

THE HONG KONG COLLEGE OF FAMILY PHYSICIANS



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Message from the President

Wouldn't it be great to receive a commendation at the start of a fresh new year? The Annual Prize Presentation Ceremony organised by the LKS Faculty of Medicine of the University of Hong Kong was held on 11 February 2019. On behalf of our College, it was my great privilege to present the Hong Kong College of Family Physicians' Prize in Family Medicine to Dr. Fok Alvina Jada and the Hong Kong College of Family Physicians' Prize in Community Medicine to a group of 10 recipients, namely Mr. Ho Han Chung Gar, Mr. Ho Wui Hang, Mr. Lew Ting Kai, Mr. Li Ka Ho, Mr. Ma Kwok Ming, Miss Ng Kim Yee Naomi, Miss Tam Wan In, Miss Wan Lai Kuen, Miss Wong Wing Shan, Miss Wu Kit Wah. Congratulations and well done to them all!

The Media Spring Luncheon hosted by the Hong Kong Academy of Medicine (HKAM) was also held during the Chinese New Year period. The theme of the luncheon was "Promoting Primary Healthcare Development to Enhance the Overall Health Service Standard". The President of the HKAM, Prof. Lau Chak Sing, pointed out that one of the main directions for HKAM's annual plans this year is to strengthen primary healthcare services which could help relieve the pressure on public hospitals. In the meantime, the upcoming District Health Centres (DHCs) to be set up by the Government would have their eyes on noncommunicable diseases, e.g. diabetes and hypertension, and common orthopaedic conditions. Therefore, the HKCFP has been invited to take the coordinating role to collaborate with other relevant HKAM Colleges in providing training in these areas. During my presentation in the media luncheon, I reiterated the many important roles of the family doctors in the patient journey, such as the health adviser, treatment provider, care coordinator, and health resource navigator, just to name a few. With an established track record in the provision of quality postgraduate education for primary care doctors, the HKCFP is in the best position to provide up-to-date Continuing Medical Education (CME) and Continuing Professional Development (CPD) programmes to support

the service needs of the DHC network doctors and other doctors in the community, e.g. our Diploma in Family Medicine (DFM), which is a one year parttime programme leading to a quotable postgraduate medical qualification in Hong Kong.



Presentation on primary care doctors training opportunities in HKAM Media Spring Luncheon

A Family Physician is the carer of an individual and his family from "Cradle to Grave". And end-of-life care is one of the wide ranges of services that Family Physicians can provide to improve the quality of life of the patients as well as their families. With an ageing population and an increasing number of patients suffering from advanced life-limiting diseases, end-of-life care is becoming more and more important. The HKCFP has collaborated with the Haven of Hope Sister Annie Skau Holistic Care Centre and the Jockey Club End of Life Community Care Project, Faculty of Social Sciences, the University of Hong Kong to organise a Certificate Course of End-of-Life Care for Primary Care Doctors which was commenced on 17 February 2019. We are most honoured to have Prof. Sophia Chan, Secretary for Food and Health, Food and Health Bureau, and Dr. Lam Ching Choi, Chief Executive Officer of Haven of Hope Christian Service and Chairman of Elderly Commission, to give us opening speeches on that day. Thanks to Dr. Paul Wong, Deputy Medical Superintendent, and Dr. Tracy Chen, Associate Consultant Physician, of Sister Annie Skau Holistic Care Centre, Haven of Hope Christian Service for sharing their expertise right after the opening. We are of course very grateful towards Dr. Alvin Chan, our Board of Education Chairman, and our College secretariat for helping to organise this important course.

(Continued on page 2)



Message from the President (Con't)

(Continued from page 1)

Judging from the full attendance on a Sunday afternoon, filling up the seminar room and additional seats had to be placed on the side, together with a substantial oversubscription waiting list, this timely course is quite well received by fellow colleagues.



The Department of Health (DH) launched the "School Outreach Vaccination Pilot Programme" to provide seasonal influenza vaccines (SIV) to students through outreach teams last year, which was followed by a lower rate of influenza-like illness outbreaks in schools. A meeting hosted by the Centre for Health Protection of the DH was held with medical organisations on 14 February 2019 to discuss the strategies and new initiatives in promoting SIV for school students in primary schools, kindergartens and child care centres. Thanks to Dr. Eric Hui for attending the meeting on behalf of our College.

Dr. David V K CHAO

President

Specialty Board News

Preparatory Workshop for 2020 and 2021 Exit Examination

The Specialty Board is pleased to announce the Preparatory Workshop for Exit Examination of Vocational Training in Family Medicine. This workshop intends to give participants an insight to all segments of the Exit Examination.

College members planning to sit for 2020 and 2021 Exit Examination are strongly encouraged to attend.

: 11 April 2019 (Thursday) Date

: 7:00 - 9:00p.m. Time

: James Kung Meeting Room, 2/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen

Speakers: Dr Wendy Tsui (Chairlady, Specialty Board)

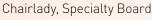
Dr. Ko Wai Kit, Welchie (Coordinator, Consultation Skill Assessment Segment)

Dr. Kwong Siu Kei, Alfred (Coordinator, Clinical Audit Segment) Dr. Luk Kam Hung (Coordinator, Practice Assessment Segment) Prof. Wong Chi Sang, Martin (Coordinator, Research Segment)

For registration, please submit the registration form online or contact the board secretaries Mr. John Ma or Ms. Alky Yu by email to exit@hkcfp.org.hk.

Yours Sincerely,

wendy loui Dr. Wendy Tsui,





Enrolment

Membership Committee News

The Council approved, on recommendation of the Chairlady of the Membership Committee, the following applications for membership in **January 2019 – February 2019**:

Associate Membership (New Application)

Dr. JIANG Yu	蔣		宇
Dr. ZHU Yin	朱		音
Dr. TSANG Ho Yim	曾	灝	嚴

Transfer from Assoicate Membership to Fellowship

Dr. CHAN Wing Yi	陳	穎	兒
Dr. HOU Jing	侯		婧
Dr. TSANG Pui Lim	曾	培	鎌
Dr. YEN Pang Fei	嚴	鵬	飛
Dr. YIP Hoi Man	葉	海	文
Dr. YUEN Chi Hang	袁	智	恒

Transfer from Fellowship to Non-HKSAR Fellowship

Dr. LEE Kar Yun, Peter	李	家	潤
Dr. TONG Gerald Sze Ho	唐	師	豪

Transfer from Associate to Non-HKSAR Membership

Dr. WALKER Peter Alan

Resignation of Non-HKSAR Fellowship

Dr. KWOK Pik Ki 郭 碧 姬

Meeting Highlights

Certificate Course on End of Life Care for Primary Care Doctors

The 1st session of Certificate Course on End of Life Care for Primary Care Doctors coorganized with Haven of Hope Sister Annie Skau Holistic Care Centre, and Department of Social Work & Social Administration, the University of Hong Kong were held on 17 February 2019.

Dr. Wong Kin Shing, Paul, Deputy Medical Superintendent, Sister Annie Skau Holistic Care Centre, Haven of Hope Christian Service, delivered a lecture on "Introduction of Palliative Medicine & Overview of Palliative Care Services in Hong Kong" and Dr. Chen Wai Tsan, Tracy, Associate Consultant Physician, Haven of Hope Sister Annie Skau Holistic Care Centre; Specialist in Palliative Medicine, delivered a lecture on "Advance Care Planning and Advance Directive" on 17 February 2019.



Prof. Sophia Chan taking group photo with speakers, VIP guests and Council members



Dr. Alvin Chan (left, Chairman of Board of Education) presenting a souvenir to Dr. Wong Kin Shing, Paul (right, Speaker)



Dr. Alvin Chan (left, Chairman of Board of Education) presenting a souvenir to Dr. Chen Wai Tsan, Tracy (right, Speaker)

Dinner Symposium on 19 February 2019

Dr. Chan Nor, Norman, Specialist in Endocrinology, Diabetes & Metabolism; Honorary Associate Professor, Department of Medicine & Therapeutics, The Prince of Wales Hospital, The Chinese University of Hong Kong, delivered a lecture on "Casting New Light in Diabetes Journey from Basal Initiation to Intensification" on 19 February 2019.



(from left to right): Dr. Ho Ka Ming (Moderator) Dr. Chan Nor Normen (Speaker) and Dr. Mary Kwong (Council member)

THIRTY-THIRD CONJOINT HKCFP/RACGP FELLOWSHIP EXAMINATION THIRD (FINAL) Announcement

The Board of Conjoint Examination is pleased to announce the following information on the Thirty-third Conjoint Fellowship Examination with the Royal Australian College of General Practitioners to be held in 2019.

(1) REQUIREMENTS AND ELIGIBILITY

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

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

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

(**Note**: All candidates are required to renew their RACGP membership for the year 2019/2020 before 31 July 2019. Failure to comply with the rule may result in denial of admission to the Exam.)

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

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

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

Note: All Category I candidates who are current vocational trainees and apply to sit the Written Examination <u>MUST</u> submit evidence of completion of at least 15 months of approved training by 31 March 2019, together with the application. Those current vocational trainees who apply for the Clinical Examination <u>MUST</u> submit evidence of completion of at least 39 months of approved training by 31 March 2019, together with the application. Candidates who have already completed vocational training <u>MUST</u> submit evidence of completion of vocational training, together with the application. Part-time trainees must submit evidence of completion of their vocational training by the time of the Written

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

(b) **CATEGORY II CANDIDATES** are doctors who have been predominantly in general practice for not less than **five** years by 30 June 2019.

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

For successful Category I candidates who have enrolled in the vocational training programme before 31 December 2018, and who apply for the award of RACGP Fellowship before 1 March 2027, will remain entitled to be awarded FRACGP. All other successful candidates are eligible to apply for the award of International Conjoint RACGP Fellowship (ICFRACGP).

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

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

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

(2) FORMAT AND CONTENTS

A. Written Examination

Applied Knowledge Test (AKT)*, and

Key Feature Problems (KFP)

*Note: Multiple Choice Questions (MCQ) has been renamed as Applied Knowledge Test (AKT) from Conjoint Exam 2018, with no major change on the exam format.

B. Clinical Examination

Objective Structured Clinical Examination (OSCE)

(3) PRE-REQUISITE FOR CLINICAL SEGMENTS

All candidates applying to sit for the Clinical Examination of the Conjoint Fellowship Examination MUST possess an APCLS (Advanced Primary Care Life Support) certificate issued by the HKCFP*. The validity of this certificate must span the time at which the application for the Examination is made AND the time of the Clinical Examination.

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

*Note: In regarding the APCLS certificate as issued by the HKCFP, the APCLS workshops & examinations for 2019 will be held on **30 – 31 March 2019** respectively. Details regarding the workshop / examination can be referred to the News of Board of Education in the FP Links issue February 2019. Please register with our College secretariat

COLLEGE NEWS

at 2871 8899 IMMEDIATELY if you do not hold a valid APCLS certificate issued by HKCFP and intend to sit for the Conjoint Examination 2019.

(4) CRITERIA FOR A PASS IN THE EXAMINATION

A candidate will be required to pass the entire Written Examination in one sitting. That is, if one fails the Written Examination, both the AKT and KFP segments have to be re-taken. Successful Written Examination result can be retained for three years (until the Clinical Examination of 2022).

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

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

(5) APPLICATION AND EXAMINATION FEES

Application forms are available from the College Secretariat at Room 803-4, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. You may also download the application forms from our College website, http://www.hkcfp.org.hk. Please note that the deadline for application is **10 April 2019 (Wednesday)**.

For both CATEGORY I and CATEGORY II CANDIDATES:

Application Fee:

\$3,000*

[*Note: For candidates who are first sitting for the OSCE exam and have passed the Written Examination in 2016, provided that the administration fee for the whole Conjoint Examination had been previously settled, only the Clinical Examination fee of \$15,000 would be applied, that is, application fee of \$3,000 would NOT be applied.]

Examination Fee:

Full Examination (Written + Clinical) \$30,000
 Written Examination \$15,000
 Clinical Examination \$15.000

Please make the cheque payable to "HKCFP Education Limited". If a candidate applied for the Full Examination but failed in the Written Examination, the Clinical Examination fee (\$15,000) will be refunded.

(6) REFUND POLICY

If a candidate wishes to withdraw from the examination, and written notice of withdrawal is received by the College 60 days or more prior to the date of the examination, he will receive a refund of \$30,000 (for the whole examination), \$15,000 (for the written examination) or \$15,000 (for the clinical examination). The application fee of \$3,000 will not be refunded. No refund will be given if the written notice of withdrawal is received by the College within 60 days of the date of the examination.

All fees paid are not transferable to subsequent examinations.

(7) IMPORTANT DATES

• 10 April 2019 (Wednesday) Closing Date for Applications

11 August 2019 (Sunday)
 18 August 2019 (Sunday)
 Conjoint Examination – Written Examination (KFP)
 Conjoint Examination – Written Examination (AKT)

(Date to be confirmed)
 Conjoint Examination – OSCE

(8) ELECTION TO FELLOWSHIP

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

Entry forms for Fellowship, Membership and Associateship of the Hong Kong College of Family Physicians and the Royal Australian College of General Practitioners are available from both College website (www.hkcfp.org.hk / www.racgp.org.au). You may also contact the HKCFP Secretariat, Room 803-4, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. Tel: 2871 8899, Fax: 2866 0616.

HECHON

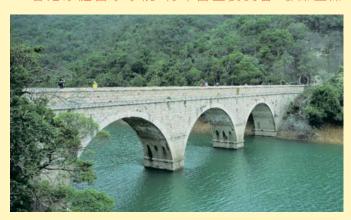
Dr. Chan Hung Chiu Chairman, Board of Conjoint Examination

Young Doctors Committee News

「新春樂悠悠,大潭水塘之旅」

陳智偉醫生/陳頴欣醫生香港家庭醫學學院 青年醫生委員會 聯席主席

周元復始,萬象更新,學院一班年青醫生發起在新春期間舉辦一次行山的聯誼活動,讓各會員可以舒展一下身心。大家二話不說就選定了**大潭水塘**的柏架山道作為這次活動的當然路徑。大潭水塘,是繼薄扶林水塘後,第二個建成的香港水塘。而由於當年港島人口多集中在現今的中環及灣仔一帶,港府同時亦開鑿了相信是全港第一條的輸水隧道,從大潭上水塘的堤壩附近通往大坑道,再經輸水網絡把食水運送至中環等地區。所以大潭水塘也是一條歷史文物教育徑。

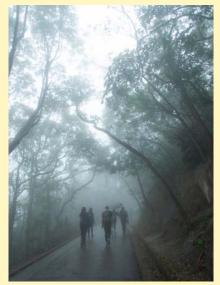


大年初六的早上,微風吹來,灑下陣陣的毛毛細雨。雖然最終因天氣關係,出發的人數不多,但這正好讓我們的團員能緊緊走在一起,步伐一致。沿途可以一邊欣賞風景,一邊細語交談。山徑的入口



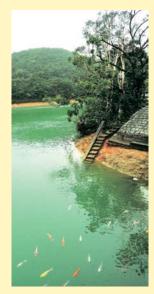






繞過紅屋,我們直往三百米高的大風坳進發。 雖然是上山路段,但沿途各人有傾有講,根本 不覺辛苦。我們一行十人,有些是平時甚少見 面,但透過這次活動,很快便熟絡起來,天 可,但透過這次活動,很快便熟絡起來, 近至閒時愛好、工作近況 對,這至香港的醫療制度、醫生 人手不足以及急症室人滿之患等等。大害 為十分投契,不經不覺已來到大風坳。接著的 路程全是往下走,十分輕鬆。雖然在大風坳 農霧圍繞,未能飽覽山下港島風光,但霧裏看 花,像仙境一般,也別有一番景緻。

一直走到水塘邊,濃霧散去,景觀豁然開朗。 此時遊人也絡繹不絕,有外籍人士和他們的



寵物一起行山,有父母推著BB車漫遊水壩,有外傭姐姐在樹下野餐跳舞,也有一家大小享受野外燒烤的樂趣。有再好風景,也要有好心情。遠離煩囂,你不難發現沿途盛開的吊鐘花正趕著花期,吸引遊人停下來觀賞。水塘中的錦鯉和樹影構成一幅像畫般的美景。站立在一旁的石柱,竟然有上百年的歷史,讓我們數人按捺不住地上網搜尋它的故事。









在綺麗的風光和笑聲細語中我們已不經不覺完成了三小時健行,但曲終人未散,部分成聚質「下半場」活動——燒烤聚的農烤場。大伙兒步行至大潭水壩底附港。大伙兒步行至大潭水壩底附港。燒烤場。燒馬對當風,但無損大爐邊的與致和胃口。大家圍着火爐邊。處傾,度過了一個愉快的下午。



後記:

猶記得青年醫生委員會 當初成立目的之一,是為 了連繫跨世代的會員, 然參加是次活動的人數不 多,但很高興能吸引勢不 同年齡背景的同事參到 期待將來的活動能得到大 家更多的支持!



The HKCFP Award for the Best Research of 2018

The Research Committee of the Hong Kong College of Family Physicians is calling for The Award for The Best Research of the Year 2018. All members and fellows of the College are invited to participate and submit their research papers to the Research Committee for selection. The Award will be presented at the Conferment Ceremony in 2019.

Entry and assessment criteria are listed below:

Entry Criteria:

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

Assessment Criteria:

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

Each research project submitted will be assessed according to the seven criteria listed above by a selection panel. Each criterion may attract a different weighting to be decided by the selection panel. Please send your submission either

By post to Research Committee, HKCFP, Rm 803-4, 8/F, HKAM Jockey Club Building,

- 99 Wong Chuk Hang Road, Aberdeen, Hong Kong;
- Or, by email to CrystalYung@hkcfp.org.hk

EXTENDED DEADLINE OF SUBMISSION: 24th April, 2019

Supported by HKCFP Foundation Fund

HKCFP Research Fellowship 2019

Introduction

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

Eligibility

Applicants for the HKCFP Research Fellowship must be active Fellow, Full member or Associate Member of the HKCFP. New and emerging researchers are particularly encouraged to apply. However, full-time academic staff of Universities would not be eligible to apply.

Selection criteria

Application potential will be judged on*:

- · Training potential of applicants
- Relevance to family medicine and community health
- Quality
- Value for money
- Completeness (incomplete or late applications will not be assessed further)
- * Please note that new researchers and those at an early stage of their research careers are defined as those who have not led a major research project or have fewer than 5 years of research experience.

How to apply

- 1. Application form, terms and conditions of the Fellowship can be downloaded from www.hkcfp.org.hk or obtained from the College Secretariat, HKCFP at Rm 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. Tel: 2871 8899 Fax: 2866 0616
- 2. Applicants must submit:
 - The completed application form;
 - The signed terms and conditions of the HKCFP Research Fellowship;
 - Curriculum vitae from the principal investigator;
 - Curriculum vitae from the co-investigator(s) (no more than two pages) AND,
 - Curriculum vitae from the supervisor.
- 3. Application deadline is now extended to be 24th April, 2019. Late applications will not be accepted.
- 4. Applications can be either sent:
 - **By post** to Research Committee, The Hong Kong College of Family Physicians, Rm 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong; Or, **by email** to CrystalYung@hkcfp.org.hk

Supported by HKCFP Foundation Fund

Outdoor fitness equipment in public parks – A way for elderly to stay active in the community?

Dr. Tam John Hugh (Specialist in Family Medicine), Ms. Leung Hin Wan, Grace (Registered Physiotherapist) Mr. Mak Cheuk Hang, Thomas (Registered Physiotherapist)

In the sports-related article series in past, we had discussed various forms of exercises, for example cardiopulmonary exercises like running and high intensity interval training (HIIT) as well as flexibility (stretch) exercises (The FP Links issues October 2016, August 2017 & June 2018). These are some of the common perfect regular exercise options suitable for the majority of city-dwelling adults in this locality to stay healthy. Whilst for the elderly in general, we have discussed the potentials of Tai Chi exercises (The FP Links issue September 2018). Through evidence, we understand that "Exercise is Medicine" and any means of such are beneficial for our patients towards better wellbeing.

This leads to a further question: How about elderly patients who suffer from common musculoskeletal (MSK) conditions like osteoarthritis of knees and hips, frozen shoulders and rotator cuff tendinopathies, etc.? These are some of the most commonly encountered musculoskeletal conditions of elderly during our consultations, and besides offering symptomatic

medications to relieve the discomfort, we often further encourage our patients to mobilise the affected joints and stay active. One of the means of mobilisation exercises involves the use of exerciser machines that are found in parks around us, with the equipment being free and accessible 24/7. The health benefits of outdoor exercises had in past been investigated by many, with studies ¹ suggested that staying active outdoor additionally improve mental wellbeing far more than light indoor activities do. There was also research in 2007 ² suggesting that outdoor exposure to plants & trees may improve our immunity - people who took two-hour walks in a forest had a 50 percent increase in the levels of their natural killer cells.

With the vast range of this kind of equipment being currently available, we are spoilt for choice. To make the picture less confusing to the readers, here is a brief introduction on how they work and how we may incorporate them in our advice. The following tables list out the target joints and actions of the exercise equipment commonly found in parks.

Upper limb exercisers:

Name	Picture	Target tissues	Target actions	MSK conditions that may benefit	MSK conditions that may not benefit
肩關節伸展器 Shoulder Stretcher		✓ Shoulder joint ✓ Elbow joint	✓ Mobilising into shoulder abduction and elbow extension	✓ Frozen shoulder✓ Shoulder stiffness✓ Elbow stiffness	x Shoulder impingement
上肢牽引器 Pull-down Machine		✓ Shoulder joint ✓ Elbow joint	✓ Mobilising into shoulder abduction and elbow extension	✓ Frozen shoulder✓ Shoulder stiffness✓ Elbow stiffness	x Shoulder impingement
手臂轉動 練習器 Upper Body Ergometer		✓ Elbow joint	✓ Mobilising into elbow flexion and extension	✓ Elbow stiffness ✓ Upper limb weakness	

Name	Picture	Target tissues	Target actions	MSK conditions that may benefit	MSK conditions that may not benefit
太極推手器 Tai Chi Spinner		✓ Shoulder joint	✓ Mobilising shoulder joint	 ✓ Frozen shoulder ✓ Rotator cuff tendinopathies ✓ Shoulder Impingement ✓ Upper limb weakness 	
上身伸展及強 健鍛鍊機 Upper Body Stretcher & Strengthener		✓ Pectoralis muscle	✓ Strengthening pectoralis muscle	✓ Upper limb weakness	× Pectoralis muscle tightness
坐拉訓練器 Pull-down Challenger		✓ Latissimus dorsi muscle ✓ Rotator cuff muscles ✓ Upper back muscles	✓ Strengthening	✓ Protracted shoulder✓ Simple shoulder pain✓ Simple back pain	× Shoulder impingement

Exercisers for the trunk:

Name	Picture	Target tissues	Target actions	MSK conditions that may benefit	MSK conditions that may not benefit
健騎機 Rider		✓ Latissimus dorsi muscle ✓ Upper back muscles ✓ Core muscles ✓ Quadriceps muscle	✓ Strengthening✓ Core stabilisation	 ✓ Simple back pain ✓ Protracted shoulder ✓ Simple shoulder pain ✓ Knee osteoarthritis 	
扭腰機 Twister		✓ Trunk	✓ Mobilising into trunk rotation	✓ Simple back pain	
下身伸展器 Lower Body Stretcher		✓ Lower back muscles ✓ Hamstring	✓ Stretching	✓ Simple back pain ✓ Knee osteoarthritis	 Patients with positive sciatic nerve neural tension sign Hip flexion ROM less than 90 degrees
坐拉訓練器 Pull-down Challenger		✓ Latissimus dorsi muscle ✓ Rotator cuff muscles ✓ Upper back muscles	✓ Stretching	✓ Simple back pain✓ Protracted shoulder✓ Simple shoulder pain	Shoulder impingementUnstable fracture

Lower limb exercisers:

Name	Picture	Target tissues	Target actions	MSK conditions that may benefit	MSK conditions that may not benefit
手腳鍛練器 / 腳踏轉動 練習器 Joint Exerciser / Lower Body Cycle		✓ Knee joint ✓ Hip joint	✓ Mobilising into Knee flexion and extension ✓ Mobilising into hip flexion and extension	 ✓ Knee osteoarthritis ✓ Hip osteoarthritis ✓ Lower limb ✓ weakness General conditioning 	
空中漫步機 Air Walker		✓ Hip joint✓ Hip extensor muscles✓ Core muscles	 ✓ Mobilising the hip joint into hip flexion and extension ✓ Strengthening ✓ Core stabilisation 	 ✓ Hip stiffness ✓ Early knee osteoarthritis ✓ Simple back pain ✓ General conditioning 	x Poor balance x Lower limb weakness
小腿伸展器 Calf Stretcher		✓ Calf muscles ✓ Ankle joint	✓ Calf stretching ✓ Mobilising the ankle joint into dorsiflexion	✓ Calf tightness ✓ Ankle dorsiflexion stiffness ✓ Knee osteoarthritis ✓ Plantar fasciitis ✓ Sciatica with radiating pain to calf	
踏步機 Stepper		✓ Quadriceps muscles ✓ Calf muscles ✓ Core muscles	✓ Strengthening	✓ Early knee osteoarthritis ✓ Simple back pain ✓ General conditioning	x Poor balance x Lower limb weakness
腳踏練習機 Bench Stepper		✓ Quadriceps muscles ✓ Hip extensor muscles	✓ Strengthening ✓ Stair training	 ✓ Early knee osteoarthritis ✓ Early hip osteoarthritis ✓ Mild lower limb weakness 	x Poor balance

These exerciser machines are very commonly found in public parks around us. For colleagues who are interested to have a hands-on trial and take a closer look at the machines, they are collectively termed and labelled as "elderly fitness corners" (長者健身園地) by the Leisure and Cultural Services Department since 2002 or from international literature, they are also commonly referred to as "outdoor gym" or "outdoor fitness equipment" (OFE)^{3,4}. Residents in the Tai Po area may get further opportunity to learn more by visiting a brand new site that was launched by the **Physiotherapy** Department of Alice Ho Miu Ling Nethersole Hospital since November 2018, with a well-presented local community map that pinpoints different forms of exerciser machines that are suitable for the elderly for daily use. Feel free to visit the following link for further more information:



Of which this map is part of a new project by the hospital's online rehab resource centre, which also contains a series of interesting rehab related exercise education materials and pamphlets (https://www3.ha.org.hk/AHNH/content/physio/physio_chi/e_resource/e_resource.htm).

Finally, a word of reminder

Despite the anticipated benefits we may get from these exerciser machines, we should bear in mind that not everyone is suitable for freely using them, such as patients with recent dislocated joints, unhealed fractures, post-operative conditions, acute soft tissue injuries and other unstable medical conditions, from which extra care & supervisions would be required during exercises to avoid injuries. For more details in helping your patients making the most optimal exercise and rehabilitation plans, you may also consider contacting and referring your patients to physiotherapists or physicians with special interest in sports medicine.

Have fun exploring and stay active with these valuable local community resources!

Reference:

- J. Thompson Coon, K. Boddy, K. Stein, R. Whear, J. Barton, and M. H. Depledge. "Does Participating in Physical Activity in Outdoor Natural Environments Have a Greater Effect on Physical and Mental Wellbeing than Physical Activity Indoors? A Systematic Review" Environmental Science & Technology 2011 45 (5), 1761-1772. DOI: 10.1021/es102947t
- 2. Li Q et al., "Forest bathing enhances human natural killer activity and expression of anti-cancer proteins." Int J Immunopathol Pharmacol. 2007 Apr-Jun;20(2 Suppl 2):3-8.
- 3. Hsueh-wen Chow, Chia-Hua Ho. "Does the use of outdoor fitness equipment by older adults qualify as moderate to vigorous physical activity?" Available online at https://doi.org/10.1371/journal.pone.0196507
- 4. Lee, J. L. C., Lo, T. L. T., & Ho, R. T. H. (2018). Understanding Outdoor Gyms in Public Open Spaces: A Systematic Review and Integrative Synthesis of Qualitative and Quantitative Evidence. International Journal of Environmental Research and Public Health, 15(4), 590. http://doi.org/10.3390/ijerph15040590
- 5. 《大埔運動地圖 物理治療DIY》,東方日報2018年11月19日A10頁.



The Map of Exercise Area and Facilities in Tai Po (大埔運動地圖) - https://goo.gl/1EXYM9⁵

New Drug for Obesity

The US Food and Drug Administration (FDA) has approved the diabetes drug liraglutide for the treatment of obesity in December, 2014 [1].

Liraglutide is a GLP-1 RECEPTOR AGONIST that binds to the GLP-1 receptor and stimulates glucose-dependent insulin release from the pancreatic islets. But its effect on weight reduction is also noticed by various studies.

In a 56-week trial comparing liraglutide 3mg once daily with placebo injection in 3731 patients who had a BMI of $\geq 30 \text{ kg/m}^2 \text{ or } \geq 27 \text{ kg/m}^2 \text{ with}$ dyslipidemia and/or hypertension, mean weight loss was significantly greater in the liraglutide group (-8.0 versus -2.6kg with placebo) [2].

In a 56-week trial comparing liraglutide 3mg once daily with placebo injection in 422 patients with BMI $\geq 30 \text{kg/m}^2 \text{ or } \geq 27 \text{kg/m}^2 \text{ with dyslipidemia and/}$ or hypertension (but not type 2 diabetes) who lost ≥5 percent of their initial body weight with diet and exercise during a 4- to 12-week pretrial run-in, a greater proportion of patients in the liraglutide group maintained at least 5 percent weight loss (81.4 compared with 48.9 percent in the placebo group) [3].

So the specific indication of liraglutide is as an adjunct to lifestyle for chronic weight management in individuals with a body mass index of 30kg/m² or greater (obesity) or 27kg/m² or greater (overweight) in the presence of at least one weight-related comorbidity such as hypertension, diabetes, or dyslipidemia. Patients should be evaluated after 16 weeks and the drug discontinued if the patient has not lost at least 4 percent of baseline body weight.

Liraglutide is administered subcutaneously in the abdomen, thigh, or upper arm once daily. The initial dose is 0.6 mg daily for one week. The dose can be increased at weekly intervals (1.2, 1.8, 2.4mg) to the recommended dose of 3mg [4].

Gastrointestinal side effects, including nausea and vomiting, are common. In the trials described above, the two highest doses of liraglutide (2.4, 3mg) are higher than those previously assessed for the treatment of diabetes, and a greater proportion of patients taking these doses reported nausea (37 to 47 percent compared with 5 to 15 percent with placebo) and vomiting (12 to 16 percent compared with 2 to 4 percent with placebo) [2,3,5]. Thus, weight loss may be due to, in part, to gastrointestinal side effects directly or through suppression of appetite.

Liraglutide should not be used in patients with a personal or family history of medullary thyroid carcinoma (MTC) or in patients with multiple endocrine neoplasia syndrome type 2.

References:

- 1. Food and Drug Administration https://www.fda.gov/Drugs/ GuidanceComplianceRegulatoryInformation/Surveillance/ ucm578415.htm
- 2. Pi-Sunyer X, Astrup A, Fujioka K, et al. A Randomized, Controlled Trial of 3.0 mg of Liraglutide in Weight Management. N Engl J Med 2015; 373:11.
- Wadden TA, Hollander P, Klein S, et al. Weight maintenance and additional weight loss with liraglutide after low-calorie-dietinduced weight loss: the SCALE Maintenance randomized study. In J Obes (Lond) 2013; 37:1443.
- 4. Food and Drug Administration http://www.fda.gov/NewsEvents/ Newsroom/PressAnnouncements/ucm427913.htm (Accessed on
- 5. Astrup A, Rössner S, Van Gaal L, et al. Effects of liraglutide in the treatment of obesity: a randomised, double-blind, placebocontrolled study. Lancet 2009; 374:1606.
- 6. https://www.uptodate.com/contents/obesity-inadults-drug-therapy?search=GLP%201%20weight%20 reduction§ionRank=2&usage_type=default&anchor=H4 6&source=machineLearning&selectedTitle=1~150&display_ rank=1#H3754676582

Compiled by Dr. Fok Peter Anthony

LEARNING POINTS FROM BOARD OF EDUCATION

Learning Points for the 63rd Meeting for Interest Group in Mental Health & Psychiatry on 2 February 2019

Dr. Chan Suen Ho, Mark Coordinator, Board of Education The Hong Kong College of Family Physicians

Topic : Pearls of Sports Psychology for

Family Physicians

Speaker: Dr. Chan Hoi Chung, Samuel

Family Physician with interest in sport psychology

psycholog

Moderator : Dr. Chan Suen Ho, Mark

Attendance : 41

The speaker:

Dr. Chan Hoi Chung graduated from HKU MBBS and has developed interested in sports, especially in training and psychology. He has obtained 8 diplomas and 3 Masters degrees, in MSc Endo&Diabetes (CUHK), MSc Cardiology (advanced cardiology practice, CUHK) And MScMMR (CUHK) and a PDipComPsychMed (HKU), Dr Chan is also Hon clinical assistant professor, department of family medicine, HKU and Council member (Hong Kong Community Psychological Medical Association), plus advisor for various sports related organisations. Dr. Chan is very active in promoting sports health and been involved in teaching the public and medical colleagues.

Learning points:

Dr. Chan covered the following topics in the session, including:

- Factors affecting sports performance
- What is a Sport Psychologist?
- Common Psychological Skills used by Sports Psychologists
- Characteristics of clients seeking help from a sports psychologist
- Sources of stress for athletes
- Self-talk
- Goal setting
- Mental Imagery 意象法
- Manipulation of Submodalities 次感元

Factors affecting sports performance includes:

Fitness Levels: Specific techniques/skills relating to a particular sports; Strategies/Sports Competitive Intelligence; Psychological skills: this is important, as this is Highly trainable!!!!

The sports psychologist and the client:

A Sport Psychologist, usually has a Bachelor degree in either Sports science or psychology + Master or PhD in sports psychology. The Common Psychological Skills used by Sport Psychologists include Mental imagery/ Visualization; self-talk; Manipulation of Submodalities; Goal Setting; Attention and Concentration Control; Mindfulness Anxiety management; Team Building; Hypnosis/Dream interpretation; Motivational Interviewing; Communication (athletes, coaches, parents) and Time Management.

Characteristics of clients seeking help from a sports psychologist is different from everyday clinic patients as most may not necessarily have "problems". Sports psychologists work on how these clients can use everything they have (internal resources). They are highly motivated; while these could be demanding clients---Sometimes clients want to do too much and too soon. Confidentiality is important, (e.g. sports psychologists may walk the ethical line in deciding how much information to share with coaches and team physicians).

Stress

The stress for sports related issues include: Pressures of competition/Big-game stress; Media; Fans' expectations; Injury and illness (most intense source of stress!) (Social and Behavioral Sciences. Volume 5, 2010); Conflict with the coach/team members; Time management (e.g. Schoolwork); Family members (e.g. Husband, wife); Referee/spectators, etc.

While Injuries are part and parcel of sports participation at ALL levels, strategies to enhance recovery from injuries include:

- Positive self-talk;
- Goal setting;
- Mental imagery

Self-talk

- Verbalizations or statements addressed to the self
- Self-talk may be expressed internally or out loud
- Early research of self-talk in sports drew largely from the ideas of Albert Ellis's Rational Emotive Behavior



LEARNING POINTS FROM BOARD OF EDUCATION

Therapy and Aaron Beck's Cognitive Therapy, which emphasized self-talk as an important approach to gain insight into faulty or irrational beliefs that influence emotion and behavior.

Goal setting

- SMART goals
- Specific, measurable, action-oriented, realistic, timely
- Choose the appropriate level of difficulty
- Short-term goals can be used effectively to achieve long-term goals
- Feedback concerning progress is important
- Should not emphasize too much on outcome goals
- Goals could be:
 - 1. Outcome goals
 - 2. Performance goals (e.g. scoring a hat trick). Usually bring about achievement of outcome goals. There will often be greater personal satisfaction from achieving performance goals even when outcome goals are less successfully met.
 - 3. Process goals

Mental Imagery 意象法

- Mental imagery can improve sports performance (https://www.peakendurancesport.com/endurancepsychology/mental-drills/mental-imagery-canimprove-sports-performance)
- Research has shown that mere visualization of a muscle movement in the mind can create electrical activity in that muscle even though there's no actual movement in the muscle itself, and also that the pattern of electrical activity closely resembles that seen during actual movement
- "Targeted and controlled imagery can stimulate electrical activation in relevant muscles, and so 'prime' those muscles for subsequent physical activity"
- Physical skills can be maintained or even improved by appropriate imagery when practice isn't possible (e.g. during injury lay-offs) and indeed, evidence suggests that using imagery can accelerate rehabilitation and recovery after injury.

(https://www.ncbi.nlm.nih.gov/pubmed/21550729) (https://www.ncbi.nlm.nih.gov/pubmed/19684340)

Four factors that impact the quality of mental imagery: perspective, control, multiple sense, and speed.

 Perspective: The internal perspective involves seeing yourself from inside your body, as if you were actually performing your sport. The external perspective involves seeing yourself from outside

- your body like on video. Some researchers (Munroe, Giacobbi, Hall, & Weinberg, 2000; Smith, Wright, Allsopp, & Westhead, 2007) support athletes using a combination of internal and external perspectives.
- 2. Control: when you perform poorly in your imagery, immediately rewind the "imagery video" and edit the imagery video until you do it correctly.

 (https://www.psychologytoday.com/us/blog/the-power-prime/201211/sport-imagery-athletes-most-powerful-mental-tool)
- 3. Multiple sense (e.g., see, feel, hear, taste, smell): The best imagery involves the multi-sensory reproduction of the actual sports experience. You should duplicate the sights, sounds, physical sensations, thoughts, and emotions that you would experience in an actual competition. The most powerful part of mental imagery is feeling it in your body.
- 4. Speed: The ability to adjust the speed of your imagery will enable you to use imagery to improve different aspects of your sports performance. Slow motion is effective for focusing on technique.

(https://www.psychologytoday.com/us/blog/the-power-prime/201211/sport-imagery-athletes-most-powerful-mental-tool)

The session was well attended by over 40 colleagues and concluded with an active discussion on a new areas related to the core task of exercise promotion and motivation of a family physician.



Dr. Mark Chan (left, moderator), presenting a souvenir to Dr. Chan Hoi Chung, Samuel (right, Speaker) during the lecture on 2 February 2019.

Next meeting

The 64th meeting for the Interest Group in Mental Health & Psychiatry in Primary Care will be held on 6 April 2019. Prof. Kwok Chi Yui, Timothy will be the speaker. The topic will be on "Primary Care of People with Dementia".

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 ones 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.

Assessment Enhancement Course (AEC) Sharing

The Conjoint Examination - a Category II Candidate Perspective

Dr. Juan-Domingo Maurellet

Some general practitioners who consider sitting for the Conjoint Exam as a Category II candidates are hesitant, as they are not vocationally-trained and do not have access to a structured education programme, unlike their category I colleagues. For any potential category II candidates thinking about the Conjoint Exam - don't hesitate, stop thinking, and start applying! If you are reading FP links and have thought about sitting for this exam, chances are that you are already an experienced and motivated general practitioner, which means that with proper preparation and practice, you will likely be successful in the exam!

If you are still hesitating, think about the following points:

My "unofficial statistics" for Cat. II candidates (who are serious and motivated)

In 2018 there was a 80% pass rate for Category II candidates who were - in my opinion- really motivated and had prepared seriously for the examination (Four out of five passed). There may have been more than five Cat. II candidates I think, but I am referring to those who were serious about the exam and regularly attended the AEC course, the Category II supplementary teaching sessions etc.

All Category II Candidates in the beginning!

In 1987, all the candidates of the first Conjoint Examination (HKCGP/RACGP back then) were Category II candidates, as the college had not provided formal Family Medicine training yet. One of the five candidates who passed the Conjoint Exam was Dr. Chan Hung Chiu, our very friendly Chairman of the Board of Conjoint Examination. So there you go, sit for the examination today and maybe one day you will chair the Board of Conjoint Examination! (Ref.: The HKCFP Conjoint HKCFP/RACGP Fellowship Examination 30th Anniversary Booklet - available on the College website, and a great read for those interested in the history of the College!)

Help from our College, tutors, colleagues and your study buddies

In preparing for the exam there is a lot of help and resources available. Everyone in the College is extremely helpful and encouraging with Category II candidates. The College organises the AEC course and also helps to arrange extra training for Category II candidates. Colleagues who have passed the exam previously can give you advice, provide exam resources (e.g. Practice papers, DVD showing examination skills etc.) and help with OSCE practice. A category II study group with other study buddies who will sit the exam is very helpful - you can support and encourage each other, and practice OSCE cases together.

There is a very useful article "Sharing on the Conjoint Examination" (Figure 1., Family Physician Links Issue 126 August 2014), that was written by Dr Sharon Ho. It is a great source of information, explaining the basics of Family Medicine, and providing advice on how to prepare for the Conjoint Examination. Since it already contains a lot of practical tips on the written exam and OSCE, I am not going to go through all those again, instead I will discuss a few topics that will help you

be successful with the Conjoint Examination.

Study group, AEC, and extra-training for category II candidates

The pre-examination AEC course offered by the College to all candidates. It is vital for Category II candidates to attend this course. By practising a wide range of stations, you would not only enhance your Family Medicine skills and knowledge, but also become more familiar with the format of the OSCE stations, which helps you to be



of the OSCE stations, Fig 1 - A great FP Links article on Conjoint

more confident. There are sessions on Approach to Physical Complaints, Physical Examination, Procedures, Viva Practice and so on.

In addition, with the kind help of the College, we formed a study group for Category II candidates, keeping in touch and sharing advice on our whatsapp group. That was a great source of support and motivation. All Category II candidates are still in this whatsapp group, which is still active, and you would be most welcome to join it. In addition, we had practice sessions with different tutors from the College who had very kindly volunteered to teach us and help us practise OSCE. It was particularly useful to learn from each other's mistake, and comment on each other's performance constructively, which allowed all of us to learn and improve together in a relaxed, friendly and positive environment.

For the OSCE Part of the Examination, it is essential to know the format well, develop a good approach to exam stations and to get used to completing them within the tight time frame (e.g. 8 minutes for a short case) as in the exam. By practising a lot of cases, you eventually get a good feel for what is expected. For example, in one practice case I had a patient that had been diagnosed by a locum doctor in the clinic as having Bell's palsy, when he actually had a stroke for which he was subsequently admitted to hospital. I did great managing his emotions but had not realised that even for a "communication station", you still need to manage the rest (e.g. what happened when he was admitted, what treatment he was started on, looking at the lab results from hospital, checking if blood pressure, lipids are well controlled according to current guidelines etc.), so all I did was calming his emotions during the eight minutes! That would have been a fail in the exam and is a great example of why you need to do a lot of practice stations. You can only develop a good systematic approach and become familiar with what is expected during OSCE stations by practising, so the AEC and the supplementary Category II tutorials are extremely important.

Exam Books/past practice papers/other resources

There is a suggested reading list on College website, which includes Journals, textbooks and Exam Practice Books. However as category II candidates, we are often very busy with our professional and family lives, and it may not be possible to go through all those.

Some candidates feel that Murtagh's General Practice and AFP/CHECK are particularly useful. Other have used OSCE exam practice books designed for similar postgraduate examinations such as the MRCGP. With very limited time to prepare, I had to focus on what I felt was more useful. Personally, I found that past cases from previous years' AEC course (ask College tutors or past candidates for those) were much more useful in preparing for the exam. I felt that they were much focused and relevant for the purpose of passing the exam and that they help you to prepare for the very broad range of stations you will get in the OSCE e.g. management, physical examination, communication skills, medico-legal cases, ethical dilemmas, procedures, current issues, and so on. Do not just read past practice cases, it does not work on its own! As explained above, you need real practice with someone acting as the "patient".

Diploma in Family Medicine

I very highly recommend the DFM course (Figure 2) to those who would like to attempt the Conjoint exam as a Category II Candidate subsequently. The DFM, which I did a year

before sitting for the Conjoint Examination, has helped me a lot with my exam preparation. You will learn all about the basics of family medicine and get a good introduction on how to approach cases in a proper and comprehensive way (Biopsycho-social, ICE, RAPRIOP etc.) Having obtained a Diploma in Family Medicine from another institution, I feel that the HKCFP DFM is much more useful, practical and interesting - one sixth the price of that DFM from "another institution" and twice as good - so 12 times better value!

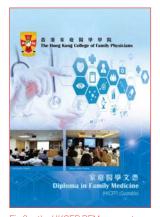


Fig 2 - the HKCFP DFM - a great way to start preparing, for those who want to sit for the Conjoint Examination in the future.

In conclusion, do seriously consider sitting for the Conjoint Examination, which is an achievement that is very satisfying both personally and professionally, and that will help you to reach very high standards of Family Medicine so that you can serve your patients better. Remember that you will receive a lot of help and encouragement from the College, tutors, study-buddies, past successful candidates and so on. Also, think about applying for the DFM if you have not already done so. Wishing you all success in your exams!

You'll Never Walk Alone

Dr. Tam Kwan Wai, Gavin

As a football fan of Manchester United, I use the anthem of rival club Liverpool as the title because this really is the experience I had in the Objective Structured Clinical Examination (OSCE) last year. Even if you are a Category II candidate who is in solo practice and find it difficult to prepare for the clinical exam, you are not fighting alone and will be able to find the way to make it.

Practice makes perfect. Practising is very important in the preparation for OSCE. Trainees in the Hospital Authority form buddy groups and receive training from formal trainers within their clusters, while it is not the case for Category II candidates. As a Category II candidate last year, I was luckier than others who were in solo practice as there were nice senior doctors in my service. They were willing to coach and give me advice in preparing for OSCE. However, it was not feasible for me to request or arrange frequent coaching sessions with them. Therefore, it was important for me to enroll in the Assessment Enhancement Course (AEC) organized by the college.

The course gave me a general idea of the OSCE, covering different modalities of questions that appeared in the exam during different sessions. The course provided adequate opportunities for candidates to practice. Tutors in each group were incredibly helpful in correcting our faults and provided constructive feedback. With practice, we learned how to better control time, how to deal with difficult situations, to improve our skills of history taking and physical examination. Most importantly, the course provided a chance for us to meet other

candidates. In each session, we were randomly assigned into several groups. We were able to learn from the strengths of our groupmates and avoid making the same mistakes via observation and comments by tutors.

One cannot tackle the exam solely by attending AEC sessions of course. As I said, AEC provided us with a chance to meet other candidates. With the assistance of the course coordinator, some of the Category II candidates got to know each other and formed a study group. This really helped us a lot—we became a group of buddies with the same target to practise and fight together. We were most grateful towards our volunteer tutors who sacrificed their rest day during weekends and came to coach us in our practice sessions. In the several months prior to the exam, we learned, we practised, we shared and we laughed. We were there for each other for psychological support and developed a friendship among us. In fact, besides examination materials, we also shared our stories and clinical experience. What we gained was definitely much more than purely examination knowledge.

Finally, I highly recommend candidates of the coming OSCE to enroll in AEC, no matter you are in Category I or II. It will most certainly help you broaden your horizon and learn more from different parties. Not only in terms of exam preparation, but it will also benefit your daily practice. With regular practice and psychological support from fellow candidates, you will be able to overcome the difficulties. You'll never walk alone.

ASSESSMENT ENHANCEMENT COURSE (AEC) FOR FAMILY PHYSICIANS 2019

Organizer: Assessment Enhancement Sub-committee, Board of Education, HKCFP

Tutors : Family Medicine Specialists, Fellows of HKCFP and RACGP

Supervisors : Dr. Chan Chi Wai

Co-ordinator : Dr. Lai Sheung Siu

Objectives: 1. To improve clinical knowledge, problem solving and consultation skills through different workshops

2. To improve physical examination technique and clinic procedural skills through hands-on experience

3. To provide opportunity for inter-professional communication and social network expansion through selfhelp groups

4. To improve time management through simulated examination

Venue: Duke of Windsor Social Service Building and HKAM Jockey Club Building

Date : 5 months' course starting from April 2019

Course Structure: The course will consist of 4 main components:

Seminars
 Workshops

3. Self-help Group Support

4. Mock Exam

Seminars and Workshops will be arranged on Saturday afternoons (2:30 p.m. to 5:30 p.m.)

Accreditation: Up to 15 CME points (Category 4.4) & 5 CPD points (Category 3.15) for the whole course

Members: HK\$3,400 (Whole course)

HK\$950 (Spot admission for each seminar or workshop only)

All cheques payable to "HKCFP Education Ltd"

All Fees received are non-refundable and non-transferable.

Capacity : 50 doctors maximum

Course Fee

Enrolment: Enrolment is now open. Registration form is available at College website:

http://www.hkcfp.org.hk/pages_9_463.html.

Please return the completed application and the cheque to the Secretariat for process. Please call the College Secretariat, Ms. Teresa Liu or Ms. Windy Lau, at 2871 8899 for details. Successful applications will

be informed by email later.

Disclaimer: All cases and answers are suggested by our tutors only. They are not standard answers for examination.

Remarks: Post-AEC training course (optional) will be organized for category 2 candidates who have enrolled in AEC if

there is sufficient enrolment.

Assessment Enhancement Course 2019 Timetable for Workshop

Date	Topics	Venue
13 April 2019 (Sat) 2:30 – 5:30 p.m.	Introduction	Duke of Windsor Social Service Building, Wanchai
25 May 2019 (Sat) 2:30 – 5:30 p.m.	Approach to Physical Complaints	Duke of Windsor Social Service Building, Wanchai
22 June 2019 (Sat) 2:30 – 5:30 p.m.	Proper Physical Examination & Common Clinic Procedures	Duke of Windsor Social Service Building, Wanchai
20 July 2019 (Sat) 2:30 – 5:30 p.m.	Viva Practice: Enhance Interprofessional Communication	Duke of Windsor Social Service Building, Wanchai
17 August 2019 (Sat) 2:30 – 5:30 p.m.	Problem Solving Skills	Duke of Windsor Social Service Building, Wanchai
28 September 2019 (Sat) 2:30 – 6:00 p.m.	Mock Exam	HKAM Jockey Club Building, 99 Wong Chuk Hang Road

- 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.

4 April 2019 Thursday

Silent Killer: Elevated Heart Rate in Hypertensives

Prof. Murray Esler

Adjunct Professor, Department of Medicine, Monash University, Australia

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	Maggie Room, 2/F, Eaton Hotel, 380 Nathan Road, Jordan, Kowloon			
Admission Fee	College Fellow, Full or Associate Members Other Categories of Meml Non-Members	bers	Free (\$50 Enrollment deposit is required) HK\$ 450.00 HK\$ 550.00	
	All fees received are non-refundable and non-transferable.			
Accreditation	CME point HKCFP (Cat. 4.3) CME point MCHK Ip to 2 CPD points (Subject to submission of atisfactory report of Professional Development Log)			
Language	Lecture will be conducted	I in English	1.	

Sponsored by Merck Pharmaceutical (HK) Ltd

Online

Aim

6 April 2019 Saturday

Registration will be first come first served. Please reserve your seat as soon as possible.

Board of Education Interest Group in Mental Health & Psychiatry

Dour a or Lauc	action interest of oup in	i i i cintat i i cat	in a r Sycillati y	
Aim	To form a regular platform for sharing and developing knowledge and skill in the management of mental health			
Theme	Primary Care of People	with Dementia	1	
Speaker	Prof. Kwok Chi Yui, Timothy Professor, Department of Medicine & Therapeutics and School of Public Health, Faculty of Medicine, the Chinese University of Hong Kong			
Coordinator & Chairman	Dr. Chan Suen Ho, Mark The Hong Kong College of Family Physicians			
Time	1:00 p.m 2:00 p.m. 2:00 p.m 3:30 p.m. 3:30 p.m 4:00 p.m.	Lunch Lecture Discussion	(Part A) (Part B)	
Venue	5/F, Duke of Windsor So 15 Hennessy Road, Wan			
Admission Fee	Members Non – members HKAM Registrants		Free HK\$ 300.00 HK\$ 150.00	

All fees received are non-refundable and

2 CME points HKCFP (Cat. 4.3)

2 CPD points HKCFP (Cat. 3.15)

non-transferable.

2 CME points MCHK

Language

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 Coordinator via the College secretariat 2 weeks prior to meeting.

Participants are expected to take an active role in discussion during the workshop. Participants will be awarded CME for attendance in Part A of workshop and CPD for Part B.

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

Sponsored by

Lundbeck Hong Kong Limited

14 April 2019	Sunday

Board of Education Interest Group in Point-of-care Ultrasound (POCUS)

To promote the use of POCUS in primary care in HK

Theme	Introduction/overview on point-of-care ultrasound Hands-on scanning on renal USG			
Speaker	Dr. Chau Ming Tak Specialist in Radiology			
Co-ordinator & Chairman			ns	
Time	2:30pm - 2:45pm 2:45pm - 3:15pm 3:15pm - 3:30pm 3:30pm - 5:00pm	(Part A) Case sharing by Dr.	Thomas Dao	
Venue			ng,	
Registration Fee	Members Non – members All fees received are non-transferable.	non-refundable and	HK\$ 250.00 HK\$ 500.00 Register Online	
Capacity	30		Online	
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CPD points HKCFP (Cat. 3.15) for active 2 CME points MCHK			
Language	Lecture will be condu	cted in English and (Cantonese.	
Registration	_			
Note	groups led by a tutor 5 male volunteers we on scanning part. En for the volunteers. F volunteers, please co	ould be needed for t rollment fee would I or those would like t ontact the Secretari	he hands be waived to be the at staff.	
	Speaker Co-ordinator & Chairman Time Venue Registration Fee Capacity Accreditation Language Registration	Speaker Dr. Chau Ming Tak Specialist in Radiolog Co-ordinator & Chairman Time Dr. Dao Man Chi, Tho The Hong Kong Colle 2:30pm - 2:45pm 2:45pm - 3:15pm 3:15pm - 3:30pm 3:30pm - 5:00pm Venue 8/F, Duke of Windsor 15 Hennessy Road, W Registration Fee Non - members All fees received are in non-transferable. Capacity 30 Accreditation 2 CME points HKCFP 2 CPD points HKCFP 2 CME points MCHK Language Registration Registration will be and the please reserve your Note Hands on scanning will groups led by a tutor 5 male volunteers woon scanning part. En for the volunteers, please compared to the property of the points of the please compared to the property of the points of the please compared to th	Hands-on scanning on renal USG Dr. Chau Ming Tak Specialist in Radiology Dr. Dao Man Chi, Thomas The Hong Kong College of Family Physicia 2:30pm - 2:45pm Registration 2:45pm - 3:15pm Lecture by Dr. Chau (Part A) 3:15pm - 3:30pm Case sharing by Dr. 3:30pm - 5:00pm Hands on scanning (Part B) Venue 8/F, Duke of Windsor Social Service Buildi 15 Hennessy Road, Wanchai, Hong Kong Registration Fee Members Non – members All fees received are non-refundable and non-transferable. Capacity 30 Accreditation 2 CME points HKCFP (Cat. 4.3) 2 CPD points HKCFP (Cat. 3.15) for active 2 CME points MCHK Language Registration will be first come first serve Please reserve your seat as soon as poss	

Part A of workshop and CPD for Part B.

Accreditation

Registration

26 April 2019 Friday		Admission Fee	College Fellow, Full or Associate Members	Free (\$50 Enrollment deposit is required)		
Perspectives on New Basal Insulin use in the real world Dr. Tsang Man Wo Specialist in Endocrinology, Metabolism & Diabetes				Other Categories of Members Non-Members All fees received are non-refunda	HK\$ 550.00 HK\$ 650.00	
Chairman	Dr. Chao Vai Kiong, Da The Hong Kong Colleg	vid	Accreditation	non-transferable. 1 CME point HKCFP (Cat. 4.3) 1 CME point MCHK		
Time	7:00 pm – 7:30 pm 7:30 pm – 9:00 pm 9:00 pm – 9:30 pm	Registration Lecture and Discussion Dinner	Language	Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Lecture will be conducted in English.		
Venue	Lei Garden, Shop 8, 5/ 418 Kwun Tong Road, I	F, APM Millennium City 5, Kwun Tong	Registration	Registration will be first come fi Please reserve your seat as soo		

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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.

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Date	29 March 2019 (Friday)
Time	2:30 p.m 3:30 p.m.
Topic	"Dermatology Case Studies (Part 1)" by Dr. Lam Yuk Keung Register Online
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.

April's session:

Date	26 April 2019 (Friday)		
Time	2:30 p.m 3:30 p.m.		
Topic	"Dermatology Case Studies (Part 2)" by Dr. Lam Yuk Keung Register Online		
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
27 April 2019 2:15 – 4:15 pm	Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, 118 Shatin Pass Road, Wong Tai Sin, Kowloon	Children and adolescent mental health challenges in primary care Dr. LAM Wing Wo Private family doctor	Ms. Clara Tsang Tel: 2354 2440

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Structured Education Programmes

Free to members

HKCFP 2 CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
3 April 2019 (We	d)		
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Principle of Professional Ethics, Red Book Dr. Leung Kwan Wai, Amas & Dr. Cheung Yuen Yan, Kathy	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Ethical Dilemmas Case Dr. Wong Kar Shing	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Auditorium, G/F, Hospital Main Block, Tseung Kwan O Hospital	International Classification of Primary Care (ICPC) and HKTCC Concepts Dr. Wong Sze Nga, Cathy & Dr. Fung Hoi Tik, Heidi	Ms Polly Tai Tel: 3949 3430
5:00 – 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Nurse-led Clinic Review: RAMP Dr. Tsang Pui Lim	Ms. Cherry Wong Tel: 2589 2337
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Private Clinic Setting Private Doctor	Ms. Carmen Kwon Tel: 3505 4371
4 April 2019 (Thu	u)		
4:30 – 6:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Applying the Principles of FM for Patients with Terminal Illness/ Debilitating Diseases Dr. Chan Yin Yue & Dr. Ho Chung Yu	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Clinical Psychology: Screening and Assessment of PTSD/ Acute Stress Reaction Dr. Leung Ka Fai	Ms W L Kwong Tel: 2595 6941
10 April 2019 (W	ed)		
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Introduction to Epidemiology and Importance to Public Health Prof. Shelly Tse	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Clinical Approach: Complaints of Hair, Nail and Mucosal Membrane Dr. Fan Siu Wai	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Auditorium, G/F, Hospital Main Block, Tseung Kwan O Hospital	Preventive Aspect in Musculoskeletal Medicine Dr. Lee Tsz Ching, Yolanda & Dr. Lai Ho Yeung, Kelvin	Ms Polly Tai Tel: 3949 3430
5:00 - 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Management of Electrolytes Disturbance in Primary Care Dr. Desmond Yap	Ms Cherry Wong Tel: 2589 2339
11 April 2019 (Th	nu)		
4:30 – 6:00 p.m.	F2029, 2/F, Special Block, Tuen Mun Hospital	Common Dental/ Orofacial Problems Encountered in Primary Care Dr. Leung Lai Man & Dr. Cheuk Tat Sang	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Emergency Management of Common Home Accidents Dr. Yuen Man Ki, Vivian	Ms W L Kwong Tel: 2595 6941
1 <mark>7 April 2019 (W</mark>	ed)		
2:00 – 5:00 p.m.	Room 7, 8/F, Yau Ma Tei GOPC	How to Set Up Our Emergency Equipment in Primary Care Dr. Hui Alice Sau Wei & Dr. Fan Yuen Shan, Patricia	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Applying the Principles of FM in Different Life Stages: The Family Life Cycle Dr. Tsang Yee Wing	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Auditorium, G/F, Hospital Main Block, Tseung Kwan O Hospital	Update on Management of Asthma Dr. Ma Yuen Ying, Tammy & Dr. Chen Tsz Ting	Ms Polly Tai Tel: 3949 3430
5:00 – 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Knowing the Professional Bodies in Medical Ethics: MPS and Medical Council Dr. Dora Chiu	Ms. Cherry Wong Tel: 2589 2337
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Grief Reaction Dr. Leung Yuen Yee, Yuki/ Dr. Kong Ka Ming, Andrew	Ms. Carmen Kwon Tel: 3505 4371

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18 April 2019 (T	'hu)		
4:30 – 6:00 p.m.	F2029, 2/F, Special Block, Tuen Mun Hospital	Update Management of Rheumatologically Disease - SLE, RA, Gout and Others Dr. Li Shun Hoi & Dr. Kum Chung Hang	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Workplace Violence Dr. Locke Ka Yung, Michael	Ms W L Kwong Tel: 2595 6941
24 April 19 (We	d)		
2:00 – 5:00 p.m.	Conference Room 3, G/F, Block M, Queen Elizabeth Hospital	Approach to Patient with Suicidal Risk Dr. Lai Ka Ho & Dr. Chan Fung Yuen Consultation Enhancement (Video Consultation) Dr. Chan Kiu Pak, Kilpatrick	Ms. Emily Lau Tel: 3506 8610
2:30 – 5:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Pretravel Consultation Dr. Chang Ting Ting	Ms. Eliza Chan Tel: 2468 6813
2:30 – 5:30 p.m.	Auditorium, G/F, Hospital Main Block, Tseung Kwan O Hospital	Community Resource : Social Worker Dr. Chau Yiu Shing KEC DM Case Conference Ms. Maisy Mok	Ms Polly Tai Tel: 3949 3430
5:00 – 7:00 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital	Managing Mild Cognitive Impairment & Dementia Dr. Minru Li	Ms. Cherry Wong Tel: 2589 2337
5:30 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	IOD Cases and Sick Leave Issue Encountered in GP Setting Dr. Joan Fok	Ms. Carmen Kwon Tel: 3505 4371
25 April 2019 (1	hu)		
4:30 – 6:00 p.m.	SB1034, 1/F, Special Block, Tuen Mun Hospital	Health Assessment for Runners & Exercise Prescription Dr. Ng Ngai Mui & Dr. Hung Chi Bun	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2 nd Floor, Pamela Youde Nethersole Eastern Hospital	Consultation Skill and Assessment: Video Review Dr. Chan Yuen Ling, Carrie	Ms W L Kwong Tel: 2595 6941
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COLLEGE CALENDAR

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
17 2:30 - 4:30 p.m. End-of-life Certificate Course	18	19	2:15 – 7:30 p.m. Structured Education Programme	21 2:15 – 7:00 p.m. Structured Education Programme 8:30 p.m. Council Meeting	22	2:00 – 4:00 p.m. Interest Group in Medical Humanities
24	25	26	2:15 – 7:30 p.m. Structured Education Programme	2:15 – 7:00 p.m. Structured Education Programme	29 2:30 - 3:30 p.m. Video Session 6:30 p.m. DFM Standardization Workshop	30 2:00 – 6:00 p.m. Advanced Primary Care Life Support (APCLS) Training and Examination Workshop 2019
2:00 – 6:00 p.m. Advanced Primary Care Life Support (APCLS) Training and Examination Workshop 2019	1 Apr	2	2:15 – 7:30 p.m. Structured Education Programme	4 1:30 - 3:30 p.m. CME Lecture 2:15 - 7:00 p.m. Structured Education Programme 8:30 p.m. Specialty Board Meeting	5	6 2:00 – 4:00 p.m. Interest Group in Mental Health
7 2:30 – 4:30 p.m. Certificate Course on End-of-life Care for Primary Care Doctors	8	9	2:15 – 7:30 p.m. Structured Education Programme	11 2:15 – 7:00 p.m. Structured Education Programme 7:00 – 9:00 p.m. Exit Exam Preparatory Workshop	12	13 2:30 – 5:30 p.m. Assessment Enhancement Coursel
14 2:30 – 5:00 p.m. Interest Group in Point-of-care Ultrasound	15	16 8:30 p.m. Council Meeting	17 2:15 – 7:30 p.m. Structured Education Programme	18 2:15 – 7:00 p.m. Structured Education Programme	19	20
21	22	23	2:15 – 7:30 p.m. Structured Education Programme	25 2:15 – 7:00 p.m. Structured Education Programme	26 2:30 – 3:30 p.m. Video Session 7:00 – 9:30 p.m. CME Dinner Lecture	27 2:30 - 5:00 p.m. DFM Written Examination

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Dr. David Cheng, Dr. Fok Peter Anthony, Dr. Cheuk Christina, Dr. Tam John Hugh and Dr. Ken Ho

Front row (left to right): Dr. Heidi Fung, Dr. Wendy Tsui, Dr. Catherine Ng, Dr. Anita Fan and Dr. Natalie Siu

Red : Education Programmes by Board of Education
Green : Community & Structured Education Programmes

Purple : College Activities

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