

Message from the President

Family Medicine Education in Our Universities

On December 10, 2012, at the Faculty Graduation and Prize Presentation Ceremony 2012 of the University of Hong Kong at the Queen Elizabeth Stadium, Professor Rosie Young Tse-Tse spoke about the importance of holistic and continuous patient care. I wish to extract a few excerpts here which are inspiring to family physicians with respect to our future mission in the discipline.

“The practice of medicine is both an art and a science. The paradigm has shifted more and more towards science and this is what it should be. New technological innovations and scientific discoveries have led to more sensitive and precise means of diagnosis and the development of new drugs that are more effective, more specific and, by and large, have fewer side effects. Doctors therefore find their jobs more gratifying than ever, but also have to face new challenges.”

“Like many developed countries, Hong Kong faces the problem of an increasing number of elderly who often require long-term treatment of chronic diseases. A better informed and educated public also demand a greater variety and a higher quality of care from the medical profession. The availability of sophisticated investigations, effective and expensive drugs as well as complex operations will escalate the cost of healthcare delivery. Such expenditure cannot be increased indefinitely. The government and the medical profession must therefore re-examine the present mode of healthcare delivery as soon as applicable and devise a system which is of good quality, cost-effective and affordable.”

“With the development of a large number of specialties and subspecialties, the practice of medicine tends to be compartmentalized. While specialization is necessary to provide patients with the best possible care, it should not be at the expense of a holistic approach to patient care. There must be a healthy balance between the development of specialties on one hand and the training of primary care physicians on the other. Whether the public or private sector, attempts must be made to integrate the services provided by hospitals, outpatient clinics, primary care physicians and specialists.”

“This is not an easy task. It will require an unselfish and innovative approach and the full co-operation of all parties concerned. However, its success will go a long way to providing holistic care and continuity of treatment for all patients, and at the same time make the most effective use of medical manpower. A holistic approach could also provide more psychological support for patients and build up public confidence in the medical profession.”



(from left to right) Prof. Cindy Lam, Dr. Julie Chen, Dr. Carlos Wong and Mr. Edmond Choi

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THE HONG KONG
COLLEGE OF
FAMILY PHYSICIANS



Family Physicians Links

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Message from the President



Dr. Billy Chiu (right) presented the HKCFP Prize in Family Medicine to Dr. So Man Hon (left)

Dr. Billy Chiu, our Honorary Secretary attended the Ceremony to present the HKCFP Prize in Family Medicine to Dr. So Man Hon. I would also like to take this opportunity to congratulate our colleagues from the Department of Family Medicine and Primary Care. Dr. Julie Chen who is awarded the Faculty Teaching Medal, Dr. Carlos Wong, who is awarded the degree of the Doctor of Philosophy, and Mr Edmond Choi, who is currently undertaking the course of the Doctor of Philosophy programme.

On February 8, 2013, Dr. David Chao presented the Hong Kong College of Family Physicians' Prize in Family Medicine to Ms. LAM Stacey Carolyn at the Teachers' & Students' Awards Presentation Ceremony 2013 at the Chinese University of Hong Kong Jockey Club School of Public Health and Primary Care.



Dr. David Chao (left) presented the Hong Kong College of Family Physicians' Prize in Family Medicine to Ms. Lam Stacey Carolyn (right)

Membership Committee News

The Membership Committee approved, on recommendation of the Chairlady of the Membership Committee, the following applications for membership in **January - February 2013** :

Associate Membership (New Applications)

Dr. CHING Rosemary Hin Nga	程顯雅
Dr. LAM Wing Sze	林穎思
Dr. LAU Cheuk Nam, Mathew	劉焯楠
Dr. WONG Hon Sum, Samuel	黃漢森
Dr. YIK Chun Kit	易振傑
Dr. YING Gard Ching, Derek	邢格政
Dr. YIU Chung Ting	姚忠廷

Transfer from Associate to Full Membership

Dr. KO Chun Hung	高振雄
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Transfer from Student to Associate Membership

Dr. KWA Carina	柯嘉明
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Re-instatement from Non-HKSAR Member

Dr. Fernando Elizabeth

Resignation from Associate Membership

Dr. CHENG Hing Chung	鄭慶宗
Dr. LEUNG Sze Mun, Amelia	梁詩敏

Resignation from Foundation Fellow

Dr. CHAN Wai Chung, Philip	陳維聰
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Suspension from Full Membership

Dr. CHAN Sze Hin	陳仕顯
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Transfer from Associate to Fellowship

Dr. CHAN Hau Ting	陳巧婷
Dr. CHAN Hoi Ying, Linda	陳凱盈
Dr. CHENG Kit Wing	鄭傑榮
Dr. CHEUNG Chi Hong, David	張志康
Dr. CHOW Kim Yue	周劍儒
Dr. HAU Sin Ying, Cindy	侯倩瑩
Dr. HUNG Wai Shan, Sandra	洪慧珊
Dr. IP Sui Wah	葉淬華
Dr. LAU Chi Ming	劉志明
Dr. LEUNG Hoi Lik, Eric	梁凱力
Dr. LEUNG Hor Yee	梁可怡
Dr. LEUNG Ka Fai	梁嘉輝
Dr. LEUNG Yin Ching	梁燕菁
Dr. LI Ming Yin	李銘賢
Dr. LUI How Mui	呂巧梅
Dr. MAN Fung Yi	文鳳兒
Dr. POON Yung Yin	潘榕燕
Dr. SHIU Wing Ho	邵永豪
Dr. Sit Pui Ki, Lolita	薛蓓姬
Dr. TAM Yick Sin	譚亦善
Dr. TSANG Sheung Yin, Stanley	曾尚賢
Dr. WONG Chun Fai	王振輝
Dr. WONG Chun Pong	王振邦
Dr. YEUNG Sze Wai	楊詩煒
Dr. YIU Kam Yi	姚錦儀
Dr. YIU Yee Ki	姚綺旗

"Council Member-On-Duty" (CMOD) System

Dear College members,

We are still providing this alternative channel of communication for you to reach us. Do let us have your ideas and comments so that we can further improve our services to all the members.

From the period 15th March 2013 to 14th April 2013, Dr. David Chao and I 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. Once we receive your call or message, we will get in touch with you directly as soon as we can.

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



Dr. David Chao



Dr. Tony C K Lee

Internal Affairs Committee News

The 26th Fellowship Conferment Ceremony and the 24th Dr. Sun Yat Sen Oration

Dear Colleagues,

The College is holding **"The 26th Fellowship Conferment Ceremony and the 24th Dr. Sun Yat Sen Oration" on 15th June 2013 (Saturday) at the Hong Kong Academy of Medicine Jockey Club Building.**

The successful candidates of Conjoint Examination would be conferred Fellowships, and the successful candidates of Diploma in Family Medicine and the Exit Examination would be granted certificates. In this very important occasion, **Professor Joseph J.Y. Sung, Vice-Chancellor and President of the Chinese University of Hong Kong**, would deliver the 24th Dr. Sun Yat Sen Oration to the audience.

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

- Events : (i) **The 26th Fellowship Conferment Ceremony**
(ii) **The 24th Dr. Sun Yat Sen Oration by Prof. Joseph J.Y. Sung**
- Venue : 1/F, Run Run Shaw Hall, Hong Kong Academy of Medicine Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong
- Date : 15th June 2013 (Saturday)
- Time : 4:00 p.m. – Reception with **light refreshment**
5:30 p.m. - Ceremony
- Remarks : 1 CME (Category 4.3)
- This activity is free of charge to our College Fellows, members and their spouses.
*All College Fellows are welcome to bring their Fellowship gowns for the Conferment Ceremony.

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

Thank you!

Dr. David CHAO
Chairman, Internal Affairs Committee

TWENTY-SEVENTH CONJOINT HKCFP/RACGP Fellowship Examination THIRD (FINAL) Announcement

The Board of Conjoint Examination is pleased to announce the following information on the Twenty-seventh Conjoint Fellowship Examination with the Royal Australian College of General Practitioners to be held in 2013.

(1) REQUIREMENTS AND ELIGIBILITY

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

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

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

(**Note** : All candidates are required to renew their RACGP membership for the year 2013/2014 before 31 July 2013. Failure to comply with the rule may result in denial of admission to the Examination.)

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

- (a) **CATEGORY I CANDIDATES** are graduate doctors who are undergoing or have completed a fully approved vocational training programme as outlined in the College's Handbook for Vocational Training in Family Medicine. After satisfactory completion of two years of approved training, Category I candidates or trainees may apply to sit the Written Examination, where both segments of which must be taken at the same attempt. After satisfactory completion of four years of supervised training, Category I candidates may apply to sit the Clinical Examination.

(**Note** : All Category I candidates who are current vocational trainees and apply to sit the Written Examination **MUST** submit evidence of completion of at least 15 months of approved training by 31 March 2013, together with the application. Those current vocational trainees who apply for the Clinical Examination **MUST** submit evidence of completion of at least 39 months of approved training by 31 March 2013, together with the application. Candidates who have already completed vocational training **MUST** submit evidence of completion of vocational training, together with the application.

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

- (b) **CATEGORY II CANDIDATES** are doctors who have been predominantly in general practice for not less than **five** years by 30 June 2013.

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

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

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

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

(2) FORMAT AND CONTENTS

- A. Written Examination
Key Feature Problems (KFP), and,
Applied Knowledge Multiple Choice Questions (MCQ)
- B. Clinical Examination
Objective Structured Clinical Examination (OSCE)

(3) PRE-REQUISITE FOR CLINICAL SEGMENTS

All candidates applying to sit for the Clinical Examination of the Conjoint Fellowship Examination **MUST** possess a CPR (Competence in Cardiopulmonary Resuscitation) certificate issued by the HKCFP. The validity of this certificate must span the time at which the application for the Examination is made **AND** the time of the Clinical Examination.

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

(4) CRITERIA FOR A PASS IN THE EXAMINATION

A candidate will be required to pass the entire Written Examination in one sitting. That is, if one fails the Written Examination, both the KFP and MCQ segments have to be re-taken. Successful Written Examination result can be retained for three years (until the Clinical Examination of 2016).

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

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

(5) APPLICATION AND EXAMINATION FEES

Application forms are available from the College Secretariat at Room 701, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. You may also download the application forms from our College website, <http://www.hkcfp.org.hk>. Please note that the deadline for application is **10 April 2013**.

For both **CATEGORY I** and **CATEGORY II CANDIDATES**:

- | | |
|--|---|
| - Full Examination (Written + Clinical) | \$23,600 |
| - Written Examination | \$6,800 plus Administrative Fee \$7,600 |
| - First attempt on Clinical Examination | \$9,200 |
| - Subsequent attempt on Clinical Examination | \$9,200 plus Administrative Fee \$7,600 |

Please make the cheque payable to **"HKCFP Education Limited"**. If a candidate applies for the Full Examination and **fails the Written Examination, the fee paid for the Clinical Examination \$9,200 will be refunded**.

(6) REFUND POLICY

If a candidate wishes to withdraw from the examination, and written notification of withdrawal is received by the College 60 days or more prior to the date of the examination, he will receive a refund of \$16,000 (for the whole examination), \$6,800 (for the written examination) or \$9,200 (for the clinical examination). The administration fee of \$7,600 will not be refunded.

No refund of any amount will be given if written notice of withdrawal is received by the College within 60 days of the date of the examination.

All fees paid are not transferable to subsequent examinations or other candidates.

(7) IMPORTANT DATES

- | | |
|-----------------------------|--|
| • 10 April 2013 (Wednesday) | Closing Date for Applications |
| • 1 September 2013 (Sunday) | Conjoint Examination – Written Examination (MCQ) |
| • 8 September 2013 (Sunday) | Conjoint Examination – Written Examination (KFP) |
| • 27 October 2013 (Sunday) | Conjoint Examination - OSCE |

(8) ELECTION TO FELLOWSHIP

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

Entry forms for Fellowship, Membership and Associateship of the Hong Kong College of Family Physicians and the Royal Australian College of General Practitioners are available from the website of both colleges (www.hkcfp.org.hk / www.racgp.org.au). You may also contact the HKCFP Secretariat, Room 701, HKAM Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong. Tel: 2528 6618, Fax: 2866 0616.



Dr. Chan Hung Chiu
Chairman
Board of Conjoint Examination

Diploma in Family Medicine (HKCFP) Second Announcement

The Board is pleased to announce that the Diploma Course in Family Medicine (DFM) organized by The Hong Kong College of Family Physicians will commence in June 2013.

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

Details of the course are as follows:

1. Objectives:

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

2. *Syllabus:

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

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

Module I – Principles of Family Medicine (Distance Learning)

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

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

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

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

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

Module IV - Clinical Updates (Updates and Clinical Attachment)

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

Module V - Practical Family Medicine (Practical Workshops)

Aims:	Enhance practical and communication skills in Family Medicine by Practical Workshops in selected areas including CPR, Consultation Skills, Counselling Skills, Women's Health, Orthopaedic Injection and Musculo-Skeletal Medicine
Contents:	5 compulsory and 1 elective Practical Workshops in selected areas including CPR, Consultation Skills, Counselling Skills, Women's Health, Orthopaedic Injection and Musculo-Skeletal Medicine

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

3. Articulations:

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

4. *Schedule:

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

June to September 2013	Module I
November 2013 to January 2014	Module II
July 2013 to May 2014	Module III, IV & V
May 2014	Final Examination

5. Admission Requirements:

Medical Practitioner with Bachelor's degree in Medicine.

6. Teaching Staff:

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

7. Teaching Medium:

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

8. Course Fees:

Whole course:
HK\$28,000 for members of HKCFP
HK\$56,000 for non-members

(A discount of HK\$3,000 for early birds who apply on or before May 17, 2013)

Individual Modules:	Members	Non-members
Module I (Distance Learning – Principles of Family Medicine)	\$3,600	\$7,200
Module II (Distance Learning – Common Problems in Family Medicine)	\$3,600	\$7,200
Module III (Structured Lectures & Seminars)	\$2,600	\$5,200
Module IV (Updates & Clinical Attachment)	\$3,200	\$6,400
Module V (Practical Workshops)	\$4,200	\$8,400
Examination	\$8,000	\$16,000
Administration Fee	\$3,000	\$6,000

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

9. Awards/Credits:

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

10. Application Procedures:

Application is now open

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

- Photocopy of the current Annual Practising Certificate.
- A recent photo of the applicant (passport size).
- A signed "Disclaimer of Liability".
- An application fee of HK\$200 by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-refundable.
- A Course Fee of HK\$28,000 (or HK\$56,000 for non-members) by crossed cheque payable to "HKCFP Holdings and Development Limited". This fee is non-refundable unless the application is unsuccessful.

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

Information and application forms are obtainable at the College or can be downloaded at the College website (<http://www.hkcfp.org.hk>). Members who were not admitted in the course in 2012 have to send in their application again if they want to study the course this year. Please contact the College secretariat, Mr. John Lee at 2861 0220 for any queries.

11. Application Deadline: June 21, 2013

Comments From Former DFM Graduates

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

Dr. Au Chi Lap
Chairman
The Board of DFM

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

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



CPR Training Workshop



Women's Health Workshop



Orthopaedic Injection Workshop



Musculoskeletal Workshop

Certificate Course in Family Medicine (HKCFP) Second Announcement

The Board is pleased to announce that the Certificate Course in Family Medicine (CFM) organized by The Hong Kong College of Family Physicians will commence in June 2013.

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

Details of the course are as follows:

1. Objectives:

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

2. *Syllabus:

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

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

Segment I – Principles of Family Medicine (Distance Learning)

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

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

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

Segment III - Practical Family Medicine (Practical Workshops)

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

3. *Schedule:

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

July to October 2013	Segment I & II
1-day workshop in October 2013	Segment III

4. Admission Requirements:

Medical Practitioner with Bachelor's degree in Medicine.

5. Teaching Staff:

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

6. Teaching Medium:

English

7. Course Fees:

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

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

8. Awards/ Credits:

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

9. Application Procedures:

Application is now open

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

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

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

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

Please contact the College secretariat, Mr. John Lee at 2861 0220 for any queries.

10. Application Deadline: June 21, 2013

Dr. Au Chi Lap
Chairman, The Board of DFM

Novel Coronavirus in 2012, SARS Again?

Nobody in Hong Kong would forget the battle we faced 10 years ago, the Severe Acute Respiratory Syndrome (SARS) outbreak. It is a respiratory disease caused by a coronavirus, now named SARS-associated coronavirus (SARS-CoV). According to the World Health Organization (WHO), a total of 8,098 people were clinically infected with SARS during the 2003 outbreak. Among them, 774 died.

Coronaviridae is a large group of viruses that infects different animal species. They are named for the crown-like spikes on their surface. Some of them may affect human and usually cause mild to moderate upper respiratory tract infection.

In June 2012, a new coronavirus to human was identified in a patient coming from Saudi Arabia. The second patient was from Qatar with onset of symptoms in September 2012. This virus can cause a severe, acute respiratory infection presenting as pneumonia. The symptoms include fever, cough and shortness of breath. Comparison of viral genetic sequences from the two patients indicated that the two viruses are closely related. Further genetic studies indicated that this new virus is a beta-coronavirus similar to bat coronaviruses, but not similar to any other coronavirus previously described in humans, including SARS-CoV (also a beta-coronavirus). It is named Novel Coronavirus (NCoV) at the moment. Current treatment is supportive since no specific therapy has been shown to be effective.

As of 21 February 2013, the WHO has been informed of a total of 13 confirmed cases of human infection with NCoV, including seven deaths. The latest 2 confirmed cases reported in the United Kingdom (UK) in February 2013 warrant special attention. The patients had respiratory illness and are in the same family as the previously confirmed cases. Most importantly, these patients did not have recent travel history outside the UK. This might imply the possibility of human-to-human transmission by close contact, although there is no direct evidence of such transmission in a sustained manner at the moment.

Although there is no confirmed case in Hong Kong at the time of writing, Severe Respiratory Disease associated with Novel Coronavirus is now a statutory notifiable disease in Hong Kong. As a gatekeeper for the health care system, and having high chance of attending patients with respiratory tract illnesses, family physicians are in an important position to safeguard the spreading of the disease by promptly reporting cases which fulfill the reporting criteria.

Bearing in mind the lesson learnt 10 years ago, our community and all health care professionals in Hong Kong should be well prepared to face this possible deadly emerging infectious disease.

References:

WHO website: http://www.who.int/csr/disease/coronavirus_infections/en/index.html

CDC website: <http://www.cdc.gov/Features/novelcoronavirus/>

CHP website: <http://www.chp.gov.hk/en/content/9/24/26528.html>

Compiled by Dr. Yau Lai Mo

A "Medical Tour" in Switzerland

ISQua's 29th International Conference GENEVA 2012 Switzerland

Dr. Yu Sze Kai, Frances, Resident in Family Medicine, NTEC
Honorary Clinical Tutor of The Chinese University of Hong Kong

Quality in Primary Care

I have learnt a lot during my recent trip to Switzerland for the ISQua (International Society for Quality and Safety in Health Care) 2012 conference in October 2012. Although this conference was not specifically for family physicians like the WONCA, it was very much relevant to us primary care physicians. In the conference, patient-centred care is being recognized as one of the major components of quality care. The importance of shared clinical decision making was emphasized, not only because it improves patient satisfaction and compliance to medical advice, but also due to its proven benefit on health outcomes, e.g. glycemic control in DM patients. A guideline aimed at promoting patient-centred care approach in illness management is currently being developed in the Netherlands, in which health-related quality of life with relevance to patients' personal and environmental factors are considered as important outcome measures.

The importance of primary care was also seen in another major theme of the conference: Integrated Care and Interface with Primary and Social Care. With recent implementation of Integrated Mental Health programme in our local public general outpatient clinics, it was interesting to learn from the experience of other countries with regard to similar integrated health care programmes. In the Intermountain Healthcare's Mental Health Integration Programme in the United States, mental health was seen as an important component and in fact a protective factor in chronic disease management. The programme involved teamwork in screening, diagnosis and treatment of co-morbid mental health problems as well as providing family and community support for patients with chronic illnesses. The outcomes were positive for both patients and doctors: the patients had better satisfaction and self-reported health outcomes, while the doctors felt more empowered to provide better patient care.

Another highlight of the conference was the measurement and assurance of primary care quality in different countries e.g. UK, US, Denmark and Australia. It was important not only to measure the clinical indicators of quality, but also to optimize quality in patients' perspective in terms of their experience of care. Specific accreditation systems have been developed for primary care in some of these countries, which have helped much in the promotion and recognition of primary care in the community. Interestingly, the primary care accreditation process in Australia, which is based on the RACGP (Royal Australian College of General Practice) Accreditation Standards, is quite similar to the practice assessment in our local exit examination. The assessment is done through practice visit by two GP surveyors, reviewing aspects of the practice including its facilities, administration, services and health records. For the consultation performance, they use validated patient experience questionnaires for assessment.



A study tour of the WHO headquarter in Geneva

For further details of presentations in the ISQua 2012 conference, see: <http://www.isqua.org/conference/previous-conferences/geneva-2012/presentations>

Family Medicine in Switzerland:

As my presentation in the conference in Geneva was about Family Medicine (FM) training, I am also interested to learn about the FM training programmes in Switzerland. I was lucky to be able to join the Swiss Association for Young and Future Family Doctors (JHaS is in German: Junge Hausärztinnen und ärzte Schweiz, www.jhas.ch) in their meeting about the current situation of Swiss FM training, which was held around the time of the conference. They were a group of young and enthusiastic family doctors. In the German speaking region of Switzerland, they were known as Hausarzt (haus = house, arzt = doctor).

Structured training in primary care practice for family doctors in Switzerland started in 1998, however, institutes of Family Medicine were not established until after a mass demonstration of Swiss doctors in 2006 in Bern, the capital of Switzerland. Diversity is a characteristic in Switzerland, not only in the number of languages being used by her people, but also in the background of her Family Medicine specialists. To become a board-certified Family Medicine specialist in Switzerland, a total training period of 5 years has to be taken in general internal medicine (2 years), primary care (6 months) and a free choice of other specialties (mostly surgery, paediatrics etc) or other subjects of interest like ultrasound and FM research.

To know more about Swiss FM training, I have interviewed Sven Streit, the co-president of the JHaS. He is also the Past-President for the Vasco da Gama movement (www.vdgm.eu), which is the WONCA Europe working group for new and future general practitioners. He is currently in his 5th year of Family Medicine training and carrying out his research fellowship in the Institute of General Practice at University of Bern. He is doing a country-wide research project on anticoagulant monitoring practice in different countries.



Dr. Sven Streit, Swiss FM trainee

Can you tell us briefly about the health care system of Switzerland?

In Switzerland, every person has mandatory health coverage. We pay a monthly fee of about 200-400 Euros and need to pay all medical services up to a self defined limit of 0 up to 2000 Euros (which influences the monthly fee). "Doctor shopping" is seen in our country as patients are free to choose their doctors and even specialists without referral. Nevertheless, there are incentives for patients to consult their GP first, as in such cases they were charged a lower monthly fee by the insurance company.

What is the role of GPs in Switzerland? How is the status of GPs in Switzerland?

Traditionally, GPs have always been the family doctors in our country. They are mainly male doctors, who have to work long hours alone and need to be on call. Patients rely a lot on the experience of GPs. However, the older generations of doctors are retiring and there is a gap in the next generation due to a lack of engagement to strengthen this profession. Nevertheless, politicians are trying to improve the salaries, change the working

conditions and attempt to empower young doctors (like us) to become GPs.

How do you feel about working as a GP trainee in Switzerland?

Being a GP trainee feels strange to me because there have not been many colleagues heading for the same specialization but for some years now it has been changing and some of us are proud to become GPs.

What do you think about the future and barriers of development of Family Medicine in Switzerland?

For the future, I think we have to merge our engagements together. Switzerland still has too many organizations for doctors. Thus, projects are mainly delayed because of political issues due to so many stakeholders. We need one voice and one goal. In my point of view we should focus on a strengthened "generalism" in medicine: good trained general internists who are capable to work in hospitals or in practices. The future is promising as there is a lack of GPs but a strong demand for primary care. There are considerations of handing duties over from doctors to trained nurses (advanced practitioner nurses) and phone consultations. More polyclinics are being opened to ensure provision of primary care. The need for young GPs is high now and the vocational training has been improved. Our image will continue to improve if our generation accomplishes to maintain quality primary care for the community.

You are currently conducting an international research in Family Medicine and have an active participation in WONCA as well as your local young family doctor association. What do you think about the role of collaboration and networking of GPs in promoting research in Family Medicine?

Research needs good ideas, mentoring, financing and experience. For each step, it is obvious for a need to collaborate with one another. International collaboration provides insight on how problems are faced in other countries. In terms of new oral anticoagulants, 14 young general practitioners exchanged the way that INR is being monitored nowadays in their countries. The conclusion from these collected findings help in anticipating the possible changes to patient care which might be brought about by the use of new oral anticoagulants. Projects like these are easy to perform due to a simple way of data collection. It is interesting to learn about the various perspectives from Chile to Hong Kong.

After talking to Sven, I found that some of the problems of primary care in Switzerland are the same as in Hong Kong. Similarly, our primary care is still underdeveloped and there is a need to ensure its quality and development through training and government support. Primary care research and network are also important in the promotion and enhancement of the role of primary care in our community.

Switzerland Highlights

As a holistic family physician, I would not miss the chance to explore the beautiful landscape and culture while staying in Switzerland.

Switzerland is famous for its beautiful Alps and lakes as well as traditional old towns. It has a diversity of languages and cultures: German, French and Italian. Touring around this country is like eating a box of chocolate, which offers a variety of scenery, including the magnificent mountains (Jungfrau, Matternhorn), beautiful alpine villages (Grindelwald, Zermatt), beautiful lakes, cosmopolitan cities (Zurich, Geneva) and old towns with enchanting traditions (Bern, Lucerne, Chur).



Geneva

The whole world is here: the United Nations, International Red Cross, the World Health Organization, to name a few. It's a beautiful lakeside city with free transport system including bicycles for tourists.

A leisure walk or boat ride along the lakeside is the best way to enjoy the scenery of this city.

Bern

If you don't have enough time to visit the cities of Switzerland, you can afford to skip any cities but not Bern. It is an amazing capital city surrounded by a river. As one of the UNESCO World Heritage sites, its prevention of its medieval 15th-century arcades and 16th-century fountains is marvellous - where you can find whole lots of shops, nice restaurants and café which open till late at night in this vivid city.



Zermatt

As a village at the foot of the famous Matterhorn, the triangular peak which inspired the making of Toblerone Chocolate, Zermatt is a paradise for both skiers and

hikers. I was so lucky to be able to experience two seasons in one go: its golden autumn and snowy winter. Hiking in Switzerland was a moving experience, as you will come across many various magnificent scenery which can only be assessed by foot.



Luzern

Luzern is one of the enchanting historic sites of Switzerland and is known as the cradle of the Swiss Confederation which was forged there since the 13th century. The

beautiful façades of medieval buildings and Luzern's landmark, the chapel bridge, make it an awesome picturesque old town.

Zurich

It is a metropolis by the water with a busy city life. Shoppers must not miss the Bahnhofstrasse, which is a mile-long street featuring exclusive fashion boutiques, department stores and street cafes. The old town, on the left bank of the River Limmat, offers a leisure area for coffee in daytime and a vivid nightlife with live music in the bars there.



A taste of Swiss specialty

Switzerland is well known for its quality cheese and silk-like chocolate made from Alpine milk. Cheese fondue can be found in many restaurants

there. Lovely chocolate stores can be found everywhere in Switzerland, and the delicate chocolate there is simply irresistible.



HKCFP Research Fellowship 2013

Introduction

The HKCFP Research Fellowship was established by the Hong Kong College of Family Physicians to promote research in family medicine. The grant is up to the value of HK\$100,000. It provides the successful candidate with protected time to develop research skills. Applicants are expected to have regular contact with a nominated supervisor with **Master or equivalent degree**.

Eligibility

Applicants for the HKCFP Research Fellowship must be active Fellows, active Full Members or Associate Members of the HKCFP. New and emerging researchers are particularly encouraged to apply.

Selection criteria

Applications will be judged on*:

- training potential of applicants
- relevance to family medicine and community health
- quality
- value for money
- completeness (incomplete or late applications will not be assessed further)

** Please note that new researchers and those at an early stage of their research careers are encouraged to apply.*

How to apply

1. Application form, terms and conditions of the Fellowship can be downloaded from www.hkcfp.org.hk or obtained from the College Secretariat, HKCFP at Rm. 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Hong Kong. Tel: 2861 0220 Fax: 2866 0981.
2. Applicants must submit:
 - the completed application form,
 - the signed terms and conditions of the HKCFP Research Fellowship,
 - a curriculum vitae from the principal investigator,
 - a curriculum vitae from the co-investigator(s), AND
 - a curriculum vitae from the supervisor.
3. Applications close: **April 30, 2013**. Late applications will not be accepted.
4. Applications must be sent to Chairman, Research Committee, The Hong Kong College of Family Physicians, Rm. 802, 8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Hong Kong.

The HKCFP Award for the Best Research of 2012

The Research Committee of the Hong Kong College of Family Physicians has an Award for the Best Research of the Year 2012. All members and fellows of the College are invited to participate and submit their research papers to the Research Committee for selection. The Award will be presented at the Conferment Ceremony in 2013.

Entry and assessment criteria are listed below:

Entry Criteria:

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

Assessment Criteria:

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

Each research project submitted will be assessed according to the seven criteria listed above by a selection panel. Each criterion may attract a different weighting to be decided by the selection panel. Please send your submission to: Research Committee, HKCFP, Rm. 802, 8/F., Duke of Windsor Social Service Building, 15 Hennessy Road, Hong Kong.

DEADLINE OF SUBMISSION: 30th April, 2013

Interest Group in Mental Health & Psychiatry in Primary Care - The 34th Meeting on 2nd February 2013

Dr. So Chi Kin, College Member, HKCFP

The 34th Interest Group in Mental Health & Psychiatry in Primary Care Meeting was held on 2nd Feb 2013. Dr. Fong Yeung is the guest speaker (Sponsored by Eli Lilly Asia Inc.).

Theme : Normalization of Sexual Dysfunction - New Option in Management

Speaker : Dr. Fong Yeung, Francois
Family Physician in private practice

Moderator : Dr. Mark S. H. Chan
Co-ordinator, Board of Education, HKCFP

Dr. Francois Fong graduated from the Monash University with MBBS and a degree in Medical Science. After training in Family Medicine in Australia, he obtained a Master degree in Family Medicine (Monash), and become the Master in Sexual Health (Sydney) and the Fellow of the RACGP. He was the lecturer in General Practice and post-graduate supervisor in Counseling and Sexual Health Programme for the Monash and Sydney University.

Dr. Fong is currently in private practice specializing in the area of sexual dysfunctions in both males and females; relationship/sexual counseling and sexually transmitted infections (STI)/HIV screening, education and treatment. Dr. Fong is a clinical teacher for HKU and CUHK and co-investigator in a number of research studies on HIV, STI, HPV and cervical cancer.

Learning points:

Sexual Health

Sexual health is a state of physical, mental and social *well-being* in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence (WHO Statement).

Male Sexual Dysfunction - Not Just an Urological Problem and is Suitable to be Managed by Family Physicians

- Hypo-sexual Desire Disorder - Hypogonadism, Depression.
- Erectile Dysfunction (ED) – Arousal Problem, Situational ED, Performance Anxiety, Blood Flow Problem, Neuro-sensory Pathway Problem.
- Orgasmic Dysfunction - Unable to ejaculate or no ejaculation.

- Premature Ejaculation (PE) - Secondary PE can be early ED.

The Nature of Sexual Function

- Sexual pleasure is an essential element in the physical, psychological, intellectual and spiritual well-being.
- Desire for sexual enjoyment is preserved in older men.
- Loss of sexual function is often considered by many men and health professionals as a natural aging process.
- Many sufferers are reluctant to discuss their problems with the others including their partners, friends or doctors.

Sexual Dysfunction

- Erectile dysfunction (ED) is a highly prevalent condition that increases with age.
- A survey in Hong Kong showed that 62% of men aged between 40-80 years old had experienced it.
- ED can lead to significant impact on the social and personal life of the sufferer concerned, ranging from loss of confidence/self-esteem to major depression and marriage breakdown.

Treatment for Sexual Dysfunction

- Despite the presence of effective treatments for ED, many patients are still reluctant to seek medical assistance for the condition.
- Most physicians, although consider it as a significant problem, might lack the knowledge, skills and motivation to initiate help for patients presenting with this condition.

Sexual Problems for Both Patients and Doctors

Problems men encounter:

- 74% of men failed to discuss the problems with their doctors because of embarrassment.
- 12% regarded the problem as a natural part of aging.
- 10% did not consider the problem worthy of attention.
- There is a lack of "openness" in discussing sexual issues among male patients.
- Social values and stigma attached to sexual problems – "Dirty OLD MAN".
- In Japan only 4.8% of males with ED had consulted a physician.

- The main reasons cited by these men included: no influence on daily life nor annoyance by ED; no sexual drive; feeling shy; uncertainty of where to seek medical help and perception of the high cost of treatment.
- A study showed that men believed that physicians were *the most preferred professionals* for consultations regarding sexual concerns. However, >80% of men preferred their doctors to initiate the discussion. (*Permission to Talk*)
- Passive attitude among patients - "off-load" the responsibility to the health professionals.
- Family physicians were perceived by patients to be the most appropriate person to help with their sexual problems.

Problems encounter by physicians:

- Not sure how to bring up the issue.
- Feeling embarrassed.
- Not sure how the patient think of the doctor.
- Perceived as a time consuming issue.
- Sexual problem is not usually the major presenting complaint (Most patients would not bring up the issue unless being asked).

Overcoming the Barriers for Doctors

Make it as part of your routine history especially for patients with chronic diseases and high stress level

- How is your sex life lately?
- How is your relationship with your wife?
- How are you with your wife?
- Do you have erectile dysfunction?
- "Generalization" - Open with a general statement.
- "Normalization" - Acknowledge the problem, complementing patients who have the courage to bring up the issue.
- Giving further permission for patients to talk.
- If under time pressure, tell patients it is an important issue that needs to be discussed in detail and make a follow-up appointment for the issue.

Important Factors in ED Treatment

Patients define ED treatment success as: cure, pleasure, partner satisfaction, reproduction, naturalness.

Planning sexual activity around taking a pill is burdensome to some patients and their partners.

PDE5 Inhibitors

- Enable erection with less sex drive and reduced blood flow.
- Increase confidence, increase pleasure, improve relationship and intimacy - consider the female reaction to ED.
- Happy wife, Happy life.
- Increased sexual activity can increase testosterone level without exogenous supplement.

Long Acting PDE5 Inhibitors

- Dissociate taking tablet with sexual activity.
- Less psychological dependence.
- Less "wastage" - missed opportunity e.g. Either partner "too tired" at night ... try again next morning.
- Improves Nocturnal Penile Tumescence, blood flow improvement in corpus cavernosum.

Next meeting

The next meeting will be on Saturday 6th April 2013. The speaker is Dr. Chan Suen Ho, Mark. He will speak to us on the Journal Club entitled "Recent Mental Health Topics for Family Physicians".

All members are welcome and encouraged to present their cases and problems for discussions or role play. Please send your cases to our secretariat (yvonne@hkcfp.org.hk) 2 weeks before the date of presentation. Those who are experienced can share, while less experienced ones can benefit from participation. Our goal is to enhance our practical skills, promote early awareness and better management of mental health problems in our community.



(from left to right) Dr. Foo Kam So, Stephen, Dr. Fong Yeung, Francois, and Dr. Chan Suen Ho, Mark

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

ASSESSMENT ENHANCEMENT COURSE (AEC) FOR FAMILY PHYSICIANS 2013

Organizer	:	Assessment Enhancement Sub-committee, Board of Education, HKCFP
Tutors	:	Family Medicine Specialists, Fellows of HKCFP and RACGP
Supervisors	:	Dr. Wong Ka Wah and Dr. Chan Chi Wai
Co-ordinator	:	Dr. Tam Chung Yin, Janet
Objectives	:	<ol style="list-style-type: none"> 1. To improve clinical knowledge, problem solving and consultation skills through different workshops 2. To improve physical examination technique and clinic procedural skills through hands-on experience 3. To provide opportunity for inter-professional communication and social network expansion through self-help groups 4. To improve time management through simulated examination
Venue	:	Duke of Windsor Social Service Building and HKAM Jockey Club Building
Date	:	7 months' course starting from April 2013
Course Structure	:	<p>The course will consist of 4 main components:</p> <ol style="list-style-type: none"> 1. Seminars 2. Workshops 3. Self-help Group Support 4. Mock Exam <p>Seminars and Workshops will be arranged on Saturday afternoons (2:30 p.m. to 5:30 p.m.)</p>
Accreditation	:	Up to 15 CME points (Category 4.4) & 5 CPD points (Category 3.15) for the whole course
Course Fee	:	<p>Members : HK\$3,200 (Whole course) HK\$900 (Spot admission for each seminar or workshop only)</p> <p>All cheques payable to "HKCFP Education Ltd" All fees received are non-refundable and non-transferable.</p>
Capacity	:	50 doctors maximum
Enrolment	:	Enrolment is now open. Please call the College Secretariat, Ms. Yvonne Lam, at 2861 0220 for details. Successful applications will be informed later.
Disclaimer	:	All cases and answers are suggested by our tutors only. They are not standard answers for examination.
Remarks	:	Post-AEC training course will be organized for category 2 candidates who have enrolled in AEC.

Assessment Enhancement Course 2013 Timetable for Workshop

Date	Topics	Venue
Apr 20, 2013 (Sat) 2:30 – 5:30 p.m.	Introduction	Duke of Windsor Social Service Building, Wanchai
May 11, 2013 (Sat) 2:30 – 5:30 p.m.	Approach to Physical Complaints	Duke of Windsor Social Service Building, Wanchai
Jun 8, 2013 (Sat) 2:30 – 5:30 p.m.	Proper Physical Examination & Common Clinic Procedures	Duke of Windsor Social Service Building, Wanchai
Jul 13, 2013 (Sat) 2:30 – 5:30 p.m.	Viva Practice: Enhance Interprofessional Communication	Duke of Windsor Social Service Building, Wanchai
Sept 14, 2013 (Sat) 2:30 – 5:30 p.m.	Problem Solving Skills	Duke of Windsor Social Service Building, Wanchai
Oct 19, 2013 (Sat) 2:30 – 6:00 p.m.	Mock Exam	HKAM Jockey Club Building, 99 Wong Chuk Hang Road

6 April 2013 Saturday

Board of Education Interest Group in Mental Health

Aim	To form a regular platform for sharing and developing knowledge and skill in the management of mental health
Topic	Journal Club: Recent Mental Health Topics for Family Physicians
Speaker	Dr. Chan Suen Ho, Mark
Co-ordinator & Chairman	Dr. Chan Suen Ho, Mark The Hong Kong College of Family Physicians
Time	1:00 p.m. – 2:15 p.m. Light Lunch 2:15 p.m. – 4:00 p.m. Theme Presentation & Discussion
Venue	8/F, Duke of Windsor Social Service Building, 15 Hennessy Road, Wanchai, Hong Kong
Admission Fee	College Fellow, Full or Associate Members Free Other Categories of Members HK\$ 350.00 Non-Members HK\$ 450.00 All fees received are non-refundable and non-transferable.
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CPD points HKCFP (Cat. 3.15) 2 CME points MCHK
Language	Lecture will be conducted in Cantonese.
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.
Note	Participants are encouraged to present own cases for discussion. Please forward your cases to the Co-ordinator via the College secretariat 2 weeks prior to meeting.

18 April 2013 Thursday

Reappraisal of ESH/ESC Hypertension: Is There a Place for Vasodilator Beta Blockers?

Professor Alberto Zanchetti

Emeritus Professor of Internal Medicine at the University of Milan

Chairman	Dr. Tsui Hing Sing The Hong Kong College of Family Physicians
Time	1:00 p.m. – 2:00 p.m. Buffet Lunch 2:00 p.m. – 3:30 p.m. Lecture & Discussion
Venue	Diamond Ballroom, B1, Eaton Hotel, 380 Nathan Road, Jordan, Kowloon
Admission Fee	College Fellow, Full or Associate Members Free Other Categories of Members HK\$ 350.00 Non-Members HK\$ 450.00 All fees received are non-refundable and non-transferable.
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)
Language	Lecture will be conducted in English.
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.

Sponsored by
A. Menarini Hong Kong Ltd.

23 April 2013 Tuesday

Current Management for Premature Ejaculation

Professor Ng Chi Fai, Anthony

Professor, Dept of Surgery

The Chinese University of Hong Kong

Chairman	Dr. Au Yeung Shiu Hing The Hong Kong College of Family Physicians
Time	1:00 p.m. – 2:00 p.m. Buffet Lunch 2:00 p.m. – 3:30 p.m. Lecture & Discussion
Venue	Jade Ballroom, 2/F, Eaton Hotel, 380 Nathan Road, Jordan, Kowloon
Admission Fee	College Fellow, Full or Associate Members Free Other Categories of Members HK\$ 350.00 Non-Members HK\$ 450.00 All fees received are non-refundable and non-transferable.
Accreditation	2 CME points HKCFP (Cat. 4.3) 2 CME points MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)
Language	Lecture will be conducted in English.
Registration	Registration will be first come first served. Please reserve your seat as soon as possible.

Sponsored by
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Monthly Video Viewing Session

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

April's session:

Date	26 April 2013 (Friday)
Time	2:30 p.m. - 3:30 p.m.
Topic	Management of Insomnia & the Use of Hypnotics – Dr. Chiu Sin Ning
Admission	Free for Members
Accreditation	1 CME point HKCFP (Cat. 4.2) 1 CME point MCHK Up to 2 CPD points (Subject to submission of satisfactory report of Professional Development Log)
Language	Lecture will be conducted in English.

Community Education Programme

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

Date/Time/CME	Venue	Topic/Speaker/Co-organizer	Registration
13 Apr 2013 2:30 – 4:30 p.m. 2 CME points	Training Room II, 1/F, OPD Block, Our Lady of Maryknoll Hospital, 118 Shatin Pass Road, Wong Tai Sin, Kowloon	Update in Community O&G Dr. Sonia Lai ACON KWH Dept of O&G	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
03 Apr 13 (Wed)			
2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	Advanced Incidents Reporting System (AIRS) Dr. Tong Ka Hung	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Multi-media Conference Room, 2/F, Block S, United Christian Hospital	Case Presentation (Ethical Dilemma, Confidentiality Issue, Medical-legal Cases) Dr. Wan Pui Chu and Dr. Wong Sze Kei	Ms. Cordy Wong Tel: 3513 3087
5:00 – 7:30 p.m. 3 CME points	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Community Resources for Drug Abuse Patients Dr. Han Jing Hao	Ms. Crystal Law Tel: 2632 4021
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	Principles of Communication Skill Dr. Chou, Chun Wing, Stephen	Ms. Man Chan Tel: 2589 2337
10 Apr 13 (Wed)			
2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	Update Management of GERD and Dyspepsia Dr. Mok Kwan Yeung	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Meeting Room 2, 1/F, Block F, United Christian Hospital	Approach to Abnormal Laboratory Results in Asymptomatic Patients Part I (Raised ALP/ALT, Electrolyte Disturbance, Renal Impairment) Dr. Chan Fu Leung and Dr. Yuen Ching Yi	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	Video Review : Consultation Skills @ LAP Dr. Ko Wai Kit, Welchie	Ms. Man Chan Tel: 2589 2337
11 Apr 13 (Thur)			
2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	Approach to Abnormal Laboratory Results in Asymptomatic Patients Part I (Raised ALP/ALT, Electrolyte Disturbance, Renal Impairment) Dr. Cheung Yan Kit and Dr. Fan Wing Chi	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Approach to Common Urological Problems Dr. Kwok Vincci & Dr. Ho Tsz Bun	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Use of Clinic Tests in Daily Consultations - Urinalysis Dr. Tseung Chi Hang	Ms. Kwong Tel: 2595 6941
17 Apr 13 (Wed)			
2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	Drug Incidents in GOPC Dr. Chan Ka Ho	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Meeting Room 2, 1/F, Block F, United Christian Hospital	Journal Club (related to Reproductive Health and Sexuality) Dr. Kwok Yee Ming and Dr. Lam Wing Sze	Ms. Cordy Wong Tel: 3513 3087
5:00 – 7:30 p.m. 3 CME points	Seminar Room, 3/F, Li Ka Shing Specialist Clinic, Prince of Wales Hospital	Medical Emergency in General Practice Dr. Ng Wai Tong, Amy	Ms. Crystal Law Tel: 2632 4021
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	Nurse Led Clinics - Continence / NAHC in TYH Ms. Amy Lau and Ms. Y. C. Wong	Ms. Man Chan Tel: 2589 2337

18 Apr 13 (Thur)

2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	Journal Club (related to Reproductive Health and Sexuality) Dr. Lee Hung Fai and Dr. Lee Wing Mei	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Role of Family Physician in the Community Dr. Ho Chung Yu	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Family Physicians in Private Sector Dr. Choi Man Kei, Ivan	Ms. Kwong Tel: 2595 6941

24 Apr 13 (Wed)

2:15 – 4:45 p.m. 3 CME points	E1034AB, 1/F, Main Block, Tuen Mun Hospital	Heart Failure Dr. Liu Chung Wo	Ms. Eliza Chan Tel: 2468 6813
2:15 – 5:15 p.m. 3 CME points	Meeting Room 2, 1/F, Block F, United Christian Hospital	Emergency Procedures in General Practice Dr. Tsui Wing Hang and Dr. Ching Rosemary, Hin Nga	Ms. Cordy Wong Tel: 3513 3087
5:15 – 7:15 p.m. 2 CME points	Lecture Theatre, 6/F, Tsan Yuk Hospital	Review of FM Training Dr. Ko Wai Kit, Welchie	Ms. Man Chan Tel: 2589 2337

25 Apr 13 (Thur)

2:15 – 5:15 p.m. 3 CME points	Auditorium, G/F, Tseung Kwan O Hospital	Emergency Procedures in General Practice Dr. Yuen Ming Wai and Dr. Mok Ka Yee	Ms. Cordy Wong Tel: 3513 3087
4:00 – 6:00 p.m. 2 CME points	Room 614, Ambulatory Care Centre, Tuen Mun Hospital	Difficult Consultations Dr. Hung Chi Bun	Ms. Eliza Chan Tel: 2468 6813
5:00 – 7:00 p.m. 2 CME points	Room 041, 2/F, Pamela Youde Nethersole Eastern Hospital	Well Women & Men Checkup in the Community Dr. Yuen So San, Susana	Ms. Kwong Tel: 2595 6941

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
17 Mar	18	19	20	21	22	23
						2:00 – 7:00 p.m. DFM Examination Subcommittee Meeting 2:00 – 6:00 p.m. CPR Workshop 2:30 – 4:30 p.m. Higher Training Introductory Seminar
24	25	26	27	28	29	30
1:00 – 4:30 p.m. CME Lecture 2:00 – 5:30 p.m. CPR Examination		9:00 p.m. Council Meeting	2:15 – 7:30 p.m. Structured Education Programme	2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Board of Conjoint Examination Meeting		
31	1 Apr	2	3	4	5	6
			2:15 – 7:30 p.m. Structured Education Programme 8:00 p.m. Specialty Board Meeting			1:00 – 4:00 p.m. Interest Group in Mental Health
7	8	9	10	11	12	13
			Deadline for Conjoint Examination Application 2:00 – 5:00 p.m. Diabetes Clinical Attachment 2:15 – 7:15 p.m. Structured Education Programme	2:15 – 7:00 p.m. Structured Education Programme		2:30 – 6:00 p.m. DFM Pre Examination Workshop 2:30 – 4:30 p.m. Community Education Programme 2:30 – 6:00 p.m. Introductory Workshop on Research and CA Segments
14	15	16	17	18	19	20
			2:00 – 5:00 p.m. Diabetes Clinical Attachment 2:15 – 7:30 p.m. Structured Education Programme	1:00 – 3:30 p.m. CME Lecture 2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Board of Conjoint Examination Meeting		2:30 – 5:30 p.m. AEC 2013
21	22	23	24	25	26	27
		1:00 – 3:30 p.m. CME Lecture	2:00 – 5:00 p.m. Diabetes Clinical Attachment 2:15 – 7:15 p.m. Structured Education Programme	2:15 – 7:00 p.m. Structured Education Programme 9:00 p.m. Council Meeting	2:30 – 3:30 p.m. Board of Education - Video Session	

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

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