



# THE HONG KONG COLLEGE OF FAMILY PHYSICIANS

## Family Physicians Links

### Message from the President



#### The Next Generation of Family Physicians

The WONCA APR Conference is over now. I have to thank all the Secretariat staffs especially Erica, Crystal and Charlotte to have work so hard under such adverse environment, and at the same time to bear with my "occasional temperamental outburst". I must also acknowledge the effort of the HOC in making the Conference a "relative" success. I have to express my sincere appreciation to the commitment of those key members such as Drs. John Chung, Lau Ho Lim, Samuel Wong, Chan Hung Chiu, Law Tung Chi and Kenny Kung. They are the people who have helped the smooth running of events during the four big dates. We had the biggest attendance (477) at the Conferment Ceremony, with international and local VIPs and especially large numbers of family members of successful candidates. The highlight of WONCA is actually the Conference Banquet with the beautiful weather and location, and the electrifying performance of our newly-born "HKCFP Band". They may need a more formal name in the future.

I am taking a short break and still recuperating from the hectic weeks before and during the Conference. I wonder whether the above-mentioned colleagues shared the same experience with me, which I dubbed the "Post Conference Lethargy" (PCL) Syndrome. I sleep early but still find it hard to get off the bed in the morning to work. I read a new book which I am longing for, but only at a quarter of my usual speed. Response to mails and decision making were slow and sluggish. Appetite is good but weight loss has not been regained. I know this is probably related to the drastic drop in adrenaline level and the various neurotransmitters at work. I can understand better the addiction problem of those substance abusers, whether for enhancing physical performance or craving for unrealistic sensual pleasure. Luckily, the symptoms are gone after about two weeks, and I am back to normal now.

Our Community is plagued with the drug problems and recently there has been more reporting in the media on how many schoolchildren were afflicted with variable degree of damages, physically and mentally. Parents and teachers are all very worried; our Government has been proactively seeking help and assistance via different channels and NGOs for

these unfortunate kids and families. I have proposed at the recent Council meeting that our College will formally join hand in a project to fight teenage substance abuse with the Kowloon West Cluster based at Our Lady of Maryknoll Hospital. Dr. Au Yiu Kai, a Surgeon as well as a well-known voluntary worker whom has been nominated for a Humanity Award 2009 in Hong Kong, has pioneered the project in the past three years in the Wong Tai Sin District. They are trying to recruit private practitioners to help young patients with the problem. I am sure Family Physicians should have a role to play. But they need training, together with a strong supporting network involving social workers, parent groups and school teachers, clinical psychologists and psychiatrists when necessary. Family Physicians should be able to perform as the co-ordinator of this important and worthwhile issue as a service to community.

I also believe this is the golden opportunity to review our present vocational training programme. We always say that doctors should be the best health advocates to our patients for a healthy lifestyle, be it smoking cessation, alcoholism, or substance abuse. But are we well-trained to perform the duty with confidence? I must admit that I am not, or do not have the opportunity to have the proper training. Our College will organize a Certificate Course in Smoking Cessation and Counseling in conjunction with Our Lady of Maryknoll Hospital later this month. I urge members and trainees to sign up because one needs to have the necessary skills to do the job effectively. This also applies to other partly behavioural problems which I have listed. We need the training before we can perform. Our basic training programme will need to re-define and establish the required core competence for the future generation of Family Physicians.

Lastly, I take the opportunity to express the deepest condolences to Prof. Samuel Wong. His mother passed away recently after a long battle against illness. May I wish her rest in peace and eternal joy.

Dr. Gene W W Tsoi  
President

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## WONCA 2009 Asia-Pacific Regional Conference

We are very glad that the WONCA 2009 Asia-Pacific Regional Conference was successfully held at the Hong Kong Convention and Exhibition Centre. The conference was attended by over 800 delegates from 35 countries.



Building Bridges

At the opening reception, we were honored to have the presence of Vice-minister of Ministry of Health, PRC, Mr. Liu Qian; Chief Executive of the HKSAR, Mr. Donald Tsang; Secretary for Food and Health Bureau, HKSAR, Dr. York Chow; WONCA Asia-Pacific Region President, Dr. Donald Li; and WONCA World President, Professor Chris van Weel.



(From left to right) Dr. John Chung, Prof. Chris van Weel, Dr. York Chow, Mr. Donald Tsang, Mr. Liu Qian, Dr. Andrew Ip, Dr. Gene Tsoi, Dr. Donald Li

At the Wes Fabb Oration, Professor Goh Lee Gan talked on 'Connecting care as the next conceptual leap of family medicine'. Dr. York Chow spoke in his keynote speech that primary care was the bridge for health for all. Professor Peter Whitehouse addressed another important issue of the health care system, aging, at his keynote. Dr. David Ho gave the audience a clear picture of the HIV epidemic and the prospect of AIDS control.

The Conference came to an end with the Closing Ceremony. Professor Chris van Weel, WONCA World President, said the conference was timely in the light of the regional and global developments in primary care.

Behind the scene, however, the organization course was a long and winding road. There had been many difficulties in organizing this event such as inadequate sponsorship, low registration numbers because of the global financial turmoil and poor performance of the first PCO. With the outbreak of the new H1N1 epidemic this year, the future of the conference was put in serious jeopardy. Just two months before the big day, there were doubts as to whether the conference could take place at all.

Despite these challenges, Committee members worked hard as a team. The Business team made last efforts to call in sponsors. The Scientific team worked meticulously to refine the programme and accommodate last minute changes. Advisors lent their full support, particularly connecting us with the VIPs and delegates from the Mainland. The Social team discovered talents among College members and put on memorable performances. Our President and Treasurer did their best to control the expenses.

We need not mention the final outcome but were particularly touched when Professor Chris van Weel, WONCA World President, asked for a standing ovation in the Closing Ceremony because he thought we had done a sterling job.

We wish to take this opportunity to express our most sincere thanks to all the Host Organizing Committee and Subcommittee members for their volunteer contribution, their valuable time and their devotion which have made this conference a great success. We would also like to express our appreciation to delegates who came to the conference and everyone in WONCA who gave us tremendous support to accomplish the theme of the conference 'Building Bridges'.

Dr. John Chung and Dr. Andrew Ip  
Co-Chairmen,  
WONCA APR 2009 Host Organizing Committee



Entertainment during Opening Reception



Off-Shot during Opening Reception



Staff Photo at Closing Ceremony

**The "HKCFP Choir"**

Dr. Kenny Kung, Trainer,  
New Territories East Cluster

"Such a feeling's comin' over me...there is wonder in most everything I see"

The WONCA 2009 opening reception, I am sure all would agree, proved to be a great evening, filled by delegates from different parts of the world, as well as graced by the presence of our HKSAR Chief Executive Mr. Donald Tsang. More than this, however, was the outstanding performance from our Family Medicine trainees – our first ever choir from the College. No one has yet given a name to this choir, except for a very crude "HKCFP trainee choir". This name definitely does not reflect the choir's true colours!

The idea of this choir stemmed from our president's desire for showing overseas delegates about our future holders of Family Medicine in Hong Kong. Hospital Authority family medicine coordinators were asked to invite trainees to participate. To tell you the truth, initially I thought that only a handful of trainees would take part. But I am very happy that I was wrong, as proven by the large number of enthusiastic singers seen on stage that night.

Difficulties were encountered. It was hard to find a place centrally located with a piano that could accommodate over 30 people. In the end we found a trainee's clubhouse which suited the above description, BUT because it was meant to be used for only a few people each time, our singers literally gave their sweat during each rehearsal!

Apart from this physical torment, each trainee gave up their personal time for rehearsals, and also spent extra time to practise on their own afterwards. Some even helped to compose the various backing vocals and instrumental arrangements. Nevertheless at the end of the day, I am sure all those who participated were honoured to be part of the choir and also enjoyed every minute of their performance!

After the ceremony, our president was approached by different parties regarding the possibilities of inviting our choir in other functions. We certainly hope this can be realized, but I think we now have some regular performers for our annual dinner!

List of trainees involved:

Instrumentalists:

- Dr Raymond WM Yeung – saxophone & guitar
- Dr Dana Lo – pipa
- Dr Zabo Chung – saxophone

Vocalists:

- |                    |                    |
|--------------------|--------------------|
| Dr Judy Cheng      | Dr Tam Wah Kit     |
| Dr Frances Yu      | Dr Hui Lai Chi     |
| Dr Christina Cheuk | Dr Loretta Wong    |
| Dr Flora HT Mak    | Dr Vicky Wong      |
| Dr Stella YY Chan  | Dr Denise Tam      |
| Dr Ken PK Wong     | Dr Matthew Lee     |
| Dr Florence SS Lai | Dr Catherine Ng    |
| Dr Shirley YK Choi | Dr Wendy WL Cheung |
| Dr Kitty Wong      | Dr Natalie Siu     |
| Dr Doris Chu       | Dr Kwok Lai Ping   |
| Dr Esther Yu       | Dr Loretta Lai     |
| Dr Linda Chan      | Dr Fung Hoi Tik    |
| Dr Patty Siu       | Dr Gavin Sin       |
| Dr Eric Lee        | Dr Johnny Lam      |
| Dr Andrew Leung    | Dr Victoria Tam    |
| Dr Steve Chan      | Dr Eric Leung      |



Singing performance by Family Medicine Trainees

This is the keynote speech delivered by Dr. the Hon York Chow at the WONCA APR Conference. It contains important message to our healthcare reform in Hong Kong.

WONCA 2009 Asia Pacific Regional Conference  
'Building Bridges'



Keynote Addressed by Dr. York CHOW, SBS, JP,  
The Secretary for Food and Health  
On 5 June 2009

'Primary Care: Bridging Health to All'

Distinguished Guests, Dear Colleagues, Ladies and Gentlemen,

May I congratulate again the Hong Kong College of Family Physicians and WONCA for organising this 2009 Asia-Pacific Regional Conference. I would also like to thank the organiser for inviting me to give you a brief account on the primary care reform in Hong Kong. With so many overseas and local experts gathering here in this Conference, I welcome all of you to inject new ideas and refresh our minds.

**Importance of Primary Care**

1. The recent human swine flu epidemic reminds us of primary care's role as the first-line guardian in preventing disease and protecting health of the whole population. Primary care as the first contact and cardinal pathway bringing health to all has been accentuated by the World Health Organization (WHO) since 31 years ago in its Declaration in Alma Ata. Thirty years later, the need to improve primary care was reaffirmed in the World Health Report 'Now more than ever'. Just around 2 weeks ago in the World Health Assembly, the 'Resolution on primary health care' was adopted and member states were urged to accelerate actions to improve primary care.
2. The principles of Alma-Ata are still the important philosophical backbone of our strategies for healthcare reform today: such as "health is a state of complete physical, mental and social wellbeing, and not merely the absence of diseases or infirmity"; addressing the inequality of access of care; health for all; etc. Another important principle adopted by the Hong Kong Government is its responsibility

for the health of all its citizens, which can be fulfilled only by the provision of adequate health and social measures. Healthcare is an essential professional service, and should never be regarded as a commercial activity. There is a duty to ensure primary healthcare to be designed and delivered as an essential healthcare based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families. It has to be affordable and provided close to where people live or work. As the first contact point of care, it is the first element of a continuing healthcare process, and an integral part of the health system. In the current culture of Hong Kong, it also involves safety net for all, empowerment of patients, freedom of choice, and adequate health information and education for everyone.

3. Like most countries, Hong Kong is facing an ageing population as a result of two factors: declines in fertility and increases in life expectancy. Ageing of the population, accelerated by the spread of unhealthy lifestyles and obesity epidemic, results in global increase in the burden of chronic diseases, many of which are preventable. According to the WHO, chronic diseases such as heart disease, stroke, cancer, chronic respiratory diseases and diabetes account for 60% of all deaths worldwide, and the proportion is even higher in Hong Kong. These diseases are linked by common and preventable risk factors, notably high blood pressure, high blood cholesterol and overweight; and by related major behavioural risk factors: namely unhealthy diet, physical inactivity and tobacco use.
4. The traditional healthcare system focusing mainly on treatment of acute, episodic diseases and ailments can no longer effectively serve

populations encountering a shift in disease epidemiology and changes in demographic profiles. Evidence supports the effectiveness of population approach in modifying unhealthy behaviours, identifying high risk groups and early interventions to prevent and curb the progression of chronic health problems. The rapidly growing number of individuals and elders present with chronic diseases and functional problems urges for the building up of more universally accessible, integrated and comprehensive primary care services for disease management, maintenance of functional status and improvement in quality of life. International experiences show that healthcare systems with strong primary care infrastructures have healthier populations, fewer health-related disparities and lower overall costs for healthcare. Primary care reform is now a worldwide imperative.

### Primary Care Reform in Hong Kong

5. In Hong Kong, our healthcare delivery system evolved through different stages. Shortly after the Second World War, the Colonial Government adopted a direction of provision of healthcare for the poor and the needy, and allowing the private sector to look after those who could afford themselves. With public hospitals and clinics heavily subsidised by public funds, they naturally attracted a lot of patients, resulting in overcrowding and long queues of care. The Government decided to establish the Hospital Authority in 1990, with significant improvement to the hospital services, which cares for over 90% of inpatients in Hong Kong. Although there were also improvements at the public clinics and service centres provided by the Department of Health and the Hospital Authority in recent years, the private sector, which handles over 70% of primary care, was much left to their own initiatives until the recent few years.
6. I am sure most of the local participants are familiar with the problems we are facing. Just to re-cap, our total health expenditure amount to 5.2% GDP in 2004/05, of which public expenditure amounts to about 55% and 45% for private expenditure. Public health expenditure comes entirely from the Government budget. Ten percent of public health expenditure is spent on primary care, mainly for preventive public health services including disease prevention and health promotional programmes carried out by the Department of Health; and for curative general out-patient services targeting the low-income families, under-privileged, chronically-ill and poor elderly. Conversely, the public funded hospitals under the Hospital Authority provides 90% of hospital care in terms of hospital bed-days, of which about 80% of public health expenditure is allocated.
7. Public-private divergence, over-emphasis on episodic curative care, insufficient preventive services and inadequacy of continuous and comprehensive care resulting in a system that is not supportive for health promotion or disease prevention. The call for primary care reform and re-engineering of the healthcare system is thus imminent to bring to every citizen better access to healthcare services near to their home, and to cultivate long-term doctor-patient relationships for more holistic, comprehensive and continuity of care.
8. The first-stage public consultation on healthcare reform conducted last year revealed a broad consensus and support among the public to reform healthcare services, including reform of the primary care system. Although we only have a limited supply of family medicine specialists, studies have revealed that Hong Kong people are quite receptive to the concepts of good primary care and appreciate the principles of family medicine. To show the Government's commitment in implementing the reform, in the 2008-09 Policy Address, the Chief Executive has announced several initiatives on improving primary care. These include development of basic models for primary care services, promotion of Primary Care Registry or Directory, exploration of the new concept of 'Community Health Centre', setting up a Working Group on Primary Care, and the implementation of a number of pilot projects. I can assure you, despite the economic downturn, budget has been earmarked in the next few years to back up the reform.
9. The Working Group on Primary care and three Task Forces are formed to facilitate wide consultative process with stakeholders to formulate strategies and work-plans for the delivery of the reform initiatives. In the process, we put a lot of efforts on active discussions and sharing among members coming from the public and private healthcare sectors, academia, patient representatives and healthcare professionals of various disciplines and specialties, including many of the participants present here today.

### Conceptual Model of Primary Care

10. In reforming primary care, a new conceptual model developed upon family medicine's principles, at the same time taking into account public health approach in disease prevention and health promotion, is needed to guide the development of strategies.
11. Like other affluent societies, in Hong Kong, chronic disease burden is on the rise alongside with ageing of our population. Findings from local surveys suggest that more than one-quarter of the Hong Kong population aged 15 or above are suffering from hypertension, and about one-tenth of the adult population have diabetes mellitus. Even more alarming,

these surveys revealed more than half of the respondents who might be suffering from these two diseases did not notice of the problems until the time of survey, suggesting the existence of the first 'rule of halves'.

12. To tackle the problems with a population approach across the life-course, a basic model for the management of chronic disease is designed. It includes a comprehensive and continuous approach of care based on individual's needs and risks; covers primary prevention and lifestyle changes, assessment of high risk groups, early detection and management of diseases as well as quality care for more complicated conditions or disabilities. Coordinated inputs from multi-disciplinary teams, patient empowerment and interface with the community and other levels of care are highlighted. Proactive, preventive approach is emphasised in the model at all stages of care to prevent and stop the progression of diseases.
13. Meanwhile, based on the basic conceptual model, we are designing protocols for the prevention and management of hypertension and diabetes mellitus. Through promoting the uptake of these protocols, we envisage to establish common references for different healthcare sectors and to empower the patients and their carers; thus, to encourage territory-wide provision of quality and evidence-based primary care.

#### **The Primary Care Workforce and Primary Care Directory**

14. With the rapid development of knowledge and technology, it will be difficult, if not impossible, for a single doctor to provide the wide range of functions of primary care. Appropriate skill-mix provided by a multidisciplinary primary care team is often needed. In Hong Kong, apart from conventional western medicine practitioners, there are Chinese medicine practitioners, dentists, nurses, allied health professionals and other health and social services providers in the community, who all contribute to the delivery of primary care. To develop a well-integrated multidisciplinary patient-centred service network with synergy and partnership is an important challenge indeed.
15. To facilitate collaboration and teaming up of primary care providers for more comprehensive care, and to encourage the public to choose appropriate primary care practitioners, a Primary Care Directory listing the professional background and practising information of primary care providers will be developed. A more inclusive approach on entry is being adopted as a start, with recognition of existing practices and qualifications, in order to motivate wider participation. With input from the profession, basic maintenance

requirements such as continuous education, training and practising requirements will be considered, with a view to promote the quality and standard of primary care.

#### **Model of Delivery**

16. Another initiative in our primary care reform is the consideration of transforming the new conceptual model and protocols of preventive care and appropriate health checks into better primary care practices, and bridging the services of specialists' care and primary care. New care pathways and models of delivery are being explored, taking into account the roles and expertise of different organisations, funding mechanisms, physical locations, healthcare disciplines and levels of care. Taking management of diabetes as an example, a diabetic patient follows up in solo practising private practitioner can receive more comprehensive care if there are multi-disciplinary services or other resources readily available in the community, e.g. dietary advice, check-up by optometrists and self-care programmes, etc.
17. Instead of asking patients to make arrangement with multiple service providers for more comprehensive services, thoughts are given for one-stop services that allow patients to access a wider range of care delivered by a coordinated team of healthcare providers. The idea of setting up 'Community Health Centre', which will be made up of healthcare providers of different disciplines working together in the community as a virtual networks, integrated group practices or physically co-located teams will be examined, taking into consideration the practicability and needs of the local communities.

#### **Other Initiatives to Synergise the Reform**

18. As chronic disease will be a major burden and workload of primary care, and the majority of primary care providers are private practitioners, it is therefore important to engage them in the reform. Public-private partnership and shared care programmes are proposed to broaden the workforce. Sharing the care of chronic disease patients among primary and secondary care providers in different sectors also opens up opportunities for practitioners to receive training and decision support, and to improve mutual communications and understanding.
19. In order to facilitate the continuity and coordination of healthcare by different disciplines and the communications amongst them, we are going to develop a territory-wide, cross-sector electronic health record system. Apart from sharing of patient information, the system can also serve as a platform for professional support and generate useful epidemiological data for appropriate health policies.

20. As an initiative to test the market and patients' preferences, a few pilot projects were introduced in the past few years in public-private partnership, purchase of private services, and subsidised primary care through electronic vouchers for the elderly and seasonal influenza vaccination for children. The early results are encouraging.
21. After six months of discussions within the Task Forces, we are at the stage of summarising interim recommendations and action plans for the Working Group on Primary Care to consider. Pilot projects will continue to be introduced and we will share with you the progress when the plans are ready.

#### Areas to Explore

22. Apart from management of hypertension and diabetes, there are certainly other diseases or age-specific conditions that required integrated care, skillfully coordinated at the primary care level.
23. Although the prevalence of chronic health problems is high among the elders, majority of them are leading relatively independent lives in the community. To maintain their health, functional status and quality of life, easily accessible primary care focusing on prevention and early detection of disease with prompt management are mandatory. On the other hand, elders suffering from long-term health problems, functional impairment and social problems will benefit from integrating primary healthcare and social services pooling inputs from multiple systems. We will explore different models and protocols to better serve the multi-faceted needs of our senior citizens, and my colleagues and I are enthusiastic to learn from your experiences shared in the coming few days.
24. The document jointly issued by the WHO and WONCA '*Integrating mental health into primary care: A global perspectives*' expounded international perspectives on the advantages of integrating care for mental health problems into the primary care system. With the objectives of early diagnosis, early identification and community-centred care, there is a need for collaborations among the psychiatric specialists, primary care providers and social service sectors to strengthen and support patient care in the community.

#### Infectious Diseases

25. With the current pandemic of Influenza A (H1N1), better known as Human Swine Flu in Hong Kong, I am sure all of you will agree that a responsive primary care system is pertinent in protecting us against the threat of emerging and re-emerging infectious diseases. Many people are more familiar with primary care practitioners' role as public health partners

in preventing infectious disease by providing immunisation services, case detection and reporting, and caring of the sick. Here, I would also like to highlight the imperative role of family doctors and primary care in preventing and managing infectious diseases that required longer term treatment and continuity of care such as tuberculosis, HIV or AIDS; and primary care providers' role in counselling and supporting these patients and their families.

#### Primary Care and Public Health

26. The World Health Assembly's 'Resolution on Primary Health Care' asks member states to develop and implement disease-specific programmes in the context of integrated primary care in order to promote health of the community and the whole population. In this light, patient-centred primary care and community-oriented public health programmes have to be aligned for synergistic effects in promoting health of the whole population. For instance, advice given by family doctors on lifestyle modifications will need population-wide, cross-sector efforts in the community to make the social and physical environments more desirable for sustainable changes in behaviours. To build up territory-wide coordinated efforts, recommendations drawn by the Working Group on Primary Care will be shared and aligned with strategies drafted by the Steering Committee on Prevention and Control of Non-communicable Diseases. I am privileged to chair both advisory structures established under my Bureau.

#### Capacity of Workforce

27. In discussing primary care reform, the next important question is: do we have the adequate workforce, and, is the healthcare sector well-equipped to support a sustainable reform process? The increase in demands for disease prevention, management of chronic diseases and care for the elders requires supply of a wider range of healthcare disciplines, especially nurses and allied health staff. More nurses will be trained in the coming few years. It is not just the quantity that matters. The current training of healthcare workforce concentrates mainly on hospital and specialised care. More primary care and community care oriented training should be incorporated in the undergraduate and vocational training curricula.
28. As for the development and training of Family Medicine, I would like to invite the Hong Kong College of Family Physicians to further develop training structure and programmes to meet the changes in primary care, together with the other medical organisations and institutions. Apart from training newly graduated doctors, vocational training to be arranged for experienced doctors already engaged in primary care is also vital in building up a

larger workforce of doctors practising family medicine in the community.

**Conclusion**

- 29. When Hong Kong hosted the WONCA Asia Pacific Regional Conference for the first time in 1987, we were busy in setting up the Hospital Authority to streamline secondary and tertiary care. Now that we are hosting the WONCA Asia Pacific Regional Conference again, we are much more absorbed in preparing strategies and action plans to enhance primary care.
- 30. The challenges and agenda ahead are huge, full of uncertainties, incessant and by no means easy. With the support given by the public and the profession, together with the Government's commitment, I am confident that we can actuate the reform process. Nonetheless, the reform can only be sustainable if the value of quality primary care is acknowledged by everyone in our society. Fellow colleagues, ladies and gentlemen, I urge

all of you to join me in keeping the momentum of reform growing in the society. It's a long road but every step counts in building up a stronger and stronger primary care system, which will bridge to everybody health and better quality of life.

- 31. I look forward to the day when every citizen in Hong Kong, young or old, rich or poor, healthy or sick, can identify with a caring family doctor, entrust his (or her) health problems with him/ her, maintaining a long-term relationship; and through the family doctor, has ready and appropriate access to other specialists, facilities and service providers. I also look forward to hearing from your inspiring discussions and fruitful experiences shared in these few days. I wish the Conference a great success and all of you a rewarding experience, and for our international guests, an enjoyable stay in Hong Kong.

Thank you.



Off-Shot at Exhibition Booth



Off-Shot at Scientific Programme

## HKCFP Band

Dr. TB Chan, Basic trainee,  
New Territories East Cluster



HKCFP Band

The WONCA 2009 Asia-Pacific Regional Conference was a big success! Despite the global economic downturn and the threat of the H1N1 pandemic, hundreds of delegates from all over the world still came to Hong Kong and shared their experiences with one another. On 6 June night, the delegates enjoyed a splendid conference banquet which was held at the peak. The weather was fine and the view of the Victoria Harbor was breath taking. On that night, we enjoyed great foods as well as good music. In addition to the live music performed by a professional band, the "HKCFP band" made their first performance and played wonderful music for all those present.

### HKCFP Band members:



#### ◀ Dr. John Chung

Dr. Chung is the former president of HKCFP, also the co-chairman of the WONCA APR Conference 2009 host organizing committee. He started playing the piano since childhood, and played as a lead guitarist in rock bands since secondary school. He loves jazz, rock and blues. His professional guitar skills allowed him to play with a professional band at a bar, at the same time earning money as well! This was the first time the HKCFP have members forming a band and putting on a show; to Dr. Chung, the whole experience including the practices, rehearsals, and actual performance was "very enjoyable and exciting"!

#### Dr. Chan Hung Chiu ▶

Dr. Chan is the chairman of the board of conjoint examination, and the Vice-Chairman of the WONCA APR Conference 2009 host organizing committee. He started playing the guitar early in his secondary school days. He was a guitarist for a church choir many years ago. In his medical school days, he would join with other student friends on the piano and harmonica to play folk songs. He also enjoys playing jazz and blues. While practising for the HKCFP band show, he experienced "flash backs" of these precious memories.



#### ◀ Dr. Kenny Kung

Kenny is the associate consultant at the NTEC family medicine department. He started playing the piano at 6 years of age, and then the violin/viola since 12. Circumstances allowed him to play in front of the Queen during his secondary school days. Despite his western brought-up, his idol is still Jacky Cheung! Attempting to mimic this "singing god", he participated and won the 1997 World Chinese International Singing Contest. Because "nobody signed him for a superstar contract" (in his own words), he continued to be a doctor instead...! After the contest, he made an album named "My feeling", which is no longer on sale, but you can buy from him personally if you really want!

#### Dr. Garry Kung ▶

The second member of the Kung clan, Garry is the elder brother of Kenny, now working as a GP in the private sector. Garry started playing the piano at the age of 5, and discovered the gift of "perfect pitch" since age 7. He loves playing classical songs, though he plays contemporary hymns in his church regularly. His skill at improvisation is also indescribable. Previous performances included piano solo and duet performances in London, as well as piano concertos with a professional orchestra.





◀ Mr. Louis Kung

The third member of the Kung clan, recruited because of the need for an experienced drummer, Louis played the guitar and drum in rock bands since his teens. His love for music drove him to work in Tom Lee for three years in his "good old days", where he had the chance to meet many professional musicians of the 60s. He has a drum set at home, a place for the Kung clan to form a family band when time allows. He loves Pop and Blues. Louis's last band performance was in 1969, and the WONCA banquet band show was the first performance in 40 years! Louis said it was his "glory" to be invited to play in the HKCFP band.

Dr. TB Chan ▶

A community based Family Medicine trainee in the NTE cluster, TB is one of the younger member of the HKCFP band. He leads his church band as a guitarist and pianist. Previous performances include his outstanding singing (and lyrics tampering) at the HKCFP 30th anniversary dinner, and a duet performance with Kenny at the 2007 Shatin Health Festival (you can search for this in youtube!!). In this event, he played the bass for the first time, which he found to be very challenging. He will be making another appearance at the Prince of Wales Hospital 25th anniversary dinner.



◀ Dr. Raymond Yeung

Raymond is also a Family Medicine community trainee. He is gifted as both a saxophone player and as a classical guitarist. His debut performance for Family Medicine was actually at the WONCA opening reception on 4 June, where he formed the backbone of the instrumental accompaniment for the HKCFP trainee choir. Many of you probably didn't know, but he was invited to join the band only after his outstanding performance at the opening reception!

The Preparation

As the band comprised three private doctors, band practices could only take place at least after 8pm or even 9pm. Each session usually lasted 2-3 hours. We rented a band room in MongKok, where the equipments were okay. Nevertheless, there were always hard-rock bands playing very noisy music next door, which could really disturb our practice. We treasured the practices very much, especially Dr. John Chung, he looked so excited during the practices, and his guitar skill was marvelous!

The Band Show

On 6 June 2009, the HKCFP band finally made the debut appearance. Each one of the band members enjoyed every minute while they were on stage, thanks to our secretaries' enthusiastic support, and the active participation by all delegates. During the whole performance, everyone became "very high". People joined us in singing songs, and some guests even started dancing. Beyond our expectation, Dr. York Chow was pushed on stage, singing "Satisfaction" and "Words". The HA Chairman Mr. Anthony Wu also came on to stage and sang the song "Our way" (a play on the original song "My Way") with other HOC members.



▲ Dr. York Chow



▲ Dr. Gene Tsoi and Mr. Anthony Wu with the HKCFP Band

Apart from good musical performance, our team has also altered the lyrics of two songs to make them funny:

**Let it Be (Family doctor)**

When I find myself in times of trouble, a family doctor comes to me, speaking words of wisdom, let it be.

And in the hour of darkness I have something that needs remedy. A family doctor comes and visits me.

Let it be, let it be, let it be, let it be. A family doctor comes and visits me.

And when the broken hearted people lost their friends or family, a family doctor's counseling will be the key.

For though they may be parted there is still a chance that they will see. A family doctor can tell them, let it be.

Let it be, let it be, let it be, let it be. Whisper words of wisdom, let it be.

And who was there to give me training, like a light that shines on me. There's no else but HKCFP.

When I find myself in need of something to update me on things that's new, There's no one else but HKCFP.

HKCFP, HKCFP. There's no one else but HKCFP.



**Our Way (Original: My Way)**

By Dr. John Chung

And now, the end is near, and so we face the final curtain.

My friend, we'll say it clear, we've made it here, and that's no smooth ride. We've spent many long nights, listening to chairman, whipping us on.

And more, much more than this, we did it our way.

At first, no one rang up, and so we thought, no one would come.

And then, money dried up, HKCFP would go bankrupt.

But then, abstracts came in, sponsors coughed up, conference would live. We say, much more than this, we did it our way.

Chorus (1):

Yes, there were times you never knew, when the presidents and chairmen too, their hair turned white just over night, fearing that WONCA would throw us out.

We faced it all, and we stood tall, and made it our way.

And now, we are all here, with blood and sweat and tears right now.

And so our VIPs, greeting you all with a big smile.

Let's hope you wrote down all what has been said in past few days.

We say, much more than this, we did it our way.

Chorus (2)

Yes, we're glad WONCA will get its levy soon and say Thank you.

And next we'll go for WONCA world, just for fun and all the tears.

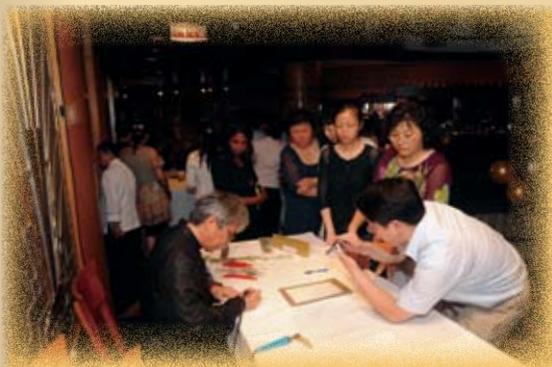
We faced it all, and we stood tall, 'cos it was our way.



Sing Along

**Final Words**

After participating in the HKCFP band, I realized that family doctors can be very all-rounded and can have a lot of talents. Joining HKCFP will not only benefit us academically but can also give us fun! Those who would want to take part, please give us a call!!



## My 1st WONCA

Dr. Frances Yu, NTEC Community-based Trainee, Honorary Clinical Tutor of CUHK

Although I've heard about WONCA for a few years since I entered family medicine training, I had absolutely no idea about it until my first attendance this year. I had expected the conference to be packed with long dragging lectures, but it turned out to be a valuable and inspiring experience for me.

It was also the first time I've ever taken part in a research project and presented the results publicly. Before the WONCA, I perceived research as something quite unreachable and highly academic. My perspective on research was eminently changed after listening to the oral presentations of some innovative research projects by local and overseas family doctors. Much of their research areas were on the common problems we face in daily practice and were based on the community population in our primary care settings. It has broadened my view on the scope of research we can do as a family doctor and on the possible future development of Family Medicine. As primary health care doctors, family physicians are in an excellent position to assess and improve current community health care. Every individual doctor has their own interest and expertise, so WONCA has given us a precious chance to form bridges with other local and overseas doctors for exchange of our ideas and knowledge. I also got to know much more about the cultures and beauty of different countries through the illustrations by overseas doctors.

I was enriched not only by the conferences, but also by the banquet dinner. Family doctors are holistic not only during their work, but they are also all-rounded in person. The lively music played by our college's brilliant music band heightened the atmosphere of that night. Many of the doctors from different parts of the world were also enchanted by the music and danced gracefully throughout the whole night. I'm looking forward to future WONCAs for further delightful, thought-provoking experience through working with ingenious and enthusiastic family doctors from all over the world.



Working hard by day, and playing hard at night

**WONCA** is an acronym comprising the first five initials of the **World Organization of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians**. Wonca's short name is **World Organization of Family Doctors**. The total membership of the member organizations of Wonca is over 200,000 family physicians in 79 countries. The Wonca Conference each year attracts delegates from different parts of the world.



*The 22nd HKCFP Fellowship Conferment Ceremony this year was held in the Hong Kong Convention and Exhibition Centre on 6th June 2009. We would like to introduce Professor Chris van Weel, Honorary Fellow of HKCFP and Dr. Chris Mitchell, President of RACGP.*

### Professor Chris van Weel, FRCGP



Professor Chris van Weel is conferred the Honorary Fellow of HKCFP this year. He is also the World Wonca President. His academic work is directed at teaching and research in primary care.

Since 1985 and 1987 respectively, Professor Van Weel has been Professor and Head of the Department of General Practice at the University Medical Centre, Nijmegen, The Netherlands.

His active role in teaching and research has resulted in the development of a community oriented curriculum in which Family Medicine plays a leading role. This curriculum reform, introduced in 1995, has made Nijmegen University the leading Medical Centre in the country.

Professor van Weel developed a research programme of chronic diseases in family practice which is part of the Nijmegen Centre 'Evidence Based Medical Practice' and the Netherlands School of Primary Care Research (CaRe) of which he is one of the founders. The academic practice based research network provides the essential data for the Nijmegen Continuous Morbidity Registration / Monitoring Project.

In 1992 he founded (and currently chairs) the EU Socrates (formerly Erasmus) Exchange Programme Primary Care for medical students of several European universities.

In 2007 Professor van Weel was appointed as President of Wonca.

### Dr. Chris Mitchell

BMed, DipRACOG, FRACGP, FACRRM, FARGP, Grad Dip Rural, FAICD



Dr. Chris Mitchell is the current President of the Royal Australian College of General Practitioners (RACGP) and the immediate past Chair of the RACGP National Rural Faculty. He was also a member of the RACGP National Expert Committee on Standards for General Practices, contributing to the successful RACGP *Standards for general practices* (3rd edition).

Dr. Mitchell has been a rural general practitioner in northern New South Wales for twenty years and has an appointment at Ballina Hospital.

He has over ten years experience as a director of not-for-profit boards, gaining a Fellowship of the Australian Institute of Company Directors. Until his election to the RACGP Presidency he chaired North Coast General Practice Training, a regional general practice training provider. He is a mentor, supervisor and examiner in general practice. He also has a range of experience on different boards including the Northern Rivers GP Network, the New South Wales Rural Workforce Agency, the Rural Doctors Network (RDN), and the Remote Vocational Training Scheme (RVTS), which provides general practice training in Australia's remote communities.

## HKCFP Best Research Award 2008 and HKCFP Research Fellowship 2009



Recipient of Best Research Award 2008,  
Dr. Fung Siu Cheung, Colman

The Research Committee is delighted to announce that the study on "A Qualitative Study of Patients' Views on Quality of Primary Care Consultations in Hong Kong and Comparison with the UK CARE Measure" has been awarded the HKCFP Best Research Award 2008. The Committee would like to congratulate the researcher – Dr. Fung Siu Cheung, Colman for his work.

It is also our pleasure to announce the winners of the HKCFP Research Fellowship 2009 are Dr. Chiang Lap Kin and Dr. Yau Lai Mo.

Dr. Chiang Lap Kin is now working in the General Out-patient Department of Kwong Wah Hospital. He graduated from the medical school of the Chinese University of Hong Kong in year two thousand. He completed basic training in family medicine in 2005, and then was awarded Master of Family Medicine by Monash University in year 2008. Dr. Chiang developed his interest in research during his study in Master course. Being a research team member of Kwong Wah Hospital, he and his colleagues will continue research projects relating to family medicine. His research project is "Usefulness in using Portable Overnight Pulse Oximeter for Screening Obstructive Sleep Apnea in Adult Patients in Primary Care Setting". Obstructive sleep apnea (OSA) is a condition characterized by sleep disordered breathing resulting in health impairment and other related injuries. There are vast numbers of patients presented to primary health care physicians for symptoms, such as frequent snoring at night suggestive of OSA. Due to the limitation of clinical assessment and lack of diagnostic tests, the primary health care physicians cannot do much for their patients.



Recipient of Research Fellowship Award 2009,  
Dr. Chiang Lap Kin

In this study, the effectiveness of the easily available and cheap pulse oximeter in diagnosing OSA will be compared with that of sleep study. Sleep study is the gold standard for diagnosing OSA, however, it is time consuming and costly. If the correlation between these two tests is statistically significant, pulse oximeter can be implemented for OSA screening in primary health care. As a result, patients who have suspected OSA can be diagnosed and managed earlier in primary care to prevent complications.

Dr. Yau Lai Mo received his basic medical degree from The Chinese University of Hong Kong. During his medical study, he enrolled in the Intercalated Research Programme and was awarded Bachelor in Medical Sciences with first class honour. Dr. Yau is currently a higher trainee in family medicine. He has extensive clinical experiences in various specialties including palliative care medicine. His research project is "Study on the Cancer Risk Perception and Prevention Behaviours among Relatives of Terminal Cancer Patients and the Role of Family Physicians in caring for them". Cancer is the leading cause of death in Hong Kong. Relatives of cancer patients may have worries of increased cancer risk. Such worries will affect their psychological well being and subsequent health care resources utilization. Family physicians may play an important role in caring for this group of people in addressing their worries and provide evidence based advice on preventive measures for cost effective use of resources. However, this mode of care is not well established in Hong Kong.



Recipient of Research Fellowship Award 2009,  
Dr. Yau Lai Mo

The study aims at finding out the risk perception of cancer patient's relatives and their needs as well as the potential of family physicians in carrying such care. As there are no local data on this topic, a combined quantitative and qualitative approach is adopted. This involves questionnaire survey targeting those relatives and focus group discussions with family physicians.

This study will provide insight for family physicians in planning an effective and comprehensive care for the relatives of cancer patients. It helps to form a holistic primary care service in the whole cancer care model.

## "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.

For this month, from 15th July till 14 August, 2009, Dr. Winnie Chan and Dr. Mark Chan will be the Council Members on duty. Please feel free to make use of this channel to voice your doubts, concerns, queries, and comments about anything relating 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](mailto: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. Winnie Chan



Dr. Mark Chan

Dr. Raymond C H Lo  
Co-ordinator, CMOD System

## Membership Committee

The Council approved, on recommendation of the Membership Committee Chairman, the following application for membership in **June 2009** Council Meeting:

### Associate Membership (New Application)

Dr. Ward Susan Clare

## Board of Vocational Training and Standards News

### Reminder: Application for Recommendation for Exit Examination

To all Higher Trainees,

For those who prepare to sit for exit examination in **2010**, please submit the application letters and the checklists for recommendation for exit examination before **30 September 2009**.

**Late applications will not be entertained.**

Should you have any enquires, please contact our College Executives, Ms Carmen Cheng and Mr Patrick Wu at 2528 6618.

Higher Training Subcommittee  
BVTS

## Specialty Board

The Specialty Board is pleased to announce that the following doctors have been successfully nominated as Fellows of the Hong Kong Academy of Medicine (Family Medicine):

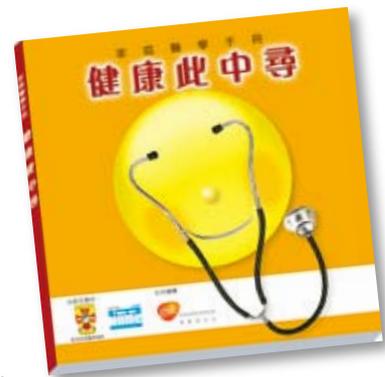
Dr. Chan Yin Chiu  
Dr. Chung Chi Yan Benny  
Dr. Kong Chun Yuk  
Dr. Kwong Siu Kei  
Dr. Lam Chi Yuen Johnny  
Dr. Lam Hiu Lam  
Dr. Lau Pui Ling  
Dr. Li Heung Wing

Dr. Ng Ming Shing  
Dr. Ng Tsz Kin  
Dr. Shek Hon Wing  
Dr. Tsui Hoi Yee  
Dr. Wong Chi Lung  
Dr. Yim Chi Ling  
Dr. Yu Pui Hang, David

## Public Education Committee : New Book Launch

The Hong Kong College of Family Physicians (HKCFP) is delighted to announce the publication of 《健康此中尋》- that aims to increase the community awareness of common diseases and enhance doctor-patient communication.

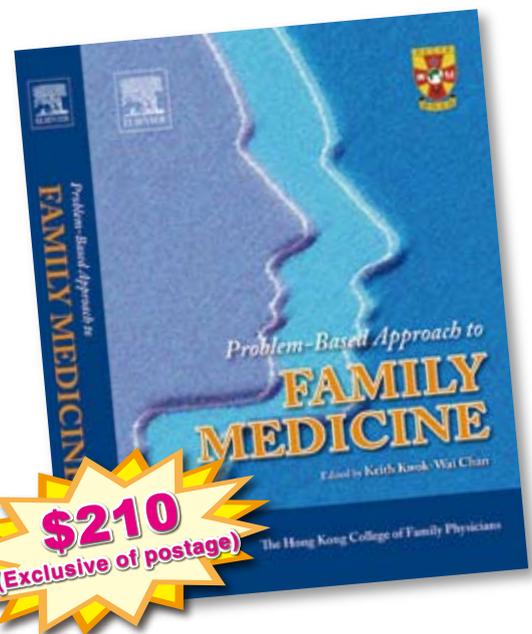
- Book name: 《健康此中尋》  
 Author: The Hong Kong College of Family Physicians  
 Take Me Home (Local community papers)  
 Sponsor: GlaxoSmithKline Ltd  
 Feature:
- Easy-to-read presentation in Chinese
  - 100 pages
  - More than 20 common diseases or health related information
  - Self evaluation assessments
  - "Tips for talking to your doctors"
  - Health reminders



For those who are interested, self-collection is now available at our Wanchai office. For details, please contact Miss Dickie Lam at 2861 0220.

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

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



\*\*\* \$210 is for self-collection at Wan Chai or Wong Chuk Hang office. Amount of postage fee depends on the number of books ordered. For details, please contact Carmen Cheng or Patrick Wu at 2528 6618.

## ORDER FORM

To: HKCFP  
 Room 701,  
 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 Problem-based Approach to Family Medicine.

Enclosed please find cheque payment of HK\$ \_\_\_\_\_.

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

Name : \_\_\_\_\_ Email Address : \_\_\_\_\_

Postal Address : \_\_\_\_\_

Tel No. : \_\_\_\_\_ Date : \_\_\_\_\_

\*Please circle your category of membership.

**Classified Advertisements**

Positions Vacant

**Accredited Private FM Centre invites energetic Doctors** to join for expanding services. Basic / higher FM Trainee, A&E Officers, specialists welcomed. Attractive Salary + Bonus. Send CV [enquiry@adecmed.com](mailto:enquiry@adecmed.com) (Attention: Amy CHAN).

\* \* \* \* \*

Full time associate wanted by a medical esthetic clinic. Training provided, lots of learning opportunities, especially suitable for new graduates. 11 AM – 9 PM, basic salary plus bonus, guaranteed ≥ \$80,000. Sunday off. Interested please call Miss Chu 9236 0591.

**Accredited Private FM Centre invites Specialists** for sessional consultations, 1-2/wk Cardiologists, ENT, Psychiatrists, Ophthalmologists and Gynecologists most welcomed. Good terms + Bonus. Send CV [enquiry@adecmed.com](mailto:enquiry@adecmed.com) (Attention: Amy CHAN).

Clinic for Takeover

**New modern spacious** G/F fully furnished and computerised equipped walk-in-and-practice **clinic next to North Point MTR Station** for take-over, Good Bargain for value, Ms Amy Chan 9212 6654.

Miscellaneous

We are a band of family doctors looking for a bass guitarist. We like pop, rock and jazz too. You must have your own guitar. If you are interested and want to expand your musical horizon, please email to [jtnchung@yahoo.com](mailto:jtnchung@yahoo.com).

# dch

## the children's hospital at Westmead

### Diploma in Child Health

and

**The Coppleson Committee for Continuing Medical Education**

**The University of Sydney**

ABN 15 211 513 464

The Diploma in Child Health, DCH (Syd), is a postgraduate course in paediatrics for doctors and **is a quotable qualification in Hong Kong**. It is jointly awarded by The Children's Hospital at Westmead and the Coppleson Committee for Continuing Medical Education of the University of Sydney.

The DCH (Syd) offers an evidence based comprehensive overview of current best practice in paediatrics. There are 111 hours of lectures and supporting material from The Children's Hospital at Westmead delivered as distance education augmented by a weekly hour long tutorial given in Hong Kong by expert local Paediatricians.

Fees: international doctors pay AUD\$5,840. See [www.chw.edu.au/dch](http://www.chw.edu.au/dch) for 2010 application information and online enrolments.

Successful graduates of the DCH (Syd) attain 2 units of advanced standing for the Masters in Medicine, Paediatrics, from the University of Sydney, also a distance education program. This opportunity is strongly encouraged.

DCH (Syd) graduates receive CPD & CME points from the HKMA and the HKCFP.



## Introduction of Medication Reconciliation Service

The recent drug incidents have raised significant concern to the public regarding drug safety. Drug incidents could occur at different stages including the processes of drug manufacturing and the various steps of drug administration. A forum on drug safety held by the Hong Kong Academy of Medicine was conducted in April 2009. Medication reconciliation service was introduced by Mr. William Chui, Education Director, Society of Hospital Pharmacists of Hong Kong.

Medication reconciliation (MR) is a proactive process by the healthcare team, to obtain a complete, accurate and up-to-date list of medications at each transition point of care with the goal of improving medication safety. Under the concept of medication reconciliation, taking a thorough medication history including all the changes made by different parties is one of the crucial processes. From early experience of other countries, implementation of medication reconciliation together with a series of intervention could reduce the rate of medication errors by 70% and reduce adverse drug events by 15%.<sup>1</sup>

Many factors contribute to the inaccuracy of medication records:

1. Doctor shopping is common in Hong Kong. In this setting, medications may be adjusted or changed following consultation with one or more private doctors.
2. Patients may be attending different clinics within the Hospital Authority and private doctors. Duplications and omissions of medications could occur.
3. Patients are increasingly taking ownership of their own health. They may self-adjust or even discontinue their prescribed medications for different reasons. Some of them may be taking over-the-counter products which can clash with prescribed therapies.
4. Patients may not bring the most updated list of medications to the doctor during consultation.

Medication reconciliation service was first introduced in Hong Kong in March 2008 in Queen Mary Hospital. A busy medical admission ward was selected as the first place to start medication reconciliation work. For each patient, the clinical pharmacist would review the computer record to compile an initial medication list before proceeding to interviewing the patients or their care-givers. When discrepancies are found, further attempts would be made to clarify if they are intentional or unintentional. This is because they could be unintentional discrepancies caused by misleading computer record, or they could be intentional changes of medications not properly documented on previous medical records. Therefore, detailed documentation of the reasons and the details of medication changes are particularly important. Good communication with the medical professions is vital in ironing out the differences.

In the first nine months of service (from March 2008 to December 2008), 2290 patient records were reviewed, 327 of them (14% of records) contained unintentional discrepancies. 452 clinical pharmacist interventions were made at the same time medication reconciliation was carried out. These interventions were on dosage adjustment based on renal function, alert on possible adverse drug reactions, possible drug interactions, etc. Promising initial results with greater acceptance and recognition by other health care professions on medication reconciliation were received.

The concept of medication reconciliation shows the importance of close collaboration between pharmacists and doctors on prevention of drug incidents. As family physicians, the concepts and application of medication reconciliation are also essential in our daily practice in optimising the drug treatment of each patient.

Thanks very much Mr. William Chui for sharing the information with us.

*Compiled by Dr. Alfred Kwong*

### Reference

1. Whittington J, Cohen H. OSF Healthcare's journey in patient safety. *Qual Manag Health Care* 2004;13(1);53-59.

*"Submissions of articles to News Corner with up to 500 words are always welcome. Email: [terlee@hkcfp.org.hk](mailto:terlee@hkcfp.org.hk)"*

## And the Party goes on and on and on . . . . .

Dr. Judy Cheng,  
Community-based Trainee of New Territories East Cluster

If you didn't attend WONCA 2009, you would have probably been congratulating yourself for successfully evading all the tedious and dreadfully formal plenaries and blah, blah, blah. But after reading this issue's After Hours, you'll definitely regret that you didn't join in the Party! The truth is Hong Kong WONCA 2009 blew the WONCA delegates' minds!

It all started with a band of doctors named the HKCFP Lonely Hearts Club at the Conferment Banquet. There were a once-long-maned hippie, an amorous guitarist, a silver haired drummer, a soulful pianist, a heart wrenching lead singer and a spirit filled singer. And the crowds became crazy once the music hit the floor!

Dr. York Chow needed no further encouragement to grace the stage with his singing. Examiners and trainees were finally on the same level with the amount of hip swinging going on; international delegates of all nations and countries united in arm waving. There were doubts amongst the catering staff that the party animals on the dance floor adorned white frocks in the morning. The most often quoted remark from guests was that they never had so much fun in medical conferences.



Dr York Chow shows us what rock'n roll is all about.



We've always thought the examiners were a bit crazy . . . now we've got proof!!

The atmosphere was so contagious that our other hired band refused to stop despite their contractual time and the catering staff even joined in! We sure did show that Family Medicine Doctors rock inside AND outside of their white coats!

Apart from showing the true Hong Kong spirit, the Conferment Party captured the true essence of WONCA. For those of you out there who still think WONCA is all about papers and presentations, it's actually about the sharing and conglomeration of Family Doctors from all over the world.



The mingling of kindred spirits



And finally the secretariat board who made all of this possible . . . . .

*"Submissions of articles to After Hours with up to 500 words are always welcome. Email: [terlee@hkcfp.org.hk](mailto:terlee@hkcfp.org.hk)"*

## Assessment Enhancement Course (AEC)

Dr. Chan Chi Wai, Supervisor of AEC

I have to salute to the pioneers who set up the Assessment Enhancement Course (AEC) for the college members. It is still a vivid memory of the journey to the conjoint examination. I could not forget the mixed feeling of perplexity, anxiety, perseverance, delight and sense of achievement in the small study group. We cherish the friendship gained. To help members prepare for the Conjoint Fellowship Examination, this original distant learning course was initiated by Dr. Kwok-wai Chan as the supervisor and Dr. Ka-wah Wong as the coordinator in 2000. The name was changed to the Assessment Enhancement Course (AEC) in 2001. However, it is not simply an examination drilling course, but a series of educational activities, aiming to improve clinical knowledge, problem solving and consultation skills through different workshops. We also aim to improve physical examination technique and clinic procedural skills through hands-on experience and provide opportunities for inter-professional communication and social network expansion through self help groups. Creating an examination atmosphere and setting helps improve time management and release the stress of uncertainty.

All along the Assessment Enhancement Course (AEC) has inherited a tradition that successors who have just overcome these hurdles will help the future candidates to go through this milestone. It is one of the invaluable and renowned educational activities held by the Board of Education of HKCFP. To encourage candidates to participate in the

sample cases demonstration in the introductory session, we told them that the first candidate to participate will usually pass the coming examination. Of course we did not have any figure as such but we did conduct a simple survey on the examination result in 2007 for your reference.

### Passing Rate: AEC participants vs non-AEC participants in 2007

	Pass	Fail	Total
AEC	15 (44.1%)	19	34
Non-AEC	10 (22.2%)	35	45
Total	25 (31.6%)	54	79

By Fisher's exact test ;  $p=0.0515$

There was an increasing number of candidates over the years. I would like to send my deep gratitude to all tutors for their help and genuine sharing. They have given their time as unknown heroes and uphold the spirit of cooperation and support among colleagues. In the future, we hope to recruit more enthusiastic tutors, anticipating that the course will accept more candidates sitting for different examinations in Family Medicine, such as DFM, as well as other non-vocational trainees and practitioners, either local or overseas, who would like to enhance their skills and knowledge in primary health care.



Discussing Cases in the Assessment Enhancement Course

## Certificate Course in Smoking Cessation & Counseling

The Hong Kong College of Family Physicians  
Co-organized with Our Lady of Maryknoll Hospital and  
Department of Family Medicine & Primary Health Care, KWC (Hospital Authority)

Sponsored by Celki Medical Company, Johnson & Johnson, GlaxoSmithKline Limited,  
Novartis Pharmaceuticals (HK) Ltd and Pfizer Corporation Hong Kong Ltd

Dates	:	18 July, 25 July, 8 August and 15 August 2009 (Saturdays)
Time	:	1:00 – 2:00 pm Lunch 2:00 – 4:00 pm Lectures & Discussion
CME/ CPD Points	:	HKCFP: 2 CME Points for each session (Cat. 4.3) MCHK: 2 CME Points for each session Up to 2 CPD Points (Subject to submission of satisfactory report of Professional Development Log)
Venue	:	Shanghai Room, Level 8, Langham Place Hotel, 555 Shanghai Street, Mongkok, Kowloon
Course Fee	:	<b>HKCFP Members</b> : <b>HK\$100</b> HKAM Registrants : HK\$150 Non-members : HK\$300 (All fees received are non-refundable and non-transferable.)
Award	:	Those who have attended 75% or more of all the sessions will awarded a <b>"Certificate of Attendance"</b>
Capacity	:	80 participants

### Programme Schedule

Date	Topics	Speakers	Moderators
18 Jul 09 (Sat)	Opening Introduction	Dr. Gene W. W. Tsoi <i>President, The Hong Kong College of Family Physicians</i>	Dr. Ngan Po Lun
	Tobacco on Health, Tobacco Nicotine Addiction & Treatment Approaches	Dr. Wong Chak Yen <i>Senior Medical Officer, TB and Chest Unit, Wong Tai Sin Hospital</i>	
	Pharmacological Management of Nicotine Addition and Demonstration of CO Monitor	Ms. Annette Tsang <i>Pharmacist &amp; Smoking Cessation Counselor, Our Lady of Maryknoll Hospital</i>	
25 Jul 09 (Sat)	Hazard of Second Hand Smoke, What Doctor Can Do?	Professor Lam Tai Hing <i>Head, Department of Community Medicine, The University of Hong Kong</i>	Dr. Francis Lee
	Experience Sharing on Drug Treatment for Smoking Cessation	Dr. Ip Lap Shun <i>Consultant Respiratory Physician (Union Hospital), FHKAM in Medicine</i>	
8 Aug 09 (Sat)	Stage-matched Intervention in Promoting Smoking Cessation	Tung Wah Group of Hospitals  Dr. Ronald Lam <i>Head, Tobacco Control Office, Department of Health</i>	Dr. Ngan Po Lun
	Dealing with Lapse and Relapse		
	Tobacco Control in Hong Kong		
15 Aug 09 (Sat)	Practise on the Counseling Process & Debriefing	Ms. Chan Ching <i>APN &amp; Smoking Cessation Counselor, Dept. of FM &amp; PHC, KWC, Hospital Authority</i> <b>Other Smoking Cessation Counselors</b> <i>KWC, Hospital Authority</i>	Dr. Francis Lee
	Other Smoking Cessation & Counseling Resources	Ms. Chan Ching	

\*\*\* All cheques payable to "HKCFP Education Ltd". Please call the College secretariat, Ms Dickie Lam at 2861 0220 for any enquiry. \*\*\*

### REPLY SLIP

To: HKCFP, Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, H.K.  
(Fax no.: 2866 0981)

Dear Sir/ Madam,

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

I would like to attend **"Certificate Course in Smoking Cessation & Counseling"**.

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

## Certificate Course on Respiratory Infection

Co-organized by American College of Chest Physicians (Hong Kong and Macau Chapter)  
Hong Kong Thoracic Society  
The Hong Kong College of Family Physicians

**Sponsored by GlaxoSmithKline Limited**

Dates	:	26 September, 10, 17 and 24 October, 2009 (Saturdays)		
Time	:	1:00 – 2:15 pm Lunch 2:15 – 4:30 pm Lectures & Discussion		
CME/ CPD Points	:	HKCFP: 3 CME Points for each session (Cat. 4.4) MCHK: 3 CME Points for each session HKCP: Pending Up to 2 CPD Points (Subject to submission of Satisfactory report of Professional Development Log)		
Venue	:	HKMA, 5/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai		
Course	:	Members (HKCFP or HKTS/ACCP)	:	HK\$100
		HKAM Registrants	:	HK\$150
		Non-members	:	HK\$200
		(All fees received are non-refundable and non-transferable.)		
Co-ordinators	:	Dr Tse Pak Yiu Senior Medical Officer, Tseung Kwan O Hospital Dr Francis Lee Member of Board of Education, The Hong Kong College of Family Physicians		
Award	:	Those who have attended 75% or more of all the sessions will be awarded a "Certificate of Attendance"		
Capacity	:	60 participants		

### Programme Schedule

Date	Topics	Speakers	Moderators
26 Sep 09 (Sat)	Management of CAP: Update and Highlights of Recent Treatment Guidelines	<b>Dr. Chan Hok Sum</b> <i>Consultant, Department of Medicine, Alice Ho Miu Ling Nethersole Hospital</i>	Dr. Francis Lee
	Antibiotic Resistance in CAP: Conscientious Use of Antibiotics and Role of Pneumococcal Vaccines	<b>Dr. Yu Wai Cho</b> <i>Consultant, Department of Medicine and Geriatrics, Princess Margaret Hospital</i>	
10 Oct 09 (Sat)	Prevention and Control of TB – Role of the Family Physician	<b>Dr. Tam Cheuk Ming</b> <i>Consultant Chest Physician i/c, TB &amp; Chest Service, Department of Health</i>	Dr. Ngan Po Lun
	Atypical Pneumonias	<b>Dr. Yeung Yiu Cheong</b> <i>Associate Consultant, Department of Medicine and Geriatrics, Princess Margaret Hospital</i>	
17 Oct 09 (Sat)	Common Respiratory Infections in the Immunocompromised Patients	<b>Dr. Lee Man Po</b> <i>Associate Consultant, Department of Medicine, Queen Elizabeth Hospital</i>	Dr. Francis Lee
	URTI Including Influenza: Treatment and Prevention	<b>Dr. Ng Chun Kong</b> <i>Associate Consultant, Department of Medicine, Queen Elizabeth Hospital</i>	
24 Oct 09 (Sat)	Approach to Unresolved Pneumonia	<b>Dr. Chu Chung Ming</b> <i>Chief of Service, Department of Medicine and Geriatrics, United Christian Hospital</i>	Dr. Ngan Po Lun
	Role of Respiratory Infections in Airway Diseases (Asthma/ COPD)	<b>Dr. Fanny Ko</b> <i>Associate Consultant, Department of Medicine &amp; Therapeutics, Prince of Wales Hospital</i>	

\*\*\* All cheques payable to "HKCFP Education Ltd". For any enquiry, kindly contact College Secretariat, Ms Dickie Lam at 2861 0220. \*\*\*

### REPLY SLIP

To: HKCFP, Room 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, H.K. (Fax no.: 2866 0981)

Dear Sir/ Madam,

I am a **\*Member/HKAM Registrant/ Non Member** of The Hong Kong College of Family Physicians or **HKTS/ACCP Member**.  
**(\*Please delete as appropriate)**

I would like to attend "Certificate Course on Respiratory Infection".

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

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

## The Board of Education would like to thank you for your support for more efficient use of resources

It is the tradition of the HKCFP to offer free admission for continuous medical education (CME) to our members. However, in recent years, the actual attendance for members who have enrolled for lunch/dinner lectures gradually declined. In order to utilize our limited resources in a better way, the Board of Education carried out the Enrolment Deposit Scheme for a six month trial period from 1st January 2009 to 30th June 2009 aiming to improve attendance rate for members who enroll for lunch/dinner & lectures.

Thanks to the support of all of you, the Enrolment Deposit Scheme appears to be successful in improving attendance rate. From February 2009 to 23rd June, 2009, the Board of Education organized eleven lunch/dinner lectures that required enrolment deposits. The total number of members who enrolled for lunch/dinner & lectures which required enrollment deposit was 942; the actual attendance was 914, making an actual attendance rate of 97.03%. This is an excellent improvement from the previous figure of around 60%. The total number of members who enrolled only for lectures, which did not require an enrollment deposit, was 150; the actual attendance was 96, making an actual attendance rate of 64%. This is somewhat similar to our previous figure.

Because the Enrolment Deposit Scheme appears to be successful in improving the attendance rate for members who enrolled for lunch/dinner & lectures, the Board of Education would like to continue the enrolment deposit procedure.

The Board of Education will review the proposal monthly and your valuable feedback is always welcomed.

Please call, mail or fax your suggestions to our secretariat Charlotte or Winniea.

Tel: 2861 0220 Fax: 2866 0981 Email: [winniea@hkcfp.org.hk](mailto:winniea@hkcfp.org.hk)

Address: The Hong Kong College of Family Physicians, 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wan Chai, Hong Kong.

Thank you for your attention.

### 1 August 2009 Saturday

#### Board of Education Interest Group in Mental Health and Psychiatry in Primary Care

Aim	To form a regular platform for sharing and developing knowledge and skill in the management of mental health	
Theme	Obsessive – Compulsive Disorder: An Update	
Speaker	<b>Dr. Ng Fung Shing</b> Psychologist	
Co-ordinator & Chairman	<b>Dr. Chan Suen Ho, Mark</b> The Hong Kong College of Family Physicians	
Time	1:00 p.m. – 2:15 p.m. Lunch 2:15 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 Cantonese.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	

Note

**Participants are encouraged to present own cases for discussion.  
Please forward your cases to the Co-ordinator via the College secretariat 2 weeks prior to meeting.**

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### 9 August 2009 Sunday

Topics and Speakers:

#### 1.Surgical Treatment for BPH – What's New

**Dr. Ng Man Tat**  
*Associate Consultant, North District Hospital,  
Honorary Assistant Professor, Department of Surgery, CUHK*

#### 2.Medical Treatment for BPH – Insights from Urologist

**Dr. Michael Wong**  
*Medical Director & Senior Consultant Urologist,  
Singapore Urology & Fertility Centre*

Chairman	<b>Dr. Chan Yin Hang</b> The Hong Kong College of Family Physicians
Time	1:00 p.m. – 2:15 p.m. Buffet Lunch 2:15 p.m. – 4:00 p.m. Lectures & Discussion
Venue	Pearl Ballroom, 2/F, Eaton Hotel, 380 Nathan Road, Kowloon

Admission	Members	Free
Fee	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 CME Points MCHK	
Up to 2 CPD Points (Subject to submission of satisfactory report of Professional Development Log)		
Language	Lectures will be conducted in English.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	

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### 16 August 2009 Sunday

#### The Update Management of Common Mood Disorders

Topics and Speakers:

##### 1. Update on Bipolar Disorder

Dr. Chung Ka Fai  
*Associate Professor, Chief of Inpatient Clinical Affairs,  
Department of Psychiatry, Faculty of Medicine,  
The University of Hong Kong*

##### 2. The Role of Noradrenaline and Dopamine Reuptake Inhibitor in Depression

Dr. Lee Wing King  
*Senior Medical Officer, Specialist in Psychiatry*

##### 3. Treating Mood Disorders: How to Start in GP Setting

Dr. Law Sai On  
*Family Physician in Private Practice*

##### 4. Functional Gastrointestinal Disorders and Mood Disorders

Dr. Arthur D. P. Mak  
*Resident Specialist, Consultation Liaison Psychiatry  
Prince of Wales Hospital*

Dr. Justin C. Y. Wu  
*Associate Professor, Institute of Digestive Disease,  
Department of Medicine & Therapeutics,  
The Chinese University of Hong Kong*

Chairman	<b>Dr. Chan Chi Wai</b> The Hong Kong College of Family Physicians	
Time	1:00 p.m. – 2:15 p.m. Buffet Lunch	
	2:15 p.m. – 5:00 p.m. Lectures & Discussion	
Venue	Star Room, 42/F, Langham Place Hotel, 555 Shanghai Street, Mongkok, Kowloon	
Admission	Members	Free
	Non – members	HK\$ 300.00
Fee	HKAM Registrants	HK\$ 150.00
	All fees received are non-refundable and non-transferable.	
Accreditation	3 CME Points HKCFP (Cat. 4.4)	
	3 CME Points MCHK	
Up to 2 CPD Points (Subject to submission of satisfactory report of Professional Development Log)		

Language	Lectures will be conducted in English.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	

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### 23 August 2009 Sunday

#### Medico-legal Alert on Psychiatry and Mental Health

Topics and Speakers:

##### 1. Lawyer Aspect: Common Medico-legal Issues in Psychiatry, Mental Health and Family Medicine

Dr. David Kan  
*Partner, Richards Butler Solicitors*

##### 2. Psychiatry Aspect: Medical Legal Pitfalls in Psychiatry Practice

Dr. Ting Shik Chuen  
*Specialist in Psychiatry,  
President, The Hong Kong Society of Psychiatry*

##### 3. Family Medicine Aspect: Malpractice in Family Medicine Psychiatry

Dr. Choi Kin  
*Specialist in Nephrology,  
Immediate Past President, The Hong Kong Medical Association*

##### 4. MPS Aspect: Risks and Common Medico-legal Problems in Mental Health

Dr. Teoh Ming Keng  
*International Medico-legal Adviser, Medical Protection Society*

Co-organizers	Medical Protection Society, The Hong Kong College of Family Physicians (Interest Group in Medico-legal Alert), The Hong Kong Society of Psychiatry	
Chairman	<b>Dr. Leon Tong</b> The Hong Kong College of Family Physicians	
Time	1:00 p.m. – 2:15 p.m. Buffet Lunch	
	2:15 p.m. – 5:00 p.m. Lectures & Discussion	
Venue	Ballroom I & II, Level 7, Langham Place Hotel, 555 Shanghai Street, Mongkok, Kowloon	
Admission	Members	Free
	Non – members	HK\$ 300.00
Fee	HKAM Registrants	HK\$ 150.00
	All fees received are non-refundable and non-transferable.	
Accreditation	3 CME Points HKCFP (Cat. 4.4)	
	3 CME Points MCHK	
Up to 2 CPD Points (Subject to submission of satisfactory report of Professional Development Log)		
Language	Lectures will be conducted in English.	
Registration	<b>Registration will be first come first served. Please reserve your seat as soon as possible.</b>	

Co-sponsored by  
**Medical Protection Society,  
The Hong Kong College of Family Physicians,  
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## Monthly Video Viewing Sessions –

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

### July's session:

Date	July 31, 2009 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topic	<b>Psychiatric Disorders in Youth: ADHD and Youth Depression</b>
Admission	Members Only
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.

### August's session:

Date	August 28, 2009 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topics	<b>1. The Role of Family Physicians in Liver Transplant</b> <b>2. Liver Transplantation</b>
Admission	Members Only
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	Lectures will be conducted in English.

## Community Education Programmes

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

Date/Time/CME	Venue	Topic/Speaker/Co-organizer	Registration
<b>8 August 2009 (Sat)</b> 2:30 – 4:30p.m. 2 CME points	Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, 118 Shatin Pass Road, Wong Tai Sin, Kowloon	<b>Refresher Course for Health Care Providers 2008/2009 – Role of Physiotherapy in General Practice</b> Mr. Robin Tsim Our Lady of Maryknoll & Hong Kong Medical Association	Ms. Clara Tsang Tel: 2354 2440 Fax: 2327 6852

## Structured Education Programmes

Free to members  
HKCFP CME points accreditation (Cat 4.3)

Date/Time/CME	Venue	Topic/Speaker(s)	Registration
<b>8 July 09 (Wed)</b>			
5:00 – 7:30 p.m. 3 CME points	Li Ka Shing Specialist Clinic, 3/F, Seminar Room, Prince of Wales Hospital	<b>Introduction to Family Medicine</b> Dr. Cheung Yu	Ms Peony Yue Tel: 2632 3480
<b>15 July 09 (Wed)</b>			
5:00 – 7:30 p.m. 3 CME points	Li Ka Shing Specialist Clinic, 3/F, Seminar Room, Prince of Wales Hospital	<b>Common Eye Disease in Family Physicians</b> Dr. Vincent Lee	Ms Peony Yue Tel: 2632 3480
<b>16 July 09 (Thur)</b>			
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Management of Common Sports Injuries</b> Dr. Lo Sze Man / Dr. Wu Sze Man	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F., Pamela Youde Nethersole Hospital	<b>Journal Club 3Q</b> Dr. Kwan Wing Yan, Wendy	Ms Kwong Tel: 2595 6941
6:00 – 8:00 p.m. 2 CME points	Room 5, Cheung Sha Wan Jockey Club General Outpatient Clinic	<b>Screening in Health Check Centre</b> Dr. Lau Wai Ling	Dr. Young Suk Ching Tel: 2109 6830
<b>21 July 09 (Tue)</b>			
5:30 – 8:00 p.m. 3 CME points	F2029A, 2/F, Specialty Block, Tuen Mun Hospital	<b>Family Therapy</b> Dr. Lam Wai Hang, Eddie	Ms Chan Tel: 2468 6813
6:00 – 8:00 p.m. 2 CME points	Ground Floor, Room 5, Lek Yuen Health Center, Shatin, N.T.	<b>Common Screening Programs in HK</b> Dr. Wong Kwok Hoi	Dr. Cheung Hard King Tel: 2652 3707

<b>22 July 09 (Wed)</b>			
2:30 – 5:00 p.m. 3 CME points	Room AB1038, 1/F, Main Block, Tuen Mun Hospital	<b>Management of Common Sports Injuries</b> Dr. Sze Siu Lam	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b>Primary Health Care System in HK—Strengths Weaknesses &amp; Potentials for Development</b> Dr. Li Kwok Tung, Donald	Ms Man Chan Tel: 2922 6159
5:00 – 7:30 p.m. 3 CME points	Li Ka Shing Specialist Clinic, 3/F, Seminar Room, Prince of Wales Hospital	<b>Male Infertility-Role of a Urologist</b> Dr. Mak Sui King	Ms Peony Yue Tel: 2632 3480
<b>23 July 09 (Thur)</b>			
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Personal Data (Privacy) Ordinance in Medical Aspects Ethnicity in Clinical Research</b> Dr. Chu Tsun Kit / Dr. Chan Laam	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Hospital	<b>Recent Research in FM</b> Dr. Wu Kwok Keung	Ms Kwong Tel: 2595 6941
6:00 – 8:00 p.m. 2 CME points	Room 5, Cheung Sha Wan Jockey Club General Outpatient Clinic	<b>Practice in University Health Service</b> Dr. Wong Ho Cheong	Dr. Young Suk Ching Tel: 2109 6830
<b>28 July 09 (Tue)</b>			
5:30 – 8:00 p.m. 3 CME points	F2029A, 2/F, Specialty Block, Tuen Mun Hospital	<b>Update in Immunization</b> Dr. Chu Tsun Kit	Ms Chan Tel: 2468 6813
6:00 – 8:00 p.m. 2 CME points	Ground Floor, Room 5, Lek Yuen Health Center, Shatin, N.T.	<b>Different Health Care Payment Systems</b> Dr. Leung Wing Kit	Dr. Cheung Hard King Tel: 2652 3707
<b>29 July 09 (Wed)</b>			
2:30 – 5:00 p.m. 3 CME points	Room AB1038, 1/F, Main Block, Tuen Mun Hospital	<b>Medical Legal Cases</b> Dr. Cheuk Tat Sang	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b>Allied Health Talk</b> Dr. Anita Fan	Ms Man Chan Tel: 2922 6159
5:00 – 7:30 p.m. 3 CME points	Li Ka Shing Specialist Clinic, 3/F, Seminar Room, Prince of Wales Hospital	<b>Infertility in Primary Health Care</b> Dr. Cheung Lai Ping	Ms Peony Yue Tel: 2632 3480
<b>30 July 09 (Thur)</b>			
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Personality Disorder</b> Dr. Wong Chung Tao / Dr. Ha Kwok Leung	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Hospital	<b>Sleep Disorders</b> Dr. Kwan Wing Yan, Wendy	Ms Kwong Tel: 2595 6941
6:00 – 8:00 p.m. 2 CME points	Room 5, Cheung Sha Wan Jockey Club General Outpatient Clinic	<b>Infectious Control</b> Dr. Young Suk Ching	Dr. Young Suk Ching Tel: 2109 6830
<b>4 Aug 09 (Tue)</b>			
5:30 – 8:00 p.m. 3 CME points	F2029A, 2/F, Specialty Block, Tuen Mun Hospital	<b>Rational Prescription</b> Dr. Vincii Kwok	Ms Chan Tel: 2468 6813
6:00 – 8:00 p.m. 2 CME points	Ground Floor, Room 5, Lek Yuen Health Center, Shatin, N.T.	<b>Role of Family Physicians in HK Health Care System</b> Dr. Fung Pak Kei	Dr. Cheung Hard King Tel: 2652 3707
<b>5 Aug 09 (Wed)</b>			
5:00 – 7:00 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b>Video Review: Consultation Skills @LAP</b> Dr. Wendy Tsui	Ms Man Chan Tel: 2922 6159
5:00 – 7:30 p.m. 3 CME points	Li Ka Shing Specialist Clinic, 3/F, Seminar Room, Prince of Wales Hospital	<b>Oligomenorrhoea – Diagnosis &amp; Management</b> Dr. Ingrid Lok	Ms Peony Yue Tel: 2632 3480
<b>6 Aug 09 (Thur)</b>			
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b>Healthy Life Style + Food Supplement</b> Dr. Chan Chi Ho	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Hospital	<b>Obesity</b> Dr. Yeung Wai Man	Ms Kwong Tel: 2595 6941
6:00 – 8:00 p.m. 2 CME points	Room 5, Cheung Sha Wan Jockey Club General Outpatient Clinic	<b>Managing Difficult Staff</b> Dr. Ip Yan Yan	Dr. Young Suk Ching Tel: 2109 6830
<b>11 Aug 09 (Tue)</b>			
5:30 – 8:00 p.m. 3 CME points	F2029A, 2/F, Specialty Block, Tuen Mun Hospital	<b>Difficult Cases for Sharing</b> Dr. Wong Man Kin	Ms Chan Tel: 2468 6813
6:00 – 8:00 p.m. 2 CME points	Ground Floor, Room 5, Lek Yuen Health Center, Shatin, N.T.	<b>Review in FM Training</b> Dr. Chan Ying Ho	Dr. Cheung Hard King Tel: 2652 3707

**12 Aug 09 (Wed)**

2:30 – 5:00 p.m. 3 CME points	Room AB1038, 1/F, Main Block, Tuen Mun Hospital	<b> OCD </b> Dr. Li Shun Hoi	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	<b> Management of Common Eye Disease in OPD Setting </b> Prof. David Wong	Ms Man Chan Tel: 2922 6159
5:00 – 7:30 p.m. 3 CME points	Li Ka Shing Specialist Clinic, 3/F, Seminar Room, Prince of Wales Hospital	<b> Cancer Screening </b> Dr. CF Yau	Ms Peony Yue Tel: 2632 3480

**13 Aug 09 (Thur)**

4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	<b> Osteoporosis Update </b> Dr. Leung Hor Yee	Ms Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Hospital	<b> Evidence of Flu Vaccines </b> Dr. Siu Lok Man, Joanne	Ms Kwong Tel: 2595 6941
6:00 – 8:00 p.m. 2 CME points	Room 5, Cheung Sha Wan Jockey Club General Outpatient Clinic	<b> Dangerous Drug Handling </b> Dr. Shuen Chuen Kwok	Dr. Young Suk Ching Tel: 2109 6830

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Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
12 <b>Jul</b>	13	14	15  <b>5:30 – 7:30 p.m.</b> Structured Education Programme	16  <b>4:00 – 8:00 p.m.</b> Structured Education Programme <b>9:00 p.m.</b> Council Meeting	17	18  <b>1:00 – 4:00 p.m.</b> Certificate Course in Smoking Cessation & Counseling <b>2:15 – 5:15 p.m.</b> Assessment Enhancement Course
19	20	21  <b>5:30 – 8:00 p.m.</b> Structured Education Programme	22  <b>2:30 – 7:30 p.m.</b> Structured Education Programme	23  <b>4:00 – 8:00 p.m.</b> Structured Education Programme <b>9:00 p.m.</b> Board of Conjoint Examination Meeting	24	25  <b>1:00 – 4:00 p.m.</b> Certificate Course in Smoking Cessation & Counseling
26	27	28  <b>5:30 – 8:00 p.m.</b> Structured Education Programme	29  <b>2:30 – 7:30 p.m.</b> Structured Education Programme	30  <b>4:00 – 8:00 p.m.</b> Structured Education Programme	31  <b>2:30 – 3:30 p.m.</b> Video session: Psychiatric Disorders in Youth: ADHD and Youth Depression	1 <b>Aug</b>  <b>1:00 – 4:00 p.m.</b> Board of Education Interest Group in Mental Health
2	3	4  <b>5:30 – 8:00 p.m.</b> Structured Education Programme	5  <b>5:00 – 7:30 p.m.</b> Structured Education Programme	6  <b>4:00 – 8:00 p.m.</b> Structured Education Programme <b>9:00 p.m.</b> Board of Education Meeting	7	8  <b>1:00 – 4:00 p.m.</b> Certificate Course in Smoking Cessation & Counseling <b>2:30 – 4:30 p.m.</b> Community Education Programme <b>2:15 – 5:15 p.m.</b> Assessment Enhancement Course
9  <b>1:00 – 4:00 p.m.</b> 1. Surgical Treatment for BPH - What's New 2. Medical Treatment for BPH - Insights from Urologist <b>3:00 – 6:00 p.m.</b> 2nd Examiner Training Workshop for OSCE 2009	10	11  <b>5:30 – 8:00 p.m.</b> Structured Education Programme	12  <b>2:30 – 7:30 p.m.</b> Structured Education Programme	13  <b>4:00 – 8:00 p.m.</b> Structured Education Programme	14	15  <b>1:00 – 4:00 p.m.</b> Certificate Course in Smoking Cessation & Counseling <b>2:15 – 5:15 p.m.</b> DFM Module V Orthopaedic Injection
16  <b>1:00 – 5:00 p.m.</b> The Update Management of Common Mood Disorders	17	18	19	20  <b>9:00 p.m.</b> Council Meeting	21	22  <b>2:15 – 5:15 p.m.</b> Assessment Enhancement Course
23  <b>1:00 – 5:00 p.m.</b> Medico-legal Alert on Psychiatry and Mental Health	24	25	26	27  <b>9:00 p.m.</b> Board of Conjoint Examination Meeting	28  <b>2:30 – 3:30 p.m.</b> Video session: 1.The Role of Family Physicians in Liver Transplant 2.Liver Transplantation	29  <b>2:15 – 5:15 p.m.</b> DFM Module V Consultation Skill Workshop I
30	31	1 <b>Sep</b>	2	3	4	5

**Red** : Education Programmes by Board of Education  
**Green** : Community Education Programmes  
**Blue** : Clinical Attachment / Certificate Course / ARC  
**Purple** : College Activities