

Message from the President

March has been a busy month for the College. The Cross Strait Family Medicine Conference and WONCA Asia Pacific Regional Conference took place simultaneously in Taipei in early March.



From left to right: Dr. Gene Tsoi, Dr. Angus Chan, Dr. Donald Li and Dr. Lau Ho Lim

On the WONCA side, Dr. Donald Li was the Plenary speaker on the topic "Another Service to Be Provided by Family Doctors – When Doctors Voice Advocacy: A Strategy for Non-Communicable Disease Control". The Symposium on "Enhanced Management of Type 2 Diabetes in Primary Care: Innovations in Models of Care" was provided by Prof Doris Young and Dr. Fu Sau Nga. The Symposium on "Effectiveness of a Large Community-based Patient Empowerment Program for Chinese Patients with Diabetes Mellitus" was given by Dr. William Wong. Oral Presentations were delivered by Dr. Chiang Lap Kin, Dr. Catherine Chen and Dr. Cheung Sze Man. There were numerous poster presentations by Hong Kong. Dr. Chiang Lap Kin was one of the awardees of the Taiwan Family Medicine Research Award, 2015. Well done Ah Chiang!



Dr. Chiang Lap Kin receiving the Taiwan Family Medicine Research Award

(Continued on page 2)

THE HONG KONG
COLLEGE OF
FAMILY PHYSICIANS



Family Physicians Links

ISSUE 134
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Message from the President



Dr. Angus Chan's Plenary Speech in the Cross-straits Conference - 香港家庭醫師繼續教育與終身學習的發展與挑戰

On the Cross Strait Conference side, Dr. William Wong spoke on 亞洲太平洋地區基層醫療研究挑戰 and I delivered the plenary speech on 香港家庭醫師繼續教育與終身學習的發展與挑戰. Thank you to Dr. Mark Chan as my moderator who gave me the adrenaline pump to speak in Mandarin and also to Miss Erica So as my last minute Mandarin tutor. Overall the Hong Kong delegates had a strong presence and I congratulate everyone for their contribution.

I must stress the importance of CME/ CPD as a lifelong commitment of all primary care doctors. At the moment, not all Hong Kong doctors require mandatory CME activities and our overseas counterparts find it difficult to realise this. The exponential increase in medical

knowledge will dwarf the amount we learnt years ago. I had quoted an example regarding gout during my talk in Taipei. Allopurinol is one of the most common long term medications we prescribe for gout prophylaxis. However it is also one of the most common drugs that caused Stevens-Johnson Syndrome which can be life threatening. Back in 2008, a strong association between HLA-B 5801 allele and allopurinol-induced Stevens-Johnson Syndrome in Thai and Han populations was suggested. This information took a few years before it filtered through to primary care doctors in Hong Kong at CME activities in 2013. If one prescribes allopurinol without checking the HLA- B 5801 status, any cutaneous manifestation will likely end up in a medical legal issue!

Prof Dame Sally Davies, the Chief Medical Officer of England was invited by the Hong Kong Academy of Medicine and the Department of Health to speak on "The Inconvenient Truth- Antimicrobial Resistance (AMR) UK Action and the Keys to Global Success. The truth is there is no new class of antibiotics discovered since 1987. The other horrible truth is that by 2050 AMR will happen to most microbes. I was involved in the roundtable panel discussion with Prof Davies and the prominent Microbiologists in Hong Kong. Primary Care doctors are under enormous pressure from patients to prescribe antibiotics as the magic pill to cure all diseases. We are at the forefront to fight the AMR battle and I welcome the Department of Health to organise a team approach in issuing appropriate and responsible guidelines.

"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 April 2015 to 14th May 2015, Dr. Lorna Ng and Dr. Ngan Po Lun will be the Council Members-On-Duty. Please feel free to make use of this channel to voice your doubts, concerns, queries, and comments on anything related to our College and Family Medicine. You can reach us by contacting our College Secretariat by phone: 2528 6618, by fax: 2866 0616, or by email: 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. Lorna Ng



Dr. Ngan Po Lun

Membership Committee News

The Membership Committee approved, on recommendation of the Chairlady of the Membership Committee, the following applications for membership in **February - March 2015** :

From Associate Membership to Fellowship

Dr Ki Chi Wing, Samuel
Dr Wan Pui Chu, Christina

紀智榮
溫佩珠

Associate membership (New Application)

Dr So Ka Wing

蘇家榮

Internal Affairs Committee News

The 28th Fellowship Conferment Ceremony and the 26th Dr. Sun Yat Sen Oration

Dear Colleagues,

The College is holding **"The 28th Fellowship Conferment Ceremony and the 26th Dr. Sun Yat Sen Oration"** on **31st May 2015 (Sunday)** at the **Hong Kong Academy of Medicine Jockey Club Building**.

The successful candidates of Conjoint Examination would be conferred Fellowships, and the successful candidates of Diploma in Family Medicine and the Exit Examination would be granted certificates. In this very important occasion, **Dr. Donald K. T. LI, President of the Hong Kong Academy of Medicine**, would deliver the 26th Dr. Sun Yat Sen Oration to the audience.

All Fellows*, members and their spouses are cordially invited to attend the Conferment Ceremony and the Oration. The details are:

Events : (i) **The 28th Fellowship Conferment Ceremony**

(ii) **The 26th Dr. Sun Yat Sen Oration by Dr. Donald K. T. LI**

Venue : 1/F, Run Run Shaw Hall, Hong Kong Academy of Medicine Jockey Club Building,
99 Wong Chuk Hang Road, Aberdeen, Hong Kong

Date : 31st May 2015 (Sunday)

Time : 4:30 p.m. – Reception with **light refreshment**

5:30 p.m. – Ceremony

Remarks : 1 CME (Category 4.3)

This activity is free of charge for our College Fellows, members and their spouses.

*All College Fellows are welcome to bring their Fellowship gowns for the Conferment Ceremony.

Please mark your diaries and we look forward to seeing you soon.

Thank you!

Dr. David CHAO

Chairman, Internal Affairs Committee

Classified Advertisement

Position Vacants

Full & Part time positions for GPs, Specialists and FM trainees (basic & higher) at established & FM training accredited multidisciplinary group practice along MTR lines. Call Miss Chan 92126654.

Well established, International Accredited Medical Practice requires: General Practitioner with an interest in nutritional medicine

Interested parties please email CV with contact details to linda@otandp.com or ring 852-28662270 for further information.

URGENTLY NEEDED

GP for TST practice.

REGULAR working hours, 5 1/2 day work week. Sun & PH off.

PART/FULL TIME, early **PARTNERSHIP** considered.

Call Christine on 98192335, CV to drsjevly@gmail.com

Invites applicants for full time/part time position in Evangel Hospital and general outpatient clinics in Kowloon.

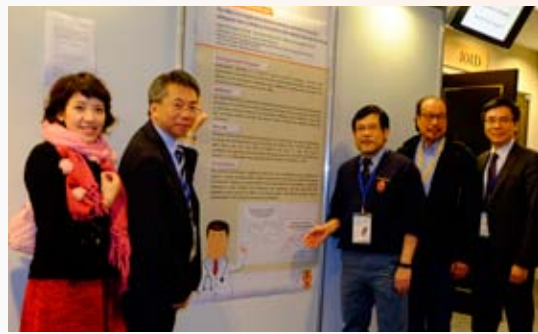
Please send your C.V. and enquiry to cplusclinic@gmail.com
Dr. Billy Chui.

WONCA Taipei 2015

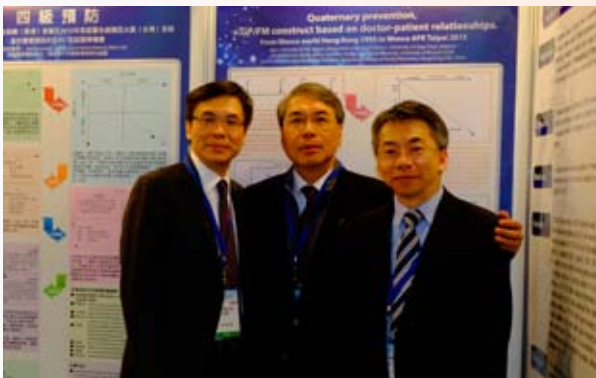
HKCFP delegation in the Cross-straits / WONCA APR Conference 2015



A group photo with (from left to right) Dr. Cecilia Cheung, Dr. Michelle Wong, Dr. Li Yim Chu, Dr. King Chan, Dr. Donald Li, Dr. Angus Chan, Prof. Doris Young, Dr. Lau Ho Lim, Dr. Liang Jun and Dr. Catherine Chen



(From left to right) Dr. Dana Lo, Dr. Angus Chan, Dr. Mark Chan, Dr. John Chung and Dr. Lau Ho Lim



Dr. Lau Ho Lim, Dr. Gene Tsoi and Dr. Angus Chan (from left to right)



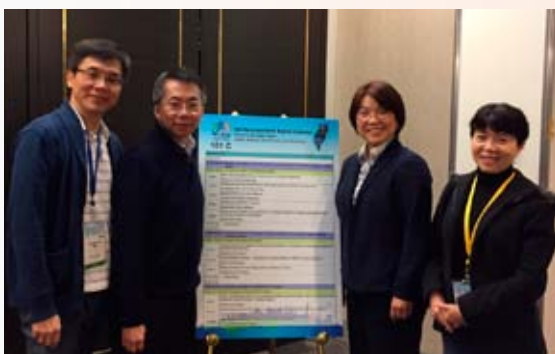
Dr. Li Yim Chu, Dr. Catherine Chen and Dr. King Chan (from left to right)



Dinner gathering with (back row) Dr. Chiang Lap Kin, Dr. Cecilia Cheung and Dr. Chan Laam (front row) Dr. Li Yim Chu, Dr. Catherine Chen, Dr. King Chan, Dr. Gene Tsoi, Dr. Ng Yeung Shing, Dr. Chan Ka Ho and Dr. Liang Jun



Dr. Jenny Wang, Dr. Eva Au, Dr. Dana Lo and Dr. Welchie Ko (from left to right)



Dr. Lau Ho Lim, Dr. Angus Chan, Dr. Catherine Chen and Dr. Chan Laam (from left to right)



Dr. Angus Chan (left) and Dr. Lau Ho Lim (right)



Dr. John Chung (left) and Dr. Lau Ho Lim (right)



Dr. William Wong's Plenary Speech in the Cross-straits Conference on 家庭(全科)醫師研究的發展與挑戰



Delegates in the Gala Dinner



Opening Ceremony of the Cross Straits Conference



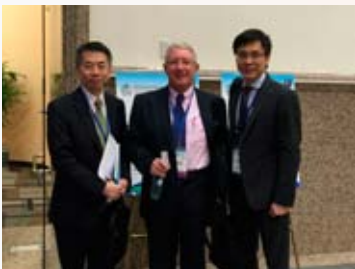
Opening Ceremony of the WONCA APR Conference



Our Past President Dr. Gene Tsoi and our Honorary Fellow Prof. Chris van Weel were chairing the Workshop of WONCA Working Party on Research – Primary Health Care Policy Implementation



Our President Dr. Angus Chan and Vice President Dr. Lau Ho Lim met RACGP President Dr. Frank Jones in the WONCA APR Council Meeting



Our President Dr. Angus Chan and Vice President Dr. Lau Ho Lim met WONCA CEO Dr. Garth Manning in the WONCA APR Council Meeting



Pipa Performance in the Gala Dinner



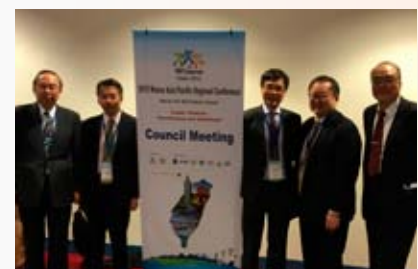
Prof. Michael Kidd, President WONCA, was delivering the Keynote speech on Family Medicine and WONCA New Horizons and Challenges



Dr. Angus Chan's Q&A section, with Dr. Mark Chan being the moderator



Souvenir exchange with the President of the Taiwan Association of Family Medicine Prof. Lee Meng Chih



The Vice Chairman of the Organising Committee Dr. Tsai Shih-Tzu, our President Dr. Angus Chan, Vice President Dr. Lau Ho Lim, Censor Dr. Donald Li, and the President of TAFM Dr. Lee Meng Chih (from left to right)



WONCA APR Council Meeting

Diploma in Family Medicine (HKCFP) FINAL Announcement

The Board is pleased to announce that the Diploma Course in Family Medicine (DFM) organized by The Hong Kong College of Family Physicians will commence in July 2015.

The course consists of FIVE modules. Modules I & II will be delivered by Local Distance Learning. Modules III, IV & V consist of lectures, seminars, tutorials, workshops and clinical attachments. The whole course requires ONE year of part-time studies.

Details of the course are as follows:

1. Objectives:

- i) To provide knowledgeable, pragmatic and structured teaching in Family Medicine for medical practitioners.
- ii) To encourage professional development of practising medical practitioners and to provide an intermediate step to fellowship qualifications in Family Medicine.
- iii) To improve standards and quality in the practice of Family Medicine.

2. *Syllabus:

The course consists of FIVE compulsory modules. Doctors graduated from the course are expected to have acquired:

- i) Current concepts about nature of Family Medicine.
- ii) Knowledge and skills in consultation, counselling and problem solving.
- iii) Knowledge and skills in common practice procedures and emergency care required for good quality family practice.
- iv) Understandings towards the role of Family Doctors as gatekeepers of the health-care system and in providing cost-effective primary care to the community.

Module I – Principles of Family Medicine (Distance Learning)

Aims:	1. Learn concepts of Family Medicine 2. Understand the role and scope of a Family Doctor
Contents:	Definition of Family Physicians, Family Physicians' Functions, Core Values of Family Medicine, Consultation, Future of Family Medicine

Module II – Common Problems in Family Medicine (Distance Learning)

Aims:	1. Enhance consultation, communication and problem solving skills 2. Gain knowledge in common and chronic diseases in Family Medicine
Contents:	Selected topics from Clinical Psychology, Diabetes Mellitus, Low Back Pain, COPD, Atopic Eczema, Elbow Mass, Facial Rashes, Health Psychology, Allergic Rhinitis, Urethritis, Urine Incontinence, etc.

Module III - Essentials of Family Medicine (Structured Seminars and Tutorials)

Aims:	1. Strengthen knowledge in Family Medicine 2. Understand the potential growth of Family Medicine 3. Develop research and teaching skills in Family Medicine
Contents:	Practice Management, Care of Elderly & Chronic Illnesses, Anticipatory Care, Clinical Audit & Quality Assurance, Introduction to Family Therapy, Research & Teaching in Family Medicine, Evidence Based Medicine and Critical Appraisal

Module IV - Clinical Updates (Updates and Clinical Attachment)

Aims:	Acquire in-depth knowledge and practical skills in selected specialized areas including Medicine, Surgery, Geriatrics, ENT, Orthopaedics & Traumatology, Accident & Emergency Medicine, and Infectious Diseases
Contents:	<u>THREE</u> Update seminars and <u>ONE</u> clinical attachment on selected specialties including Medicine, Surgery, Geriatrics, ENT, Orthopaedics & Traumatology, Accident & Emergency Medicine, and Infectious Diseases (subject to availability)

Module V - Practical Family Medicine (Practical Workshops)

Aims:	Enhance practical and communication skills in Family Medicine by Practical Workshops in selected areas including CPR, Consultation Skills, Counselling Skills, Women's Health, Orthopaedic Injection and Musculo-Skeletal Medicine
Contents:	<u>4 compulsory and 2 elective</u> Practical Workshops in selected areas including CPR, Consultation Skills, Counselling Skills, Women's Health, Orthopaedic Injection and Musculo-Skeletal Medicine

Module III & V will be scheduled in Saturday and Sunday afternoons.

3. Articulations:

The Course allows (up to a fixed maximum percentage of the Course units) articulations or cross recognition of previous Family Medicine training programmes that provide learning units equivalent to that of the above syllabus. Participants who wish to apply for such articulations have to submit evidence of relevant training together with their application. The granting of articulations is however, completely at the discretion and decision of the Board of DFM.

4. *Schedule:

The whole course requires ONE year of part-time studies.

June to September 2015	Module I
November 2015 to January 2016	Module II
July 2015 to May 2016	Module III, IV & V
May 2016	Final Examination

5. Admission Requirement:

Medical Practitioner with Bachelor's degree in Medicine

6. Teaching Staff:

A panel of experienced academic medical professionals in Family Medicine, hospital specialists and experienced Fellows or Trainers of HKCFP will be invited to teach in the programme.

7. Teaching Medium:

English
(Cantonese may be used in some seminars, workshops and clinical attachments)

8. Course Fees:

Whole course:
HK\$30,000 for members of HKCFP
HK\$60,000 for non-members

(A discount of HK\$3,000 for early birds who apply on/before May 17, 2015)

Individual Module:	Members	Non-members
Module I (Distance Learning – Principles of Family Medicine)	\$4,000	\$8,000
Module II (Distance Learning – Common Problems in Family Medicine)	\$4,000	\$8,000
Module III (Structured Lectures & Seminars)	\$3,000	\$6,000
Module IV (Updates & Clinical Attachment)	\$3,200	\$6,400
Module V (Practical Workshops)	\$5,000	\$10,000
Examination	\$9,000	\$18,000
Administration Fee	\$4,000	\$8,000

All fees must be paid upon application and before commencement of the course. Fees paid are NON-TRANSFERABLE and NON-REFUNDABLE.

9. Awards/Credits:

- A Diploma in Family Medicine issued by HKCFP will be awarded to candidates who have satisfied all the requirements and have passed all the required assessment and the Final Examination.
- The Diploma is a **Quotable Qualification** of The Medical Council of Hong Kong.
- Up to 50 CME and 10 CPD credit points will also be awarded to candidates at satisfactory completion of the Course by the QA & A Committee of HKCFP.

10. Application Procedure:

Application is now open

A completed application form must be returned to The Hong Kong College of Family Physicians with the following:

- Photocopy of the current Annual Practising Certificate;
- A recent photo of the applicant (passport size);
- A signed "Disclaimer of Liability";
- An application fee of HK\$200 by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-refundable;
- A Course Fee of HK\$30,000 (or HK\$60,000 if non-member) by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-refundable unless the application is unsuccessful.

Every successful applicant will be notified by an official letter of admission.

Information and application forms are obtainable at the College or can be downloaded at the College website (<http://www.hkcfp.org.hk>). Members who were not admitted in the course in 2014 have to send in their application again if they want to study the course this year. Please contact the College secretariat, Mr. John Lee at 2528 6618 for any queries.

11. Application Deadline: June 21, 2015

Comments From Former DFM Graduates

- The Content is useful in daily practice. I can have hands-on practical skills. I can polish my communication skills during the lectures & workshops.
- I can understand the role of Family Physicians as gatekeepers of health-care system and better know about their role in the society. I also acquire the skills on critical appraisal.
- There are sessions of clinical updates for updating knowledge. Module I, II & III could help improving my knowledge. Module I, II & III could improve my understanding of Family Medicine. Sessions in consultation are invaluable in improving my communication skills.

Dr. Au Chi Lap
Chairman
The Board of DFM

*Course syllabus and schedule may be subject to change without prior notification

#Cantonese and English will be used as the language for teaching and examination.



CPR Training Workshop



Women's Health Workshop



Orthopaedic Injection Workshop



Musculoskeletal Workshop

Certificate Course in Family Medicine (HKCFP) FINAL Announcement

The Board is pleased to announce that the Certificate Course in Family Medicine (CFM) organized by The Hong Kong College of Family Physicians will commence in July 2015.

The course consists of **THREE** Segments. Segment I and Segment II will be delivered by Local Distance Learning. Segment III consists of workshops. The whole course requires FIVE months of part-time studies.

Details of the course are as follows:

1. Objectives:

- i) To provide knowledgeable, pragmatic and structured teaching in Family Medicine for medical practitioners
- ii) To encourage professional development of practicing medical practitioners and to provide an intermediate step to attain diploma qualifications in Family Medicine
- iii) To improve standards and quality in the practice of Family Medicine

2. *Syllabus:

The course consists of **THREE** compulsory segments. Doctors graduated from the course are expected to have acquired:

- i) Current concepts about nature of Family Medicine
- ii) Knowledge and skills in consultation
- iii) Knowledge and skills in some common practice procedures required in family practice
- iv) Understanding towards the role of Family Doctors as gatekeepers of the health-care system and in providing cost-effective primary care to the community

Segment I – Principles of Family Medicine (Distance Learning)

Aims:	1. Learn concepts of Family Medicine 2. Understand the role and scope of a Family Doctor
Contents:	Definition of Family Physicians, Family Physicians' Functions, Core Values of Family Medicine, Consultation, Future of Family Medicine

Segment II- Common Problems in Family Medicine (Distance Learning)

Aims:	1. Enhance consultation, communication and problem solving skills 2. Gain knowledge in common and chronic diseases in Family Medicine
Contents:	Selected topics from Clinical Psychology, Diabetes Mellitus, Low Back Pain, COPD, Atopic Eczema, Elbow Mass, Facial Rashes, Health Psychology, Allergic Rhinitis, Urethritis, Urine Incontinence, etc. (Subject to selection)

Segment III - Practical Family Medicine (Practical Workshops)

Aims:	Enhance practical skills and consultation skills in Family Medicine by Practical Workshops in some selected areas
Contents:	Orthopaedic Injection and Consultation Skills

3. *Schedule:

The whole course requires FOUR months of part-time studies.

July to October 2015	Segment I & II
1-day workshop in October 2015	Segment III

4. Admission Requirement:

Medical Practitioner with Bachelor's degree in Medicine

5. Teaching Staff:

A panel of experienced academic medical professionals in Family Medicine, hospital specialists and experienced Fellows and Trainers of HKCFP will be invited to teach in the programme.

6. Teaching Medium:

English

7. Course Fees:

HK\$9,000 for members of HKCFP
HK\$18,000 for non-members

All fees must be paid upon application and before commencement of the course. Fees paid are NON-TRANSFERABLE and NON-REFUNDABLE.

8. Awards/ Credits:

- i) A Certificate in Family Medicine issued by HKCFP will be awarded to candidates who have satisfied all the requirements.
- ii) 10 CME credit points will also be awarded to candidates at satisfactory completion of the Course by the QA & A Committee of HKCFP.

9. Application Procedures:

Application is now open

A completed application form must be returned to The Hong Kong College of Family Physicians with the following:

- i) Photocopy of the current Annual Practising Certificate;
- ii) A recent photo of the applicant (passport size);
- iii) A signed "Disclaimer of Liability";
- iv) An application fee of HK\$200 by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-refundable;
- v) A Course Fee of HK\$9,000 (or HK\$18,000 if non-member) by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-refundable unless the application is unsuccessful.

Every successful applicant will be notified by an official letter of admission.

Information and application forms are obtainable at the College or can be downloaded at the College Website (<http://www.hkcfp.org.hk>).

Please contact the College secretariat, Mr. John Lee at 2528 6618 for any queries.

10. Application Deadline: June 21, 2015

Dr. Au Chi Lap
Chairman, The Board of DFM

Enhancing the practice of primary care physicians as our goal
to serve the medical profession and the Society

A Quotable Qualification by
The Hong Kong Medical Council

Postgraduate Diploma in Diagnosis and Therapeutics in Internal Medicine

(PDipIntMed&Therapeutics)

醫學內科診斷及治療深造文憑



Calling for Enrolment in September 2015

PROGRAM FEES

Composition fee for the 2-year program
is HK\$23,000 (subject to approval)

ADMISSION REQUIREMENTS

Holder of a primary medical degree
with post registration experience of
no less than 12 months

DEADLINE OF APPLICATION

31 August 2015

To submit an application:

On-line: <http://www.medic.hku.hk/postdip.htm>

VENUE

William MW Mong Block
Faculty of Medicine Building
21 Sassoon Road
Pok Fu Lam, Hong Kong

ORGANIZER

Department of Medicine
The University of Hong Kong
Queen Mary Hospital, Hong Kong



LI KA SHING FACULTY OF MEDICINE
THE UNIVERSITY OF HONG KONG

香港大學李嘉誠醫學院

Reflection from my Taiwan WONCA trip

Dr. Dana Lo, Specialist in Family Medicine
Senior Medical Officer, University Health Service, The Hong Kong Polytechnic University

This is the second time for me to attend the WONCA conference since the 2013 World WONCA held in Prague. As I have special interest in counseling and undergone post-graduate training, nearly all my research and presentation works focus on mental health topics in recent years. My poster presentation this time is *“Application of Narrative Therapy by a Family Physician in Peer Counseling to Prevent Burnout Among Medical Professionals”*. In the 1980s Michael White from Australia and David Epston from New Zealand developed a collaborative work called Narrative Therapy (NT), which involves ways of understanding the stories of people’s lives, and ways of re-authoring these stories in collaboration between the therapist and the client, with a significant conceptual implication of Post-modernism. NT as a post-modern approach in counseling, is less commonly encountered by medical doctors but I believe that some of the conceptual theory and skills share similar ground with some core concepts and skills of family medicine, such as nonjudgmental attitude and some questioning skills. With respect to counseling, I incline to say that there is no reality most of the time, as reality is often socially constructed, which is the key concept of post-modernism. This is why I attempt to apply some skills in NT in my practice to explore the feasibility of its application.



In front of the main entrance of the Taipei International Convention Center, TICC, the WONCA conference venue



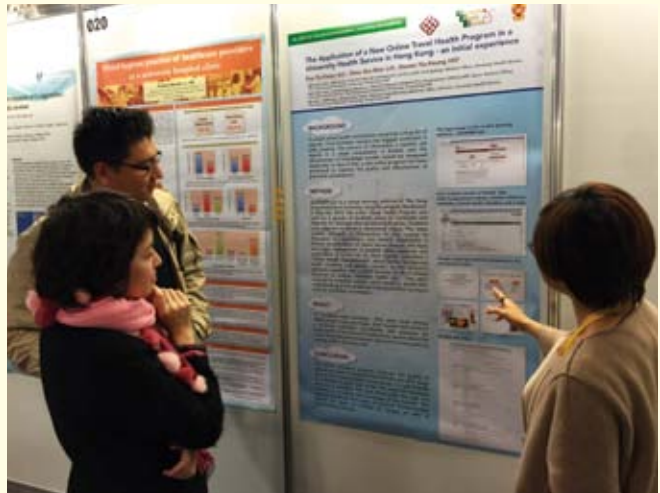
My poster presentation this time is *“Application of Narrative Therapy by a Family Physician in Peer Counseling to Prevent Burnout Among Medical Professionals”*

But for most medical doctors, Cognitive Behavioral Therapy (CBT) is undoubtedly the most popular and familiar approach for mental health counseling. Therefore I attended a WONCA workshop on *“Treatment of Depression in Primary Care”*, by Dr. Enda Murphy, a highly respected Cognitive Behavioral Therapist and an experienced trainer in the field, from the Irish College of General Practitioners. The WHO recognizes depression as the second largest health concern in the world today, with 80% of people who experience depression or anxiety having their GP as their ONLY health resource. Therefore, Dr. Murphy highlighted that GPs must have

practical psychotherapeutic skills, which can be used in a busy clinical setting. He introduced the concept of the plastic brain, which refers to the ability of the brain to expand or shrink the number of connections between neurons. It is this ability that creates the “plasticity” or capacity to change, including changing our thoughts, emotions and behaviors. Understanding this concept is the real key to understanding brain development, the effects of alcohol and drugs on the latter, and in particular mental health issues and any therapy used to deal with such. He mentioned that there is always an internal dialogue between the logical brain and the emotional brain, with the formation

of wisdom in good balance. Depression with a “little d” is a common simple human emotion felt by all and usually lasts from hours to days, while Depression with a “big D” is called Major Depression, and is an illness with a classical combination of physical and psychological symptoms affecting about 15% of the community at some time in their lives. His analogy of Feelings is to weather as Mood is to climate is clear and concise. Dr. Murphy believes that successful treatment of depression depends on a holistic combination of lifestyle changes, empathy, pharmacotherapy and CBT. It will then be followed by self healing and finally results in health. He believes that this package of care is best delivered at the primary care level. Although personally I think that CBT belongs to Modernism, and has its own limitation sometimes, this workshop gives me encouragement in continuing my training in counseling. Committing myself in a master course in counseling is not a simple task, especially when I have to write term papers of a few thousand words each and do case presentation every 3 months, on top of my heavy clinical and administrative duties. However, the joy and satisfaction when I can feel that my counseling skills and becoming more mature outweigh all these.

I am also the second author of Dr. Mark Chan’s paper on *“The Effect of A Single Educational Workshop on Family Physicians’ Willingness and Confidence to Practice Motivational Technique”*, and Dr. Eva Au’s paper on *“The Application of a New Online Travel Health Program in a University Health Service in Hong Kong – An Initial Experience”*. Apart from gaining new knowledge from the lectures and workshops in the conference, the informal experience exchange among colleagues working in different centres and the friendship that I gained from this WONCA trip are the most valuable. I am grateful to all my friends who spent the WONCA week with me, sharing the delicious food in Taiwan with a lot of laughter. The evening city jog around Tower 101 in Taipei is also an unforgettable memory that I treasure very much.



We had an interesting poster round to facilitate experience exchange among colleagues working in different centers



The pink pediatric stethoscope, my favorite souvenir from this Taiwan WONCA trip

Strategy and Planning @ Primary Care - Interview with Dr. Lo Su-vui

Dr. Alvin Chan and Dr. Alfred Kwong
Specialists in Family Medicine, FP Links Editorial Board



Dr. Lo Su-vui

Have you heard of RAMP, NAHC, IMHP...? Some colleagues say these are the ingredients of the 'alphabetic soup' of primary care. They stand for Risk Assessment and Management Programme (RAMP), Nurse and Allied Health Clinic (NAHC) and Integrated Mental Health Programme (IMHP), which are multi-disciplinary programmes introduced in the General Out-patient Clinics (GOPCs) in the recent years. They aim at complementing primary

medical care and doctor consultations. Indeed, you will be amazed by the new look of GOPCs nowadays. The FP Links is very honoured to have the opportunity to interview 'the Conductor' of these programmes and changes, Dr. SV Lo.

Dr. Lo is the Director of Strategy and Planning at the Hospital Authority (HA). He has been leading the GOPC development and primary care services of HA since 2007. In this interview, Dr. Lo is going to share with us his ideas and beliefs in primary care service development and family medicine training in Hong Kong.



From left to right: Dr. Wendy Tsui, Dr. Alvin Chan, Dr. Lo Su-vui and Dr. Alfred Kwong

GOPC / Primary Care Services

Under your leadership, HA has done a lot in improving the GOPC services over the past seven years, could you share with us the most important changes?

Dr. Lo: The GOPC services of HA mainly cater for the elderly, the low income group and those with chronic diseases. In primary care, we are responsible for about 15% of the market share whilst the rest is provided principally by the private sector. Of all the changes in GOPCs, there are three aspects I would like to highlight. First is the introduction of multi-disciplinary care to the service of GOPCs. For example in the RAMP programme, our multi-disciplinary teams of doctors, nurses and allied health professionals systematically assess chronic disease patients for complications and provide targeted intervention, especially for those with diabetes and hypertension. Secondly, we have improved the GOPC telephone appointment system and increased

the consultation quotas so patients can access the service more readily. Thirdly, we have invested in clinic renovation, thereby modernizing the facilities with more usable area as far as possible, and improving the environment and patient care flow. I wish to emphasize that these improvements cannot happen without the hard work and dedication of our staff, particularly the senior doctors from HA's Coordinating Committee in Family Medicine.

Can you share with us why multi-disciplinary team care is emphasized in primary care?

Dr. Lo: Many of our primary care patients have chronic diseases. International experience has shown that optimal care for chronic patients requires coordinated management by a multi-disciplinary team of healthcare professionals to address the complexity of the illness. In RAMP for diabetic patients for example, besides medical and nursing support, we have amongst others optometrists assessing the patients for diabetic retinopathy, and dietitians providing dietary counselling. In addition to better clinical outcomes, the multidisciplinary approach helps in empowering patients to manage their own health conditions and keeping them healthy in the community. The two medical universities are helping us to conduct evaluations on the RAMP, and progress reports have shown that the ABC (HbA1c, Blood Pressure, Cholesterol) of participating patients are better than those of the control group. Professor David Wong of the Department of Ophthalmology, University of Hong Kong, also highlighted in the recent World Vision Day that our RAMP helped prevent blindness because of early detection of diabetic retinopathy.

In recent years, the concept of Primary Care Authority is being considered. What is your view?

Dr. Lo: As you mention, it is a concept. In the private sector the boundary between primary and secondary care is blurred. Hence, a so-called Primary Care Authority (PCA) will be difficult to be put in place in the private sector in that sense. On the other hand, the HA provides only about 15% of the primary care, it is also not meaningful for PCA to work in the public sector. In fact, under the existing structure, HA can already facilitate seamless patient care between primary and secondary care and the guidelines and protocols can be aligned with ease. The governance structure of HA is clear in that we report to the Food and Health Bureau and aligns with its policy on primary care development. With PCA, even though there may be separate manpower and funding allocation, I do worry that more graduating interns may choose and be absorbed by hospital specialties instead. But under the existing structure, we could balance our allocation across all specialties including Family Medicine.

You have served in the National Health Service (NHS) of the United Kingdom. Can the NHS model be incorporated in the primary care system in Hong Kong?

Dr. Lo: Each place has its unique culture as well as historical background. Whilst developing health care services, we have to take the uniqueness into consideration. In UK, every citizen has his or her own registered family doctor. If Hong Kong

wants to adopt the NHS model, we have to consider the acceptability by doctors and the public. Hong Kong people may not prefer the idea of a registered family doctor and the Government could not fund the public to consult their family doctors as in NHS. On the contrary, we need to find our own way. For example, information continuity is very important and this could facilitate different healthcare providers to offer coordinated patient care for citizens. The e-Health advocated by the Government is working along this direction so as to facilitate continuity of care.

Family Medicine Training

How should our family medicine trainees equip themselves to face the challenges ahead?

Dr. Lo: HA has its important role in providing training to doctors, on top of service provision. The training we offer is in line with the requirements of all the Colleges of the Academy of Medicine. For Family Medicine, the trainees must learn the essence of holistic care and be able to establish a good doctor-patient relationship. In doing so, they need to observe and understand the patient's spoken and non-spoken language. Apart from the physical illness, they have to learn to care for their psycho-social needs. Of course, that will require the effort of skillful and committed trainers.

In recent years, we find that more graduating interns are interested in Family Medicine, but the number of training posts are not adequate. Will there be more or at least stable resident trainee posts allocated to Family Medicine in the near future?

Dr. Lo: In the coming years, there will be more graduating interns, and certainly there would be more interns allocated to Family Medicine. The allocation of trainees would also depend on each specialty's workload. In Family Medicine, overall we are under-staff at the moment. Although we have the posts, it is just that there are not enough doctors to fill the positions. A stable and abundant supply of doctors would be ideal. But to be able to absorb that would depend on a stable resource allocation from the Government, and also taking into account the projected manpower requirement and the increasing number of graduating interns from the year 2018 onwards. We have been communicating with the Government on these factors for their further considerations.

On personal side...

Being a Director leading all the primary care services in HA, service and resource planning in HA, it must be a very stressful job. How do you cope with the stresses?

Dr. Lo: Firstly I am lucky to have helpful staff to share out my burden. So, very often when the issues come to me, we can work out the solutions together. Secondly, we need to emphasize on work-life balance. I enjoy playing golf. I try to take time to play golf, enjoy the nature, and appreciate the fresh air. Our work is never ending, but we must strive to have the balance for self, friends and colleagues, and family too.



Dr. Lo and his wife Dr. Wendy Lo enjoy playing golf.

You are good at planning and strategic minded. Can you share with us what strategies you used in nurturing your children?

Dr. Lo: No strategies (ha...ha...). Human is dynamic, not a product. Parents cannot plan the road for their children step by step like a piece of work. Parents' goal should be to enable their children to equip themselves to do what they dream for. My principle lies in 3 "R"s : Responsibility, Room and Respect. The first is parental responsibility – spend time with them, play with them. Choose a school suitable for them, not a school you want. Room, give the children personal space as they grow up. For example, when they are adolescents, they may like playing smart phones / computer games. You cannot stop them, but guide them, let them share their own responsibility. For example, let them finish their homework etc first. Once they finish their work, they are rewarded. These are dynamic, and the balance changes when the children are growing up. Never always treat them as two or three- year-old kids. Respect, shows respect to the children. If you do not understand, ask them. Respect also means "look again", hold back your emotion, step back and have a second look if you feel like shouting at the children.



Dr. Lo attending his son, Dr. Samuel Lo's graduation in 2013. From left to right: Dr. SV Lo, Dr. Samuel Lo, Dr. Wendy Lo, Dr. Chin Weng Yee and Dr. Julie Chen

Your wife is a family physician. Does it have any influence on your views in primary care?

Dr. Lo: My wife's training and work has enabled me to have more thorough understanding what Family Medicine is about. My public health training has all along advocated that primary care is the most important component of a health care system, well supported in literature. That view will not be altered anyway but my wife reinforces my understanding and belief. If you are choosing Family Medicine, you need to be proud of being a family doctor, and be proud of your practice. If you uphold this and are able to be proud of your job, you will derive great satisfaction, and Family Medicine has the future!

In this interview, not only are we able to see Dr. Lo's lively side, we could feel his passion on primary care development. We would like to echo his last statement:

Be proud of being a family doctor and wish Family Medicine a bright future!



Managing Our Practice – Change Management

Day in and day out, we are making changes to our practice for better patient care and clinical practice. Unsuccessful changes are often the result of lack of clear goals or goals that are too far to reach in the future; lack of planning and preparation; poor communication; employee resistance; lack of commitment and fear of failure. To make changes successful and sustainable, some basic questions on “Why”, “What” and “How” cannot be skipped.

Why making the change?

External and internal factors should both be considered in change application. For instance, a doctor is thinking of adding a new service to the practice. What does the involved staff think about (internal factor) and what will the patients perceive (external factor)? If the need for change is not clear and not agreed by stakeholders, this change will likely arouse some emotional response from staff and patients and, certainly, significant resistance to such change.

What is the change?

Change can be more complex than it appears. We should always bear in mind about the goals of the change, which should be **SMART: specific, measurable, achievable, relevant or realistic, and time-bound**. This helps to guide our way in planning.

How to change?

McKinsey 7S model provides a checklist of areas which management should address to enact change. **Strategy, structure and system** are often considered as “hard” elements which are easier to define or identify. **Subordinate goals, style, staff and skills** are often labelled as “soft” elements which are more difficult to define and achieve.

Subordinate goals represent the missions and visions of the organisation or practice. A shared view of this among stakeholders is a powerful competitive advantage for the practice to carry out the change.

Once the goal is set, a clear **Strategy** is needed, which refers to the plan that is to be taken to achieve the goal. This would involve a series of processes such as planning, preparation, monitoring and evaluation. These steps should be carefully designed for changes to be successfully and smoothly implemented. To carry out the plan, we need a **Structure** and a **System**. The former is the way the organisation or practice is built, in particular, the decision making cascade and the role of each staff. The latter defines the internal process with details in workflow logistics. **Style** can be expressed as the culture or style of leadership. A doctor who is adaptable to change or who has less fear of failure is more likely to carry out successful changes. **Staff and Skills** refer to the required staff and expected competencies for the change to be made. With such consideration, training to enhance staff competency should also be included.

Careful planning and preparation for the change may seem long and tedious in the beginning, but is essential and, in fact, could save time and enhance efficiency in the long run.

Reference

1. SMART, free management book <<http://www.free-management-ebook.com/faqs/goal-04.htm>> [accessible on 17 Mar 2015]
2. Mckinsey 7S, Strategic Management Insight <<http://www.strategicmanagementinsight.com>> [accessible on 17 Mar 2015]

Compiled by Dr. Maria Leung

放工後掏 「陶」寶

黃欄開醫生

(新界東聯網 一家庭醫學部專科醫生)



記得學生時代，曾讀過一句話"Clinical medicine is art"。最近，我接觸了醫學以外的另一種藝術—陶藝，獲得樂趣。

動手玩泥土是人類最原始的一項活動。人將陶土捏成各種形狀：泥娃娃、器皿、飾物...發揮創意，很自由。

我上陶土班不久，仍是在「膽粗粗」發揮創意的階段。在導師指導下，捏個茶壺，又用泥條拼砌成花瓶。（也「膽粗粗」地在此分享幾張照片）

然後我又上網參考別人的作品，又閱讀關於陶藝的書本。這陶藝世界很大，不同成分的泥土，不同的技法（如手捏、泥條塑形、拉坯），釉彩配搭等都有學問。形狀設計，裝飾...若參考比較中西方古代陶瓷文物，更博大精深。

陶藝既是鄉間工匠的實用技能，也是殿堂藝術大師的技藝。

各位深諳醫學藝術的讀者，不知道你們會否也喜歡陶藝呢？

The HKCFP Award for the Best Research of 2014

The Research Committee of the Hong Kong College of Family Physicians is calling for The Award for The Best Research of the Year 2014. 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 2015.

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

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

DEADLINE OF SUBMISSION: 30 April 2015

HKCFP Research Fellowship 2015

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

Applications will be judged on*:

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

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

How to apply

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: 2528 6618 Fax: 2866 0616.
2. Applicants must submit:
 - The completed application form;
 - The signed terms and conditions of the HKCFP Research Fellowship;
 - Curriculum vitae from the principal investigator;
 - Curriculum vitae from the co-investigator(s) (no more than two pages) AND,
 - Curriculum vitae from the supervisor.
3. Applications close on: **30 April 2015**. Late applications will not be accepted.
4. Applications can be either sent:

By post to Chairman, Research Committee, The Hong Kong College of Family Physicians, Rm 803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong; Or,

by email to johnlee@hkcfp.org.hk

HKCFP Trainees Research Fund 2015 / HKCFP Research Seed Fund 2015

The Research Committee of HKCFP is proud to continue to offer the two research funds, The Trainees Research Fund and the Research Seed Fund.

The Trainees Research Fund will be opened to all registered HKCFP trainees and is made of four awards (each up to HK\$5,000). It is envisaged it will help trainees especially (but not limited to) those doing research projects as their exit examination. Those who have funding support elsewhere will not be considered.

The Research Seed Fund is open to all HKCFP members when a maximum of \$10,000 award will be made to the successful applicant to assist the conduction of a research project.

Winners of the award will receive 50% of the approved grant up front and the remainder 50% upon completion of the project.

Assessment Criteria for both funds:

1. Academic rigor of the paper (e.g. originality, methodology, organisation and presentation);
2. Relevance and impact to family medicine & primary care (e.g. importance of the topic and the impact of the findings on the practice or development of the discipline); and
3. Overall budget

Each Research project submitted will be assessed according to the above assessment criteria set by the selection panel. Please send your submission to:

Research Committee, HKCFP

803-4, 8/F, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong by post or by email: johnlee@hkcfp.org.hk

Please indicate the research funding title e.g. “HKCFP Trainees Research Fund 2015/ HKCFP Research Seed Fund 2015” on your research project upon submission.

Submission Deadline: 31st August 2015

Interest Group in Dermatology - The 46th Meeting on 7 March 2015

Dr. Fung Chi Pun Wilson - College Member

Theme : **Clinical Approach to Eczema Management**

Speaker : Dr. Yeung Chi Keung
Specialist in Dermatology and Venereology

Moderator : Dr. Lam Wing Wo, Edmund
Coordinator, Board of Education

Learning points

On March 7 2015, Dr. Yeung Chi Keung explored the topic of Clinical Approach to Eczema Management together with our group.

Atopic dermatitis (AD), one of the most common types of dermatitis, affects 5 to 20% of the children worldwide. Clinical manifestation often starts in infants aging 2 to 6 months, and 75% of the cases would improve by the age of 14. AD usually runs a chronic course with intermittent flares.

The understanding of etiology of AD is emerging over the years, and the current belief is that AD is a complex condition arising from the interaction between various causes such as environmental factors, allergens, infection, tissue damage due to scratching, impaired epidermal barrier, and genetic mutation on protein filaggrin.

Goals of AD Management

1. Avoidance and modification of environmentally triggered factors

These include irritants or sensitizers such as perfumes, preservatives, lanolin, dyes, and plant extract.

2. Rebuilding and maintenance of optimal skin barrier function

AD patients have a genetically impaired epidermal barrier, resulting in increased Transepidermal Water Loss (TEWL) and penetration of allergenic micro-organism. Moisturizer is the cornerstone therapy in the repair & restoration of lipid barrier function of normal skin.

Traditional moisturizer, such as Aqueous Cream, contains anionic surfactant sodium lauryl sulphate (SLS), which is found to reduce SC thickness and increase in baseline TEWL. Urea cream can also be irritative to skin in particular those being inflamed.

The new generation of moisturizing cream mimics the natural physiological composition of normal skin. It is effective in decreasing dryness, excoriation, lichenification, scaling, erythema, pruritus, as well as the amount of topical required to clear an AD flare.

3. Elimination of skin inflammation & infection

Topical corticosteroids (TCS) remain the mainstay of anti-inflammatory therapy. The new generation medium potency topical TCS such as fluticasone propionate is metabolized quickly in the liver, thus minimizing the potential systemic adverse effects.

Topical Calcineurin Inhibitor (TCI) is an approved treatment for AD by U.S. Food and Drug Administration (FDA). TCI is considered superior over TCS as it is not associated with

rebound and tachyphylaxis, can be used on a long-term basis without local effects on the epidermal barrier and is particularly useful on delicate skin sites such as face and intertriginous areas. TCI could be used twice daily for short-term or intermittent long-term treatment.

Despite American Academy of Dermatology's disappointment, FDA has added a black-box warning for TCI based on the increased risk of malignancy in patients on long-term oral tacrolimus. TCI shows minimal systemic absorption and there is no evidence suggesting TCI would lead to malignancy as of the date hereof.

4. Control and elimination of itch-scratch-cycle

This is achieved by applying adequate moisturizer to repair and rebuild the skin barrier function, and to control inflammation and infection (if any).

5. Education & empowerment of patients and caregivers

It is important for patients and caregivers in particular to understand the chronic nature of intermittent flares of AD. Treatment, TCS in particular, should be started when early signs of AD activities are spotted. Many patients or caregivers misunderstand the side effect of TCS, and giving them the correct picture is the key in ensuring the effectiveness of the treatment.

Proactive Approach vs Reactive Approach

AD has compromised the normal skin barrier and there is sub-clinical skin inflammation without the presence of visible skin lesion between flares. Studies using low-dose TCS (16 weeks) or TCI (12 months) twice weekly on "normal-looking" AD skin have confirmed reduced flares and prolonging flare-free period.

Next meeting

The next meeting will be on 2 May 2015 (Saturday). The guest speaker is Dr. David Luk, Specialist in Paediatrics. He will speak to us on "topic on Eczema". All members are welcome and encouraged to present their cases and problems for discussions or role play. Please send your cases to our secretariat (johnlee@hkcfp.org.hk) 2 weeks before the date of presentation.



Dr. Lam Wing Wo (left) and Dr. Yeung Chi Keung (right)

Our fourth Chinese Book, 《家庭醫生一百篇》 is born!

《家庭醫生一百篇》is the assemble and selection of the articles in the weekly column of Hong Kong Economic Journal (信報) in the past few years, contributed by 22 members of the College. It is a very good tool for public education, letting the public recognize the importance of family physicians for their personal health, and understand the key role of family physicians in the health care system.

The book also serves as a good platform for all the members to share our stories with one another, and experience our whole-heartedness to serve our patients and the community all together!

名家推薦：

書中不少文章闡述家庭醫生在協助個人保持身心健康所擔當的角色，涉及的課題包括預防和及早識別疾病、情緒管理、維繫婚姻、家庭和人際關係等。這些文章清楚解釋基層醫療的重要性，當中不少故事似曾相識，令人細味。

高永文醫生

我很欣喜看見香港家庭醫學學院編纂家庭醫學手冊第四輯《家庭醫生一百篇》，多位前線醫生熱心就各種家庭醫學問題撰寫文章，惠澤大眾。書中內容豐富，淺顯易懂，讓人倍感親切，對讀者改善自身和家人健康大有裨益，不容錯過。

梁卓偉教授

這書裏面有很多家庭醫生的個人分享、有病人個案分析，還有其他有用的資訊。每篇文章短短的，當中記載的東西卻是寶貴而無價的；而且用字淺白、言簡意賅。本人誠意向大家推薦這本小讀物。

李國棟醫生

本書透過輕鬆故事和醫生平日所見所聞，深入淺出講述保健知識和如何維持身心健康，並道出預防疾病的良法；它亦讓大家明白家庭醫生在醫療體系中的重要角色。我翻閱初稿，當中提及醫生診症時向病人查詢病情，並關心情緒，建立互信關係的情節，體現了「醫生不單要醫病，更要醫人」的信念，甚有共鳴，特誠意推介。

沈祖堯教授

The special offer of the book for our members is HK\$86 (20% discount of the original price)! Please fill in the order form below and get the new book as soon as possible!

Kindly contact our secretariat Ms. Priscilla Li or Rosina Chan at 2528 6618 for the book delivery, and please note that the postal charge by mail delivery is HK\$20 per book.

ORDER FORM

To: HKCFP

Room 803-4, 8/F,
HKAM Jockey Club Building,
99 Wong Chuk Hang Road,
Aberdeen, Hong Kong
(Fax No. 2866 0241)

I am a(an) *Affiliate / Student / Associate / Full / Fellow member of the Hong Kong College of Family Physicians.

I would like to purchase _____ copy / copies of 家庭醫學手冊之四 – 家庭醫生一百篇.

Enclosed please find cheque payment of HK\$ _____**.

** Note - HK\$86/book; Hong Kong local postage : HK\$20/book

*** All cheques are payable to "HKCFP Education Ltd".***



Name : _____ Tel No. : _____

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Email Address : _____ Date : _____

* Please circle your category of membership.

ASSESSMENT ENHANCEMENT COURSE (AEC) FOR FAMILY PHYSICIANS 2015

Organizer	:	Assessment Enhancement Sub-committee, Board of Education, HKCFP
Tutors	:	Family Medicine Specialists, Fellows of HKCFP and RACGP
Supervisors	:	Dr. Tam Chung Yin, Janet and Dr. Chan Chi Wai
Co-ordinator	:	Dr. Lai Sheung Siu
Objectives	:	<ol style="list-style-type: none"> 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 self-help groups 4. To improve time management through simulated examination
Venue	:	Duke of Windsor Social Service Building and HKAM Jockey Club Building
Date	:	6 months' course starting from April 2015
Course Structure	:	<p>The course will consist of 4 main components:</p> <ol style="list-style-type: none"> 1. Seminars 2. Workshops 3. Self-help Group Support 4. Mock Exam <p>Seminars and Workshops will be arranged on Saturday afternoons (2:30 p.m. to 5:30 p.m.)</p>
Accreditation	:	Up to 15 CME points (Category 4.4) & 5 CPD points (Category 3.15) for the whole course
Course Fee	:	<p>Members : HK\$3,200 (Whole course) HK\$900 (Spot admission for each seminar or workshop only)</p> <p>All cheques payable to "HKCFP Education Ltd" All Fees received are non-refundable and non-transferable.</p>
Capacity	:	50 doctors maximum
Enrolment	:	Enrolment is now open. Please call the College Secretariat, Ms. Teresa Liu or Mr. John Lee, at 2528 6618 for details. Successful applicants will be informed later.
Disclaimer	:	All cases and answers are suggested by our tutors only. They are not standard answers for examination.
Remarks	:	Post-AEC training course will be organized for category 2 candidates who have enrolled in AEC.

Assessment Enhancement Course 2015 Timetable for Workshop

Date	Topics	Venue
25 April 2015 (Sat) 2:30 – 5:30 p.m.	Introduction	Duke of Windsor Social Service Building, Wanchai
16 May 2015 (Sat) 2:30 – 5:30 p.m.	Approach to Physical Complaints	Duke of Windsor Social Service Building, Wanchai
13 June 2015 (Sat) 2:30 – 5:30 p.m.	Proper Physical Examination Common Clinic Procedures	Duke of Windsor Social Service Building, Wanchai
18 July 2015 (Sat) 2:30 – 5:30 p.m.	Viva Practice: Enhance Interprofessional Communication	Duke of Windsor Social Service Building, Wanchai
15 August 2015 (Sat) 2:30 – 5:30 p.m.	Problem Solving Skills	Duke of Windsor Social Service Building, Wanchai
19 September 2015 (Sat) 2:30 – 6:00 p.m.	Mock Exam	HKAM Jockey Club Building, 99 Wong Chuk Hang Road

- 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.

2 May 2015 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	Childhood Eczema (Atopic Dermatitis)	
Speakers	Dr. Luk Chi Kong, David Specialist in Paediatrics	
Co-ordinator & Chairman	Dr. Hung Wai Yin The Hong Kong College of Family Physicians	
Time	1:00 p.m. – 2:00 p.m.	Lunch
	2:00 p.m. – 4:00 p.m.	Theme Presentation & Discussion
Venue	5/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong	
Admission Fee	Members	Free
	Non – members	HK\$ 300.00
	HKAM Registrants	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 Discussion will be in English or bilingual	
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.	

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

Sponsored by
GlaxoSmithKline Limited

6 May 2015 Wednesday

Modern Cardiovascular Management: 3rd Generation Beta Blockers and the Role of the Primary Physician

Dr. Victor Goh
Specialist in Cardiology

Chairman	Dr. Tsui Hing Sing, Robert 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	Forum Room I, Basement 2, Regal Hongkong Hotel, 88 Yee Wo Street, Causeway Bay, Hong Kong	
Admission Fee	College Fellow, Full or Associate	Free
	Members	
	Other Categories of Members	HK\$ 350.00
	Non-Members	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.	

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A. Menarini Hong Kong Limited

7 May 2015 Thursday

What to Consider When Choosing an Antidiabetic Drug?

Dr. Tso Wai Kwan, Annette
Specialist in Diabetes, Endocrinology & Metabolism
Honorary Clinical Assistant Professor
Department of Medicine, The University of Hong Kong

Chairman	Dr. Tong Siu Man 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	Star Room 42/F, Langham Place Hotel, 555 Shanghai Street, Kowloon	
Admission Fee	College Fellow, Full or Associate	Free
	Members	
	Other Categories of Members	HK\$ 350.00
	Non-Members	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.	

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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.

April's session:

Date	24 April 2015 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topic	New Treatment Update in Allergic Rhinitis – Dr. K. K. Ip Gary
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.

May's session:

Date	29 May 2015 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topic	1) Periodontal Disease - The Most Common Infection – Dr. Gordon K. C. Chiu 2) Periodontal Infection - A Silent Health Risk – Prof. L. J. Jin
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.

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
9 May 2015 2:15 – 4:15p.m.	Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, 118 Shatin Pass Road, Wong Tai Sin, Kowloon	Upper Gastrointestinal Update in Primary Care Dr. Cheung Wing I, Associate Consultant (M&G), OLMH	Ms. Clara Tsang Tel: 2327 6852

Structured Education Programmes

Free to members
HKCFP 2 CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
6 May 15 (Wed)			
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Management of Abnormal Lab Result in Family Medicine Practice II (CBC and MCV) Dr. Liu Lok Kwan	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Promotion of positive mental health in community Dr. Lau Ka Man & Dr. Lee Ka Yun Peter	Ms. Cordy Wong Tel: 3949 3087
5:15 – 7:15 p.m.	Multi-function Room, NAHC clinic, G/F, Tsan Yuk Hospital	Management of electrolytes disturbance in primary care Dr. Desmond Yap	Ms. Elaine Cheung Tel: 2589 2337
7 May 15 (Thu)			
2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	Promotion of positive mental health in community Dr. Lee Edna Tin Wai & Dr. Pun Yat Hei	Ms. Cordy Wong Tel: 3949 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Management of Abnormal ECG in Family Medicine Practice Dr. Cheuk Tat Sang & Dr. Ng Mei Po	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. Lee Wing Po	Ms. Kwong Tel: 2595 6941
13 May 15 (Wed)			
2:15 – 5:15 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Contraception Dr. Lee Wing Mei Dickinson & Dr. Suen Gee Kwang Victoria	Ms. Cordy Wong Tel: 3949 3087
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	MPS Case Sharing Dr. Pang Kit Hing	Ms. Eliza Chan Tel: 2468 6813
5:15 – 7:15 p.m.	Multi-function Room, RAMP clinic, Aberdeen GOPC	Handling IOD Cases Dr. Joyce Lai	Ms. Elaine Cheung Tel: 2589 2337
5:00 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Community Resources in Family Violence Dr. Tse Wan Ying Polly	Ms. Crystal Law Tel: 2632 3480
14 May 15 (Thu)			
2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	Contraception Dr. Mok Ka Yee & Dr. Yeung Ka Yu Doogie	Ms. Cordy Wong Tel: 3949 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	The Role of a Primary Care Doctor for Enduring Power of Attorney Dr. So Chi Kin & Dr. Hung Chi Bun	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Enduring power of attorney Dr. Fung Ka Hang Timothy	Ms. Kwong Tel: 2595 6941
20 May 15 (Wed)			
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	Clinical Approach to Psychological Problems in Adolescents Dr. Lui Wai Cheung	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m.	Seminar Room, 3/F, Block S (Lift Lobby), UCH	Community resource : family dysfunction (violence, extra-marital affairs) & parenting Dr. Xu Shaowei, Dr. Ching Rosemary Hin Nga	Ms. Cordy Wong Tel: 3949 3087
5:15 – 7:15 p.m.	Multi-function Room, NAHC clinic, G/F, Tsan Yuk Hospital	Gynae Topic - Post-partum care Dr. KW Cheung	Ms. Elaine Cheung Tel: 2589 2337
21 May 15 (Thu)			
2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	Community resource : family dysfunction (violence, extra-marital affairs) & parenting Dr. Chan So Wai Sara & Dr. Chow Pui Yin Melody	Ms. Cordy Wong Tel: 3949 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	IMHP Case Sharing by TSWCHC Dr. Yiu Chung Ting	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Management of dysphagia Dr. Mathew Lau	Ms. Kwong Tel: 2595 6941
27 May 15 (Wed)			
2:15 – 5:15 p.m.	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Common symptoms in ENT Dr. Wong Koon Yin Yvonne, Dr. Wong Hong Kiu Queenie	Ms. Cordy Wong Tel: 3949 3087
2:15 – 4:45 p.m.	AB1034, 1/F, Main Block, Tuen Mun Hospital	How do we Educate Patients to Choose Food Products : Food Labelling, DM Diet and Low Fat Diet Dr. So Mei Kuen	Ms. Eliza Chan Tel: 2468 6813
5:15 – 7:15 p.m.	Lecture Theatre, 5/F, Tsan Yuk Hospital, 30 Hospital Road, Hong Kong	Management of common eye diseases in OPD setting Dr. Ian Wong	Ms. Elaine Cheung Tel: 2589 2337
5:00 – 7:30 p.m.	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Infectious control in primary care setting Dr. Mira Chen Liu Jing	Ms. Crystal Law Tel: 2632 3480
28 May 15 (Thu)			
2:15 – 5:15 p.m.	Auditorium, G/F, Tseung Kwan O Hospital	Common symptoms in ENT Dr. Yuen Ming Wai, Dr. Kam Ngar Yin Irene	Ms. Cordy Wong Tel: 3949 3087
4:00 – 6:00 p.m.	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Sports Health Dr. Tong Ka Hung & Dr. Lee Sik Kwan	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m.	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Family therapy Dr. Lee Ho Ming	Ms. Kwong Tel: 2595 6941

COLLEGE CALENDAR

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
12 Apr	13	14	15 2:15 – 7:15 p.m. Structured Education Programme	16 2:15 – 7:00 p.m. Structured Education Programme 2:15 – 3:15 p.m. PCO DM Certificate Course Clinic Visit 9:00 p.m. HKCFP Council Meeting	17 6:00 p.m. HKPCC Meeting	18 2:30 – 5:30 p.m. EBM Interest Group
19	20	21	22 2:15 – 7:15 p.m. Structured Education Programme	23 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Board of Conjoint Examination Meeting	24 2:30 – 3:30 p.m. Video Session	25 12:30 – 2:30 p.m. DFM Exam Subcommittee Standardization Workshop 2:30 – 5:30 p.m. AEC 2015 2:30 – 5:30 p.m. CA & Research Introductory Workshop
26	27	28	29 6:30 p.m. Exit Exam - Post Exam Evaluation Workshop	30	1 May	2 1:00 – 4:00 p.m. Interest Group in Dermatology
3	4	5	6 2:15 – 7:15 p.m. Structured Education Programme 1:00 – 3:30 p.m. CME Lecture	7 2:15 – 7:00 p.m. Structured Education Programme 1:00 – 3:30 p.m. CME Lecture	8	9 3:00 – 5:00 p.m. DFM Written Examination
10	11	12	13 2:15 – 7:15 p.m. Structured Education Programme	14 2:15 – 7:00 p.m. Structured Education Programme	15	16 2:30 – 5:30 p.m. AEC 2015
17 2:00 – 7:00 p.m. DFM OSCE Examination	18	19 9:00 p.m. DFM Meeting	20 2:15 – 7:15 p.m. Structured Education Programme	21 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. HKCFP Council Meeting	22	23
24	25	26	27 2:15 – 7:15 p.m. Structured Education Programme	28 2:15 – 7:00 p.m. Structured Education Programme 7:30 p.m. CSA Standardization Workshop 9:00 p.m. Board of Conjoint Examination Meeting	29 2:30 – 3:30 p.m. Video Session	30 HKPCC
31 HKPCC and Conferment	1 Jun	2	3	4	5	6

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Red : Education Programmes by Board of Education
Green : Community & Structured Education Programmes
Purple : College Activities

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