportunistic advice for alcohol and smoke cessation.
- ✓ Clothing and running gear - Well-fitted shoes and socks as well as breathable, weather-appropriate clothing are essential for preventing foot problems and heat stroke.
- ✓ Food - It is good to remind your patients to have energy for your run, but not to overdo it. Avoid having a large meal within two hours of the run. However, a light snack, such as a banana, before running is fine. It is also good to keep a source of fast acting carbohydrates (e.g. glucose gel or tablets) in a pouch in case of hypoglycemic emergencies.

Fig 2. Samples of glucose gel that can easily be stored in a runner's waist pouch



- ✓ Hydration - Drinking too much or too little can be of risk to health and performance¹⁸. Whilst proper rehydration during running, if taken seriously, is a multi-variable dependent sophisticated concept based on individualised calculated hydration plan to avoid over-hydration and potential hyponatremia¹⁹. For those who are naive from this complicated concept, the ACSM position stand 2007²⁰ would suggest for marathon runners (who are euhydrated at the start) to drink ad libitum (at one's pleasure when they feel thirsty) from 0.4 to 0.8 L per hr,



with the higher rates for faster, heavier individuals competing in warm environments and the lower rates for the slower, lighter persons competing in cooler environments.

- ✓ Warming up and down - Advice your patients to go through some stretching exercises and preparatory brisk walking stage (e.g. 5-10 minutes) before the run. Whereas for a good warm-down, to avoid stop running abruptly or immediately sit down after the race and instead keep walking until fully recovered (e.g. 5-10 minutes).

Specific to chronic medical conditions

- ✓ "Identify yourself" - Advice your patients to wear a medical identification tag or bracelet which state their identity, close contacts and current medical conditions, so in case of incidents others will know how to help them.
- ✓ For Diabetes patients - It is always good to self-test blood glucose levels before and after exercise and keep a log. The ADA recommends¹⁵ avoiding exercise if fasting glucose levels are >250 mg/dl (13.89 mmol/l) and ketosis is present, and exercising caution if glucose levels are >300 mg/dl (16.67 mmol/l) and no ketosis is present. If levels are below 100 mg/dl (5.56 mmol/l) before exercise, have a snack and retest in 15 minutes.
- ✓ For Hypertensive patients - Remind them to regularly keep track of their blood pressure readings. Literature¹⁶ suggested that severe arterial hypertension (i.e. systolic BP of >200mm Hg and/or a diastolic of BP of >110mm Hg) at rest is a relative contraindication for physical activity / exercise. Also, coffee may cause a spike in blood pressure, hence avoid caffeine 3 to 4 hours before exercising.

- ✓ To know your limits - Remind your patients to keep notice how their body feels, if they have any doubt and not feel physically well at any moment prior to/during the race (e.g. chest pain, weakness, dizziness, lightheadedness, etc.), it is always good to play safe and abort the race immediately. Remind them to sought medical advice or seek emergency treatment immediately if these symptoms do not go away quickly, or if it happens again.

Fig 3. Weather may not always be optimal for running, so always be prepared for cold fronts and drizzles!



Finally, as a word of reminder, we should also appreciate the concept that to achieve a safe sporting environment, besides comprehensive PPS, we also require good training and game planning based on modern scientific theory of sports science. For more details, you may also refer your patients to sports physiotherapists or physicians specialised in sports medicine in aid of their pre-race planning.

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Doctor Burnout

It was with great sadness to learn that a doctor in Hong Kong took her own life in early August this year. This is a time to reflect whether we are taking good care of the wellbeing of our colleagues and our own selves.

Hong Kong being a world famous rat maze, doctors are even more prone to burnout with prolonged working hours, professional competitiveness and low physician versus patient rates. Siu et al¹ conducted a local study in 2009 and found 31.4% respondents suffering from high burnout using the Maslach Burnout Inventory – Human Services Survey². Nearly 10% of high burnout respondents had suicidal thoughts.

We all know what it feels like to be drained after an overnight call as a junior doctor (especially our junior trainees in their hospital rotation), surviving a particularly tedious evening clinic where patients have a lengthy complaint list in their hands, being faced with a patient with impossibly poor diabetic control and even poorer insight or having to prepare for exit examinations after a long day work (kudos to candidates preparing for the exit examination 2016/17!). Unfortunately we are not going on AC voltage and need daily recharging of our electrical juices. And there are some days where we find it particularly difficult to recharge. If conditions worsen and we are unable to recover even after rest, the cardinal symptoms of physician burnout appear:

1. Physical and Emotional exhaustion
 - One is emotionally drained, depleted and worn out by work and unable to recover in non-working hours
2. Depersonalization
 - Development of a negative, callous and cynical attitude towards patients and concerns
3. Reduced Sense of Personal Accomplishment
 - The tendency to see one's work negatively, without value and see oneself as incompetent.

The definition of burnout is the syndrome of emotional exhaustion, depersonalization, and a low sense of personal accomplishment that leads to decreased effectiveness at work³. It differs from depression since it primarily affects an individual's relationship to one's work. These symptoms rarely occur overnight. On the contrary it is a gradual erosion into our souls and lives. At some point down the road, we are simply bone weary and patient care is compromised when we reach a dead end.

The cause for burnout is multifactorial but doctors are at risk for burnout with our high level of responsibility, intense encounters with sick patients, being the rate limiting factor in the medical system, facing one-on-

one consultations with our patients. Not to mention other obligations: sitting for professional examinations, training juniors, paperwork and balancing our job and family. Having been A star students for the majority of our lives, we find it difficult to accept that we overachievers are underperforming and admitting defeat.

So how are Family Physicians faring amongst other specialties in terms of career satisfaction? Leigh et al⁴ found that geriatric internal medicine, neonatal-perinatal medicine, dermatology and pediatrics physicians were more likely than family medicine to be very satisfied in the United States. There has been no comparative studies conducted in Hong Kong.

Early recognition of signs and symptoms of burnout is imperative to avoid further escalation. Other preventive measures include:

Personal aspect

- Self awareness and mindfulness training
- Appreciative inquiry
- Narrative medicine
- Work life balance and healthy boundaries between work and non-work life areas
- Peer support group
 - A problem shared is a problem halved
- Lowering stress by
 - Learning effective leadership skills
 - Exerting control where possible over your work hours
 - Creating focus where possible on work activities that provide the most meaning

Organizational Prevention Measures

- Regular monitoring for physician burnout
- Provide leadership skills training
- Support flexible work hours
- Specific programmes to support burnout physicians

Currently there is no organization or support group in Hong Kong for burnt out doctors. Maybe it is time for doctors to take care of fellow doctors and each doctor should have his/her own family doctor.

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Compiled by Dr. CHENG Ghar Yee, Judy

Interest Group in Dermatology – The 55th Meeting on 3rd September 2016

Dr. Joyce Lai and Dr. Rex Cheng - College Members

Theme : Review of Atopic Dermatitis and Psoriasis

Speaker : Dr. Chung Chun Kin
Specialist in Dermatology and Venereology

Moderator : Dr. Lam Wing Wo, Board of Education

Learning Points

Atopic Dermatitis (AD)

Dr. Chung shared with us an overview of Atopic Dermatitis and Psoriasis. Atopic Dermatitis (AD) is a chronic relapsing, inflammatory but non-contagious skin disease. The skin of AD patients loses moisture from the epidermal layer, allowing the skin to become very dry and reducing its protective function. The skin of AD patients experiences increased trans-epidermal water loss due to an altered stratum corneum. AD skin usually has dry skin, patches of red and inflamed papules or plaques, scaling, lichenification, and excoriation. Work up is usually by clinical examination. Skin biopsy is seldomly done unless the case is uncertain. The general principles of management include hydration, avoiding exacerbating factors, control of the inflammation and infection. Treatment options include emollients, antihistamine, and topical corticosteroid creams and ointments. Corticosteroid creams can act to control inflammation but can cause skin atrophy, tachyphylaxis, infections and growth suppression in children. Moderate to severe AD cases may use topical calcineurin inhibitors which are immunomodulators which act to reduce flares, maintain skin texture and reduce need for long term steroids, but it may only be used in patients who are 2 years of age and above. Furthermore, systemic steroids, systemic immunomodulator (azathioprine, cyclosporin, methotrexate) may be given. Phototherapy UVA and UVB are not very common due to the time inconvenience (long duration of therapy not suitable for HK fast paced lifestyle).

Psoriasis

Dr. Chung gave a brief summary on the nature, prevalence, pathophysiology, presentation and diagnosis of psoriasis. As for management, he emphasized the importance of combined and rotational systemic therapy in treating psoriasis. In terms of choices of drug, cyclosporin is quick for induction and methotrexate is a cost-effective option for maintenance purpose.

Case sharing

80 years old man presented with generalized itchy rash for 3 months. Erythematous patches were noted over trunk and limbs. Some were well demarcated and some were ill defined. Dr. Chung commented sometimes it was difficult to tell whether lesions were well demarcated or not. In this particular case, Dr. Chung preferred to treat it as eczema as the skin was erythematous, scaling but without any active rims.

Next Meeting

The next meeting will be on 5 November 2016 (Saturday). The guest speaker is Dr. Or Chi Kong, Specialist in Plastic Surgery. He will speak to us on "Clinic Minor Operation, How to Do it Better?". All members are welcome and encouraged to present their cases and problems for discussions or role play. Please send your cases to our secretariat (teresaliu@hkcfp.org.hk) 2 weeks before the date of presentation.




How can I register for CME lectures on the college website?

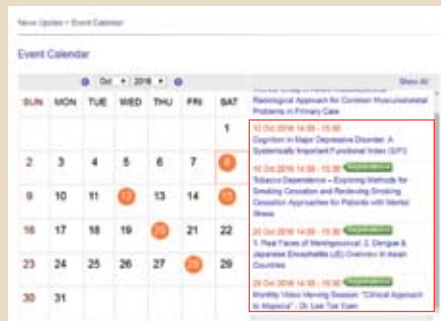
i.) "Member Login" on the top right hand side.




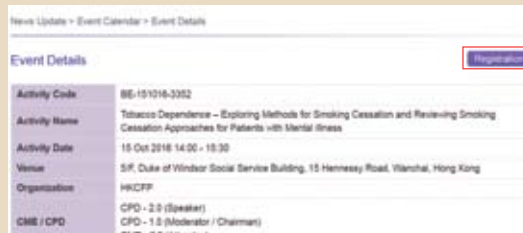
ii.) After login, click "News Update --> Event Calendar" on the left menu bar.



iii.) Select the event(s) with  logo.



iv.) Click  to register online.



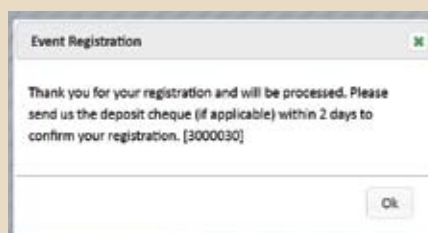
v.) A pop-up will appear and please indicate your lunch option. (Applicable to event with lunch/dinner only)



vi.) Another pop-up window will appear for you to submit the registration.

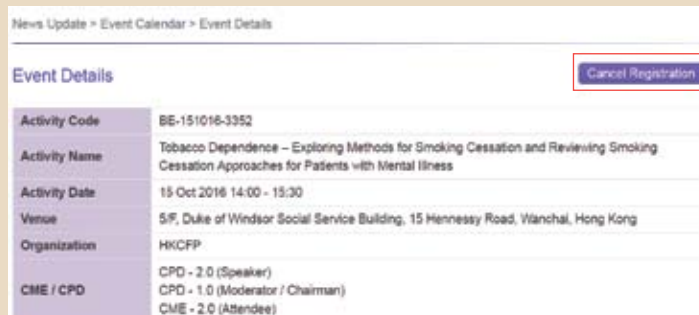


vii.) An acknowledgement will appear after your registration. Please send us the deposit cheque (if applicable) within 2 days to confirm your registration.

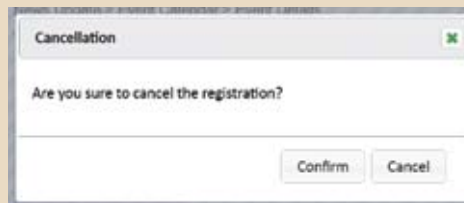


How can I cancel my registration on the college website?

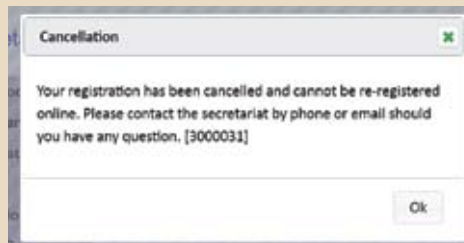
- i.) Click **Cancel Registration** button on the page of the event that you would like to cancel.



- ii.) A pop-up window will appear to ask you to confirm the cancellation.



- iii.) An acknowledgement will appear after your cancellation. Your registration will be cancelled and the event cannot be re-registered online. Please contact the secretariat by phone or email should you have any question.

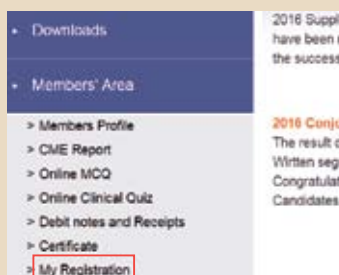


How can I check my registration status on the college website?

- i.) "Member Login" on the top right hand side.



- ii.) After login, click "News Update --> Event Calendar" on the left menu bar.

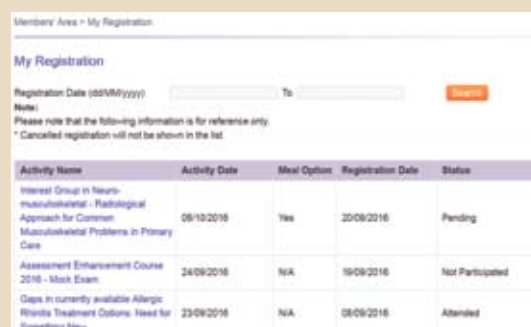


- iii.) You can check your registration status NOW! (Remarks: There are three registration status, which are shown below for your reference)

"Pending" for register in online registration;

"Attended" for participated in the online registered event;

"Not Participated" for not participated in the online registered event.



Refresher Course for Health Care Providers 2016/2017

Jointly organized by

Hong Kong Medical Association
The Hong Kong College of Family Physicians
Our Lady of Maryknoll Hospital

Venue : Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital
118 Shatin Pass Road, Wong Tai Sin, Kowloon

Time : 14:15 to 16:15

Dates	Topics	Speakers
10 Sep 2016	Handling sexually transmitted diseases	Dr. KWAN Chi Keung Specialist in Dermatology and enereology
8 Oct 2016	Gouty and non-gouty arthritis	Dr. NG Sin Ngai Ray, Rheumatologist, QEH
12 Nov 2016	Cardiology update	Dr. KWAN Wing Shan, Iris Cardiologist, OLMH
10 Dec 2016	Palliative care- between hospital and community	Dr. CHAN Tsz Mim, Jasmine Palliative medicine specialist OLMH
14 Jan 2017	Skin problems- Benign and not so benign	Dr. CHENG Tin Sik Specialist in Dermatology Department of Health
11 Feb 2017	Geriatrics for primary care	Dr. LO Kwok Man Geriatrician, OLMH
11 Mar 2017	Update in thyroid diseases	Dr. LEUNG Hoi Sze Endocrinologist, OLMH
8 Apr 2017	Psychosomatic problems in primary care	Dr. LAM Wing Wo Private family doctor
13 May 2017	Menopause and andropause- What we should know about	Dr. TING Zhao Wei, Private Endocrinologist
10 Jun 2017	Primary care dermatology	Dr. LAM Wing Wo Private family doctor

A certificate will be presented at the end of the course for those achieving $\geq 80\%$ of attendance.

CME accredited by HK College of Family Physicians: 2 credit points and HK Medical Association: 2 credit points (for MCHK non-specialist: pending)

CNE points accredited by OLMH: CND 2 credit points.

Limited car parking can be reserved, on first come first serve basis

RSVP : Tel: 2354 2440 (Ms. Clara Tsang, OLMH) Fax: 2327 6852



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

5 November 2016 Saturday
Board of Education 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	Clinic minor operation, how to do it better?	
Speakers	Dr. Or Chi Kong Specialist in Plastic Surgery	
Co-ordinator & Chairman	Dr. Lam Wing Wo, Edmund 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	2/F, The Chinese Club Building, 21-22 Connaught Road Central, Hong Kong (Remarks: Due to renovation work in Wanchai HKMA Clubhouse, the Interest Group in Dermatology will be relocated to Central HKMA Clubhouse.)	
Admission Fee	Members Non – members HKAM Registrants	Free HK\$ 300.00 HK\$ 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
GSK Consumer Healthcare (HK) Limited

10 November 2016 Thursday
Atopic Dermatitis & Seborrheic Dermatitis Management in Hong Kong

Dr. Chan Yung, Davis
Specialist in Dermatology and Venereology

Chairman	Dr. Lau Wai Yee, Aster The Hong Kong College of Family Physicians	
Time	1:00 p.m. – 2:00 p.m.	Registration and Lunch
	2:00 p.m. – 3:30 p.m.	Lecture and Discussion
Venue	Jade & Lotus Room, 6/F, Marco Polo Hongkong Hotel, Harbour City, Hong Kong	
Admission Fee	College Fellow, Full or Associate Members Other Categories of Members Non-Members	Free HK\$ 350.00 HK\$ 450.00
	All fees received are non-refundable and non-transferable.	
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 conducted in English.	
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.	



Sponsored by
A. Menarini Hong Kong Limited

12 November 2016 Saturday
Board of Education Interest Group in Counselling

Aim	(1) To form a regular platform for interactive sharing and discussion of various counseling cases commonly seen in our daily practice; (2) To booster the competencies in counseling of family practitioners through case discussion and practising self awareness	
Theme	Balint Group	
Facilitator	Dr. Lau Wai Yee, Aster The Hong Kong College of Family Physicians	
Time	2:30 p.m. – 2:45 p.m.	Introduction of Balint Group
	2:45 p.m. – 4:00 p.m.	Group presentation and sharing
	4:00 p.m. – 4:30 p.m.	Round-up discussion
Venue	8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wan Chai, Hong Kong	
Admission Fee	Members Non – members HKAM Registrants	Free HK\$ 300.00 HK\$ 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	Please bring along your mobile internet device if available. Participants are encouraged to submit one case of difficult clinical encounter for discussion. Please give a brief description of the clinical scenario (about half a page) and outline the areas of difficulty.	


26 November 2016 Saturday
Board of Education Interest Group in Evidence-Based Medicine (EBM)

Topic	What Cancer Screening would you Recommend to your Patients	
Speaker	Dr. Ko Siu Hin, Jack	
Co-ordinator & Chairman	Dr. Lee Wan Tsi, Francis The Hong Kong College of Family Physicians	
Time	2:15 p.m. – 4:15 p.m. Lecture and discussion	
Venue	8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wan Chai, Hong Kong	
Admission Fee	Members Non – members HKAM Registrants	Free HK\$ 300.00 HK\$ 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	Please bring along your mobile internet device if available. Participants are encouraged to submit one case of difficult clinical encounter for discussion. Please give a brief description of the clinical scenario (about half a page) and outline the areas of difficulty.	



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.

October's session:

Date	28 October 2016 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topic	"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.

Register
Online

November's session:

Date	25 November 2016 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topic	"Managing Diabetes – Beyond Cardiovascular Safety: Evidence of Renal Benefit" – Dr. SP Chan
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.

Register
Online

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
10 November 2016 1:00 – 3:00 p.m.	Conference Room, G/F, Block K, UCH, 130 Hip Wo Street, Kwun Tong, Kowloon	Management of Degenerative Joint Diseases Dr. HO Hon Shuen (AC, O&T, 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
2 November 16 (Wed)			
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Introduction of IMHP service in primary care; Management of thyroid problems in primary care Dr. Choy Pui Sang, Ignatius, Mr. Chan Kam Hung & Dr. So Siu Hei	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Updates in Tumor Markers in Screening of Cancers Dr. Feng Longyin & Dr. Ng Kai Man	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Compliance and patient centered care Dr. Choi Yuen Ling Janice & Dr. Chan Wing Chi Annie	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-function Room, NAHC clinic, G/F, Tsan Yuk Hospital	Low back pain and degenerative joint diseases Dr. WY Cheung	Ms. Cammy Chow Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Instrument in clinic Dr. Chan Lam Chloe	Ms. Crystal Law Tel: 2632 3480
3 November 16 (Thu)			
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Common Dental / Orofacial Problems Encountered in Primary Care Dr. Leung Hor Yee & Dr. Sze Chung Fai	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Sharing on Research Project Dr. Yio Shing	Ms. Kwong Tel: 2595 6941



9 November 16 (Wed)

2:00 – 5:00 p.m.	Room 7, 8/F, Yau Ma Tei GOPC	Common symptoms in Medicine and Geriatrics (1) (chest pain, shortness of breath) Dr. Hou Jing, Dr. Chui Tsz Hang	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Reading difficulty in Children: Assessment & Management Dr. Ho Shu Wan & Dr. Zhang Dingzuan	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Introduction to biostatistics and hypothetical testing Dr. Chow Kai Lim	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-function Room, NAHC clinic, G/F, Tsan Yuk Hospital	Updates on diabetes management Dr. W S Chow	Ms. Cammy Chow Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Counselling skills in FM Dr. Lee Man Kei	Ms. Crystal Law Tel: 2632 3480

10 November 16 (Thu)

4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Burnout and Sick Doctors Dr. Wong Man Kin	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Sharing on Smoking Cessation Training in Mayo Clinic Dr. Mak Wing Hang	Ms. Kwong Tel: 2595 6941

16 November 16 (Wed)

2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Common symptoms in Medicine and Geriatrics (2) (weakness, numbness, headache and dizziness) Dr. Lee Wing Lam & Dr. Chan Kiu Pak Kilpatrick	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Update Management of GI Disease including Dyspepsia, GERD and Peptic Ulcer Disease Dr. Ng Ngai Mui & Dr. Chan Yuen Ching	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Update of management of dementia Dr. Cheuk Hiu Ying Angie & Dr. Chow Pui Yin Melody	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Promoting smoking cessation in general practice Dr. David Lee	Ms. Cammy Chow Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Overview of the health care system in HK Dr. Tse Wan Ying Polly	Ms. Crystal Law Tel: 2632 3480

17 November 16 (Thu)

4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Smoking Cessation Program in Primary Care Dr. Yuen Ching Yan & Dr. Yip Chun Kong	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Sharing on the International Diabetes Federation Congress 2016 Dr. Lee Wing Po & Dr. Cheung Wen Ling	Ms. Kwong Tel: 2595 6941

23 November 16 (Wed)

2:00 – 5:00 p.m.	Room 7, 8/F, Yau Ma Tei GOPC	ICPC coding Dr. Kam Ngar Yin Irene & Dr. Siu Wing Yee	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Clinical Approach to Bereavement in Primary Care Dr. Yung Hiu Ting & Dr. Yip Pui Leung	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Journal club (related to men's health) Dr. Lim Martina & Dr. Wong Koon Yin Yvonne	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Common symptom complaints - weight change Dr. K H Tseung	Ms. Cammy Chow Tel: 2589 2339

24 November 16 (Thu)

4:00 – 6:00 p.m.	Rm 614, 6/F, Ambulatory Care Centre, Tuen Mun Hospital	Update Management of GI Disease Including Dyspepsia, GERD and Peptic Ulcer Disease Dr. Wan Ka Yan & Dr. Wong Fai Ying	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Common symptom complaint - chronic cough Dr. Lo Yuen Man	Ms. Kwong Tel: 2595 6941

30 November 16 (Wed)

2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Introduction to Leicester Assessment Package (LAP) Dr. Mak Ho Yan Queenie & Dr. Lau Ka Man	Ms. Mandy Leung Tel: 3506 8613
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Antenatal Checkup Dr. Feng Longyin & Dr. Leung Lai Man	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Primary health care system across countries Dr. Yeung Ka Yu Doogie & Dr. Wong Yu Man Tracy	Ms. Polly Tai Tel: 3949 3430
4:45 – 6:45 p.m.	Multi-function Room, NAHC clinic, G/F, Tsan Yuk Hospital	Dental Service in Hong Kong and common dental problems management Dr. Norman Law	Ms. Cammy Chow Tel: 2589 2339
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Evidence Base Medicine Dr. Han Jing Hao	Ms. Crystal Law Tel: 2632 3480



Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
9 Oct	10	11	12 1:00 – 3:30 p.m. CME Lecture 2:15 – 7:30 p.m. Structured Education Programme	13 2:15 – 7:00 p.m. Structured Education Programme	14	15 1:00 – 3:30 p.m. CME Lecture
16	17	18 7:00 p.m. Basic Training Introductory Seminar	19 2:15 – 7:30 p.m. 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 2:15 – 7:30 p.m. Structured Education Programme	27 2:15 – 7:00 p.m. Structured Education Programme	28 2:30 – 3:30 p.m. Video Session	29
30 OSCE Exam	31 6:30 p.m. Post Exit Exam Evaluation Workshop	1 Nov Deadline for Full Exit Exam 2017 (1st attempt candidates)	2 2:15 – 7:30 p.m. Structured Education Programme	3 2:15 – 7:00 p.m. Structured Education Programme	4	5 1:00 – 4:00 p.m. Interest Group in Dermatology 2:30 – 5:30 p.m. DFM Module V Musculoskeletal Workshop
6	7	8	9 6:30 p.m. Conference Committee Meeting 2:15 – 7:30 p.m. Structured Education Programme	10 1:00 – 3:30 p.m. CME Lecture 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Board of Conjoint Examination Meeting	11	12 2:30 – 4:30 p.m. Interest Group in Counselling
13	14	15	16 2:15 – 7:30 p.m. Structured Education Programme	17 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. HKCFP Council Meeting	18	19 2:30 – 5:30 p.m. DFM Module III Introduction to Family Therapy
20 1:00 – 4:30 p.m. ARC 2016	21	22 1:00 – 3:30 p.m. ARC 2016	23 2:15 – 7:30 p.m. Structured Education Programme	24 2:15 – 7:30 p.m. Structured Education Programme 1:00 – 3:30 p.m. ARC 2016	25 2:30 – 3:30 p.m. Video Session	26 2:30 – 4:30 p.m. Exit Exam PA Standardization Workshop 2:15 – 4:15 p.m. Interest Group in EBM
27 1:00 – 4:30 p.m. ARC 2016	28	29 1:00 – 3:30 p.m. ARC 2016	30	1 Dec	2	3

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