NATIONAL MARCHPAST SUMMARY

of the

FAMILY MEDICINE INTEREST GROUPS (FMIGs)

PREPARED FOR THE:

National Section of Medical Students (SOMS)/FMIG Forum
November 28th, 2008
Family Medicine Forum (FMF)
Toronto, Ontario

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## UNIVERSITY OF BRITISH COLUMBIA

### Goals for the year
- to continue to improve continuity amongst the 4 sites by having events hosted there and broadcast back to Vancouver
- increase the number of students who can attend Dinner with Docs (we are trying to increase to 2 events, with possibly another 2 at the distant sites, Prince George and Victoria)
- increase the number of students who can attend skills nights, by purchasing our suturing sets and hosting more casting clinics
- further expand the Rural Initiative Program to promote careers in medicine to rural high school students
- increase our response rate for submissions to the Family Practice Electives Repository

### Activities & Events
- FMIG Kick-off: Movie Night - screening of “8,000 Miles Later: Family Medicine for the Trans-Canadian”
- Inaugural ‘Dinner with Docs’, an interactive networking dinner designed to introduce junior students to local and rural GPs
- Suturing Clinic
- Casting Clinic
- Seminars on: International Medicine, Palliative Care, Rural Practice, Medico-legal aspects of FP, Psychiatry in Family Medicine, and Understanding the public/private debate
- CaRMS Info Night: applying to Family Medicine

### Major Successes
- Inaugral Dinner with Docs gave students a great deal of one-on-one time with family docs, each with very unique and interesting careers. Great questions were answered in this social, relaxed setting. An excellent promotion for family medicine!
- Had record numbers of students out to FMIG events, some events were attended by over 100 students. The quality of events in the past year was very high, some featuring very knowledgeable speakers and controversial topics such as the private/public debate.
- 40% of 2008 UBC graduates matched to a family medicine residency, increased from approximately 30% in previous years and drawing close to our goal of 45% of students choosing family medicine
- Increased student attendance at family medicine related conferences, including over 15 UBC students at both the rural medicine conferences in Halifax and Nelson in 2008 and 8 students at the Port McNeil Interprofessional Health Symposium

### Challenges
- the UBC expansion to Victoria, Prince George, and Chilliwack has lead to difficulty with unity
- while access to videoconferencing has greatly improved, we are experiencing ongoing issues with group cohesiveness and continuity over the 4 sites.
- we have attempted to have a larger role played by the site coordinators to bring the groups together
- additionally, interest in the FMIG grew as the class sizes increased and sweeping changes were made last year to the executive structure, creating many new positions to foster continuity and mentorship.
- this was difficult to manage, thus we have amalgamated some positions and eliminated others, hoping to reduce the size of the executive and improve group functioning.

### Unique Initiatives
- Dinner with Docs
- Purchasing our own suturing equipment for skills nights
- Rural Initiative Program (not entirely new, but expanded)
- Family Practice Electives Repository (not entirely new, but much more organized and expanded)
### UNIVERSITY OF ALBERTA

**Goals for the year**
- We have four main goals:
  1. Several talks throughout the year covering three main themes:
     - The rewards and challenges of family medicine
     - The various options available in tailoring your practice in family medicine and R3 programs.
     - The business side of family medicine; how to run a family practice.
  2. Two clinical skills training sessions.
  3. Have a “Meet the Residents” social gathering for 1st and 2nd year medical students.
  4. Connect students with family physicians through a shadowing/mentorship program.

**Activities & Events**
- October: Talk by Dr. Scott Loree on rural medicine, locums, and wilderness medicine
- November: Talk by Dr. Allen on the rewards and challenges of family medicine
  - Clinical skills training session #1 (cardio, pulmonary, blood pressure)
- December: Talk (topic unknown)
- January: Talk (topic unknown), Documentary Screening “8000 Miles Later”
- February: Clinical skills training session #2 (suturing, casting)
- March: Talk (topic unknown), Meet the Residents social event
- April: Talk (topic unknown)

**Major Successes**
- Establishing a 1st year/2nd year co-leadership to ensure better group continuity from year to year.

**Challenges**
- Working out a budget. It is hard to estimate our expenses because sometimes when we anticipate having to buy food/supplies for events, we end up receiving items by donation.

**Unique Initiatives**
- U of A FMIG Logo designed, then printed on mugs to hand out as door prizes and thank you gifts.

### UNIVERSITY OF CALGARY

**Goals for the year**
- We are focusing on improving our Family Medicine Shadowing Program this year and involving a greater amount of students.

**Activities & Events**
- August: Registration of New Members and Info Booth
- September: Rural Alberta South Residents’ Night
- September: Election of new executive and Welcome Potluck
- September: FMIG/RMIG booth at 9th Annual Family Medicine Showcase
- October: Welcome Potluck for Executive and all members at large
- October: Lunchtime presentation of FMIG/RMIG executive and activities to medical students; medical student sign-up to committees
- October: Wine and Cheese
- October: Essay contest for funding for students to attend FMF 2008
- October: Launch of 2008/2009 Urban Shadowing Program

**Upcoming**
- Speaker Series: lunch time talks by Family Physicians
- Urban Skills Day
- Rural Skills Day
- R3 Night
- Rural Specialists Night
- Conferences (and funding)
- Wind-up

**Major Successes**
- We have generated an enormous interested in our FMIG/RMIG from the new first year class, and had a major attendance of students at the 9th Annual Family Medicine Showcase.

**Challenges**
- Some of the challenges our group has faced is the majority of specialists and lack of Family Physicians teaching our lectures. We have met with Family Medicine promotion committees at our University and discussed this issue and since have had more Family Physicians involved in our small group learning sessions and some of the lectures.

**Unique Initiatives**
- We will be holding a Family Medicine Residents Night with Residents from both the Urban and Rural Family Medicine Programs running out of Calgary.
# UNIVERSITY OF SASKATCHEWAN

## Goals for the year
- recruit more volunteers

## Activities & Events

### Year End Wine and Cheese Social March 2008:
- members and family physician volunteers attended
- Guest Speaker: Saskatchewan Family Physician of the Year Dr. S Goluboff

### Clinical Skills Night March 2008
- suturing
- IVs, phlebotomy, injections
- women and men’s health
- casting

### Speaker Series
- R3 options (Feb 2008)
- Rural family medicine and residency training in Saskatchewan (March 2008)
- U of A’s rural residency program (October 2008)
- Unplanned pregnancy and abortion: the role of the family physician (November 2008)
- Rural family medicine and residency training in Saskatchewan II (October 2008)
- Geriatrics and family medicine (date TBA)
- Rural family medicine opportunities in Northern and international communities (date TBD)

### Sexual Health Skills Night
- November 2008 and date TBA in 2009
- men and women’s health from the former Clinical Skills Night will be taught separately
- there will also be a station on contraceptives

### Clinical Skills Night
- October 2008 and date TBA in 2009
- same as before minus men and women’s health

## Major Successes
- increased interest in family medicine and rural family medicine
- over 70% of the U of S medical students are members of the FMC
- significant funding obtained again this year; our sponsors include the:
  - Saskatchewan College of Family Physicians
  - Academic Family Medicine Unit, College of Medicine, University of Saskatchewan
  - Saskatchewan Medical Association (SMA), Committee on Rural & Regional Practice (CORRP)
  - Alumni Association, College of Medicine, University of Saskatchewan (to be confirmed for 2008-2009)
- positive feedback from students taking part in an informal Clinical Skills Night evaluation

## Challenges
- lack of volunteers for events
- lack of family physician mentors

### Solutions:
- FMC booth at the Saskatchewan College of Family Physicians Family Medicine Review (Sept 2008)
- presentation at the Saskatchewan College of Family Physicians Annual General Meeting (Sept 2008)
- attendance at the annual Board Meeting of the Saskatchewan College of Family Physicians (Sept 2008)
- advertisement in the SMA Newsletter
- recruitment efforts also aimed at Family Medicine residents and JURSIs/Clerks
- updates made to FMC website.

## Unique Initiatives
- Traditional Clinical Skills Nights with 4 stations now divided into 2 separate events to allow for more time and skills:
  - Sexual Health Nights focused on sexual health topics;
  - Clinical Skills Night focused on casting, suturing, injections/IVs
  - Speaker Series on abortion and family medicine, an issue never addressed by the FMC
  - Speaker Series on ALL R3 options available
- Speakers from out of province talking about their rural residency options
**UNIVERSITY OF MANITOBA**

### Goals for the year

- Additional CaRMS information sessions – Agreement to host an session on interview skills and tips in January 2009.
- Speaker Series - Agreement to have a monthly speaker series to incorporate a wider variety of family doctors and practices
- Suture Clinic – Agreement to expand suture clinic to include additional sessions (from 1 to 3) and increase the number of spots per clinic.
- Website – generation of a U of M FMIG website to increase access to med students and raise awareness of events.
- Meet and Greet – Agreement to host a FMIG dinner with med students, family med residents, and family doctors in addition to the RIG dinner.
- Movie nights – to promote informal discussion between med students interested in family medicine

### Activities & Events

- Suture Clinic – teaching medical students (open to lower years) how to suture with the help of attendings and residents
- FMIG Rural Docs dinner – having a meet and greet with rural docs in Manitoba and sharing in their experiences
- Speaker Series – having family docs of different practices come in to share their experiences with the students
- CaRMS series – Having presentation sessions by the Family Medicine attendings to help students learn how to be competitive in the CaRMS match

### Major Successes

- CaRMS information session – discussion of portfolio development in face of the recent changes to the integrated match system;
- Increased attendance by med 1 students at meetings (from <5 to > 15) through active campaigning during the CaRMS information session.

### Challenges

- I would say that getting awareness about the FMIG group was a little tough with all the different things going around med school with all the different activities and groups that students have options to be involved with.

### Unique Initiatives

- CaRMS information sessions where the family medicine program director provides tips on being a more competitive applicant in light of changes to the match system.
- Movie nights that facilitate discussion between med students on why they are interested in family medicine and where/how they hope to practice family medicine.
### NORTHERN ONTARIO SCHOOL of MEDICINE (NOSM)

#### Goals for the year
- A collaborative FMIG executive that represents the interests and meets the needs of students in all years and at all learning sites.
- Striving to consistently promote Family Medicine throughout the year by having one FMIG event at NOSM per month, between the two main campuses.
- To secure faculty advisors for the FMIG at NOSM, preferably one per main campus.
- Increased Family Medicine Resident involvement in FMIG and undergrad education as a whole
- Increasing contact between community family physicians and students, with the hope of creating opportunities for students wanting to explore the discipline of Family Medicine.
- To host at least one fundraising event per campus in the 2008-2009 academic year for the Walk for the Docs campaign (CFPC).

#### Activities & Events

<table>
<thead>
<tr>
<th>Year</th>
<th>West Campus</th>
<th>East Campus</th>
<th>Events already done</th>
<th>East Campus</th>
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<tbody>
<tr>
<td>2007-2008</td>
<td>West Campus</td>
<td>Rotational Dinner</td>
<td>Clerkship talks</td>
<td>Wine and Cheese</td>
<td>Clerkship talks</td>
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<td></td>
<td>Rotational Dinner</td>
<td>Clerkship talks</td>
<td>Palliative care talk</td>
<td>Clerkship talks</td>
<td>Pharmacy talk</td>
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<tr>
<td>2008-2009</td>
<td>Events already done</td>
<td>Family Medicine Residency NOSM West – program director talk (Dr. Almond)</td>
<td>Meet and greet with first year students (East campus)</td>
<td>Wine and cheese with residents and family physicians – possibly in the winter – try to piggyback with FM Resident Grand Rounds ie a Thursday night at 5pm.</td>
<td>Social event to increase networking opportunities between junior students and local FPs for electives – possibly wine and cheese party</td>
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<td>Educational talks esp with Family Medicine with specialty skills (OBS, Anaes, ER, etc) – video conferenced between sites</td>
<td>Family Medicine Residency NOSM East Info session</td>
<td>Pain management seminar – Dr. Jeff Davis</td>
<td>Common ophthalmology problems in family practice</td>
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#### Major Successes
- Rotational dinner, Wine and Cheese dinner – good response from Family Physicians in community even those who aren’t normally involved in academic teaching
- Videoconferencing – allowing students from both campuses to participate in talks hosted on either campus
- New FMIG executive structure
  - team of 20 students interested in helping to plan and execute events

#### Challenges
- As we our fourth year of students enter studies this Fall, we are becoming a larger group with students at many campuses (Thunder Bay/Sudbury (Yr 1, 2, 4), 13 communities (Yr 3)).
- Some of our main challenges are how best to use our resources to meet the needs of all students. Being split amongst multiple sites also raises some leadership and budgetary issues. While events on either main campus appeal to the majority of students, and we are experimenting with video/teleconferencing to continue to engage 3rd/4th year students.

#### Unique Initiatives
- Possibly collaboration with Rural Medicine Interest Group and Emergency Medicine Interest Group to promote Family Medicine as a discipline in a diversity of settings and practice arrangements.
- Increased Family Medicine Resident involvement in FMIG – as advisors, as resources, and potentially in the future, as part of a mentoring program. (in progress)
**Goals for the year**
- n/a

**Activities & Events**
- February 13/08: FMIG Research Fair to promote summer research opportunities and to promote the importance of research to Family Medicine
- February 29/08: Well Baby Care with the Rourke Baby Record. Talk by Dr. Leslie Rourke
- April 4th/08: Guest Speaker Dr. Ravalia, about Rural Family Medicine and the joys of practicing in Newfoundland for 20 years.
- April 12/09: Clinical Skills Conference. 60 students participated in 4 workshops (suturing, injections, IVs, male and female health exams, and ophthalmologic exam) and listened to guest speakers on the joys of family medicine (Renee Arnold), and how to choose your practice (by Scotiabank)
- September 25/08 Welcome to FMIG Lunch
- 4th year panel discussion about residency, April 2008
- Upcoming year:
  - FM awareness week, November 24-29 (various activities)

**Major Successes**
- Clinical skills workshop was met with very positive reviews, and many people are requesting another one this year
- High attendance numbers and high interest in the group
- Many 2nd year students have signed up with FMIG after seeing the variety of events from 2007/2008
- Leadership team of 20 students interested in helping to plan and execute events

**Challenges**
- Keeping the continuity from one year to the next when the senior coordinator position is passed on. There was a movement last year to incorporate a 1st year coordinator to help make the transition smooth, but for reasons beyond our control, the person in the 1st year coordinator position was not able to carry on the duties to the senior coordinator position. This year, however, we have attempted to try this again and hopefully next year, the incoming senior coordinator will have some experience already in a leadership role with FMIG.

**Unique Initiatives**
- Make sure that there are enough events that the FMIG members can achieve their ‘10 hr credit’
- Hold events that appeal to the interests of the FMIG members and also non-members
### UNIVERSITY OF WESTERN ONTARIO

**Goals for the year**
- Our main goal for this year is to promote Family Medicine and all of its available opportunities to our classmates and the rest of the medical school.
- Another goal is to integrate the Windsor campus into our FMIG activities so the students feel included and informed about Family Medicine.

**Activities & Events**
- Orientation Week Casting Session: Family Medicine residents hosted a casting workshop for first year medical students as part of a clinical skills day during orientation week (September)
- Family Physician Panel (Why Family Medicine?): Four family physicians spoke on family medicine as a career choice, debunked common myths about the practice of family medicine, and answered student questions (October)
- FMIG Mug Sale (October)
- Summer Opportunities in Family Medicine, electives talk (October)
- Practicing Family Medicine in Chatham, talk and social (November-December)
- Clinical Skills Day (January)
- New Family Health Models (FHNs, FHTs) (February)
- Hypnotherapy and Family Medicine (February-March)

**Major Successes**
- The majority of the events we have been working on will be taking place later in the year. However, our FP Panel discussion was very well attended and we received a lot of positive feedback on the event. The speakers were very well-spoken and passionate about FM, and many of the students who attended have since told us that they now see FM in a completely new light.

**Challenges**
- Our primary challenge this year is integrating the new Windsor campus into our events. Because ours is a large group with well-attended events, it is more inclusive to use video conferencing for Windsor. However, we have had difficult booking the video conference facilities and had to switch our panel discussion date on numerous occasions. Our solution was to speak to the booking coordinator to work together on finding a suitable time, and in the future, we will book our events much earlier to avoid conflict.
- We are also integrating the Windsor campus by recruiting a first year representative who can keep Windsor students informed on FMIG events and possibly organize some Windsor-based events.

**Unique Initiatives**
- As previously mentioned, one of our big challenges this year has been integrating the new Windsor campus into our FMIG activities. We are hoping to host an event in Chatham (midway between London and Windsor) for students from both campuses to learn about practicing family in Chatham (we are hoping to host a talk/discussion, followed by a social event with local physicians).
- We will be hosting our annual Clinical Skills Day again this year in January and are hoping to offer some more varied speakers and workshops, including hypnotherapy.

### McMaster University

**Goals for the year**
- Continue with successful events and coming up with new ideas for events promoting family medicine
- Input from the new first year class will be critical to our continued success.

**Activities & Events**
- Family Medicine Open House
- Family Medicine Mentorship kick off event
- Speaker Series
- FMIG Mentorship Wine and Cheese
- Clinical Skills workshops

**Major Successes**
- FMIG Mentorship Wine and Cheese – good turn out with several family docs and an excellent keynote speaker who really promoted family med to the fullest
- Huge interest in FMIG executive positions – six people were running for 2 co-chair positions this year
- New Mentorship Wine and Cheese event was a huge success and will turn into a yearly event.

**Challenges**
- Communication between all co-chairs and FMIG members. Continuity of information. This is being solved by establishing a common FMIG e-mail account where we store most event reports and event summaries for easy access. Another important challenge is budgeting.
- In order to secure perpetual funding from our department and council, it is important to keep itemized records of our annual spending. This will be accomplished throughout new treasurer position.

**Unique Initiatives**
- FMIG Mentorship Wine and Cheese
- “Approach To…” Speaker series (was cut short due to resident availability)
UNIVERSITY of TORONTO

Goals for the year
- Overall goal: "Diversify"
- Clinical Skills: instead of having 2 similar sessions in each term, sessions could be more 'themed'. For example, one session could focus on the “2+1” options in family medicine, as to introduce participants to other clinical practices within the wide scope of a “2+1” family practice.
- Advocacy: introduce a “Students’ Summer/Rural Experiences” speaker series where second-year medical students would talk about their summer experiences to give first-year students an idea of what is available.
- Newsletter: instead of having one issue at the end, to put out 2-3 issues the entire year, each one with a specific theme that would appeal specifically to first-years and second-year students.

Activities & Events

September
- Orientation Week promoted IgFM and family medicine opportunities to the incoming first-year (1T1) medical class.
- The Mentorship Program kicked-off the year with an interactive "Meet and Greet" wine and cheese for students matched with family medicine residents and doctors.

October
- The U of T 1T0 and 1T1 medical classes supported the ‘Walk for the Docs of Tomorrow’ Bake Sale raising $200 towards the College of Family Physicians of Canada scholarships awarded to one medical student from every Canadian medical school each year.

November
- IgFM Information Lunch introduced the role of IgFM and opportunities for students to get involved.
- Family medicine residency and the current state of the specialty were also discussed.
- IgFM Speaker Series hosted a well-attended talk with Dr. Tim Rindlisbacher, a family physician with sports medicine training who has worked with professional Toronto sports teams.
- The annual IgFM Clinical Skills Conference held in the Fall and Spring gave students a chance to learn suturing, obstetric, gynaecologic, and veni-puncture skills in small-groups led by volunteer family medicine residents and physicians. The conferences are popular with students as it is their first chance in their training to learn these hands-on skills.
- The U of T Department of Community and Family Medicine’s Annual Undergraduate Education Faculty Development Workshop invited the current and past year IgFM co-presidents to conduct a small-group session on how to market family medicine and advocate the need for a comprehensive one-stop online resource for family medicine.

February
- IgFM Speaker Series invited residency recruitment coordinator, Dr. Marcus Law and PGY-3 family medicine residents to provide students with useful information and personal experiences on applying to the Family Medicine Residency Program and PGY-3 options.

March
- Family Medicine Interest Group National Evaluation Survey by the College of Family Physicians of Canada was distributed to U of T undergraduate medical students and across Canada to assess the impact of family medicine interest groups across the nation.

April
- IgFM Speaker Series hosted Dr. Mark Lachmann who gave an interesting perspective of a family physician who practices medicine on Reserves and remote First Nation and Inuit communities.
- The Spring IgFM Clinical Skills Conference offered casting in addition to the workshops from the Fall.
- The IgFM Ice Cream Sundae Fundraiser gave students a cool treat and raised money for U of T 1T1 class charity, Bloorview Kids Rehab.
- IgFM Advocacy surveyed 1T1 and 1T0 perspectives on family medicine and the impact of IgFM at U of T. The results of this study will be available in 2008-2009.

May
- In an effort to promote generalism in medicine, IgFM collaborated with the U of T Paediatrics Club and the Student Surgical Skills Development Club to host Generalism Night dedicated to generalist specialties such as Family Medicine, Paediatrics, General Surgery and Internal Medicine. The night began with insightful presentations by keynote speakers Dr. Leslie Nickell and Dr. Danielle Martin, followed by an opportunity for students to mingle with generalist faculty members and residents.

June
- The Department of Family and Community Medicine (DFCM) and IgFM proudly hosted Family Medicine Week for first year U of T medical students June 23 to 27, 2008. Highlights of the week included Family Medicine guest speakers on specific topics such as women’s health and international health, clinical skills workshops, three half-days of shadowing family physicians, and a rural experience in Alliston, Ontario.
| **Major Successes** | - Core IgFM programs such as the Mentorship Program, Speaker Series, and Clinical Skills Conferences were strengthened, with a record number of 76 mentor-mentee matches made and new and important topics addressed by guest speakers (see 2. FMIG Activities).
- Two new additions this year based on recommendations from last year.
- Two First Year Representatives were added to the executive and served as key liaisons to the first year class, participated in various IgFM events, and organized a fundraiser for the 1T1 class charity.
- Inaugural "Generalism Night" was held in conjunction with the Paediatrics and Surgical Skills student groups in order to promote generalism in medicine.
- New promotional banner for use at IgFM events. The new logo and banner attempt to emphasize key concepts in family medicine: longitudinal relationships, diverse clinical experiences, and comprehensive care. (see attachment) |
| **Challenges** | - One of our event’s food order overestimated the number of attendees. To get an idea of attendee numbers and how much food to order we set-up a simple surveymonkey RSVP quiz and included it in the social listserv emails to our medical classes. Our class council had a subscription to Survey Monkey for all clubs/organization to use. We donated our extra food to the local shelter!
- Busy schedules and several commitments hindered dedication to the mentorship program as the year progressed. To address this issue, we held a meeting in which the expectations of the program were outlined in detail. We also kept in much closer contact with both students and mentors with regular emails asking them to keep us updated on their mentorship relationship. We encouraged them to contact us ASAP if they had difficulty with their match (e.g. no contact made, no response to emails or telephone calls). We did have a number of mentors who initially said their students did not contact them at the very beginning of the program but we were able to resolve these issues and had few complaints for the remainder of the year. |
| **Unique Initiatives** | - Our inaugural Generalism night appealed to a larger audience capturing students who may not be interested in Family Medicine as a career as these students are exposed to the specialty in a broader context. |
**McGILL UNIVERSITY**

**Goals for the year**
- Exposing medical students to a wide variety of Family Medicine role models
- Demonstrating the diversity of Family Medicine
- Supporting students who are interested in Family Medicine
- Educating medical students about Family Medicine training and careers
- Fostering mentorship between Family Physicians, residents and medical students
- Fostering mentorship between upper- and lower-year medical students

**Activities & Events**
- ‘Souper-causerie’ Dinner chat, an intimate occasion for students to discuss any topics with family physicians;
- Lunch talk, one on life-ending care and another one with a doctor working in northern communities;
- Skills night activity: vaccination (influenza), hypertension and diabetes, mouth and nose exam and corticosteroids infiltration, delivery care, stitches;
- Observation internship (one afternoon per week, for 4 weeks);
- Wine and Cheese, a conference on family medicine practice and its legislation

**Major Successes**
- FaMSIG held its first day trip to Hawkesbury this year. Students were exposed to a community hospital run primarily by family physicians, a drastic change from tertiary centers in Montreal. The hospital was very welcoming and the students truly enjoyed the experience. Students appreciated being exposed to rural medicine as well as the possibilities as a hospitalist for family physicians.
- The annual Family Medicine Skills Workshop, normally held in the auditorium of the Jewish General Hospital, was moved last year to the McGill Medical Simulation Center. In addition to having nicer facilities, there was more equipment and students had access to standardized patients with which we held a station on how to approach social issues in family medicine. The event was also publicized in a local newspaper, The Suburban, to raise awareness of directives aimed at promoting family medicine in Quebec.

**Challenges**
- Given the particularities of family medicine in Quebec, there has always been a lot of hesitancy to pursue family medicine by medical students because of government restrictions, notably the PREMs. Multiple sessions have been scheduled with family doctors but questions still remained. We decided to hold a Q & A session where residents spoke to students about family residency. In addition to providing facts, the residents helped to add perspective to residency in family medicine so that students are not deterred by one element. It was well received but unfortunately only first years were able to attend. We are trying to organize evening sessions for third and fourth year students.

**Unique Initiatives**
- FaMSIG is planning to hold a session with Medicine Sans Frontieres representatives as well as family doctors who have partaken in a recent project with them. The aim is to raise awareness as to the importance of general practitioners who have the skills and knowledge to deal with a variety of problems in different settings. This will also provide students with possible summer plans that we can possibly help arrange.

**UNIVERSITÉ de MONTRÉAL**

**Goals for the year**
- Offer more lunch talks and increase the number space for the skills day

**Activities & Events**
- Skills day, Lunch talks, networking/mentorship meeting.

**Major Successes**
- Skills day

**Challenges**
- Funding the skills day to allow more people to participate

**Unique Initiatives**
- n/a
### UNIVERSITÉ LAVAL

#### Goals for the year
- High school conferences, community involvement. Conference to promote family medicine and to discuss about health issues affecting teenagers (junk food, tanning, etc.)

#### Activities & Events
- ‘Souper-causerie’ Dinner chat, an intimate occasion for students to discuss any topics with family physicians;
- Lunch talk, one on life-ending care and another one with a doctor working in northern communities;
- Skills night activity: vaccination (influenza), hypertension and diabetes, mouth and nose exam and corticosteroids infiltration, delivery care, stitches;
- Observation internship (one afternoon per week, for 4 weeks).
- Wine and Cheese, a conference on family medicine practice and its legislation

#### Major Successes
- Our skill night activity was very successful, students appreciated to be introduced to clinical techniques.
- Wine and Cheese: this first time activity was really popular. Students were glad to demystify family medicine practice.

#### Challenges
- We have some difficulties to satisfy the student’s needs. We would like to make our activities bigger so that we can fulfill student’s requests.
- One of our major challenges was to find dates for our activities (mostly for lunch time activity) because none of the pre-clinic students has the same schedule.

#### Unique Initiatives
- High school conferences

### UNIVERSITÉ de SHERBROOKE

#### Goals for the year
- To organize and finalize our new sponsorship program
- Perhaps organize our round table project
- To assure the continuity of the FMIG

#### Activities & Events
- (2008-02-20): Clinical skills workshops (tapping, chronic dolor and physiotherapy, endometrial biopsy, emergency selection and blood tests)
- (2008-04-28): Clinical skills workshops (blood test, family medicine’s video, sutures, cyst removal, nasogastric tube)
- (2008-05-10): Lecture on home care by a family doctor
- (2008-09-29) : Recruitment activity (cookies, candy and folder!)
- (2008-11): Beginning of our sponsorship program between family doctors and medical students in Sherbrooke
- (2008-11-12): First contact’s cocktail with family doctors and students who are going to participate to the sponsorship program
- (2008-11-19): Lecture on sportive medicine by a family doctor
- Collaboration with the magazine “L’antidote”

**Projects planned:**
- Articles contest in the university’s newspaper (L’influx) on an inspiring family doctor and projects of our FMIG
- Clinical skills workshops (plasters & splints, sutures, blood tests, endometrial biopsy, articular puncture)
- Round Table between students and family doctors
- Website improvement

#### Major Successes
- We had a major success with the clinical skills workshops which were really appreciated by the students. These workshops made them learn about family medicine in a practical context, which enabled them to better appreciate what they could do in family medicine. They were such a success that we are planning to do two more this year.
- We also had a great success with our new recruitment activity which was original and efficient in forming our new committee.

#### Challenges
- Formalize and popularize the FMIG
- Assure a good continuity of this project for the next years
### Unique Initiatives
- Sponsorship program between family doctors and medical students:
  - We joined many doctors from Sherbrooke. Each doctor will be paired with a group of 6-10 students. According to the doctor’s availability, 1-2 students of his/her group will follow him/her for a period every week to learn more about family medicine. These doctors will also be available to answer the students’ questions. A cocktail will be organized to permit the first contact between the doctors and the students.
  - Texts contest in the university student’s journal

### DALHOUSIE UNIVERSITY

<table>
<thead>
<tr>
<th>Goals for the year</th>
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</thead>
<tbody>
<tr>
<td>Improve numbers at our events.</td>
</tr>
<tr>
<td>Continue relationship building with Dept FM, NSCFP, and starting to build a relationship with Doctors Nova Scotia.</td>
</tr>
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<table>
<thead>
<tr>
<th>Activities &amp; Events</th>
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<tbody>
<tr>
<td>Two Skills Nights – this year we had vaginal deliveries as a station for the first time which was very well received.</td>
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<tr>
<td>Labrador March Break Trip – 6 students went to Goosebay to do work in the hospital with family doctors for the week.</td>
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<tr>
<td>Road trip to New Brunswick – Weekend trip with 30 students. Tour of Fredricton Family Medicine Teaching Site, Fredricton Hospital and then went to two smaller communities for tours of their facilities.</td>
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<tr>
<td>Movie Nights</td>
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<tr>
<td>Dining with Docs – 3 course meal with Family Doctors and Residents.</td>
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<tr>
<th>Major Successes</th>
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<tr>
<td>Becoming more involved with Dept of Family Medicine and the NSCFP</td>
</tr>
<tr>
<td>Family Doctor Shortage Panel – had multidisciplinary speakers talking about options in primary care.</td>
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<tr>
<td>Student Referendum for Incorporating more Family Medicine in the Pre-Clerkship curriculum</td>
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<tr>
<td>Knowing the quality of a speaker before having them come to talk for the group.</td>
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<tr>
<td>Recruiting exec members</td>
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<tr>
<td>Advertising events</td>
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<tr>
<td>Walk for the Docs of Tomorrow at our school with beer and pizza from Scotiabank</td>
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<tr>
<td>Referendum regarding FM in the Pre-Clerkship Curriculum</td>
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### MEMORIAL UNIVERSITY

<table>
<thead>
<tr>
<th>Goals for the year</th>
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<tbody>
<tr>
<td>To introduce medical students to the diversity of family medicine as a specialty career.</td>
</tr>
<tr>
<td>To introduce students to the valuable and ranging roles family physicians have in rural and urban communities.</td>
</tr>
<tr>
<td>To bring together practicing family physicians and students for open dialogue.</td>
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<tr>
<td>To provide the opportunity to learn skills and obtain knowledge about Family Medicine during the pre-clerkship medical curriculum.</td>
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</tbody>
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<tbody>
<tr>
<td>Weekly Fridays with Family lunchtime presentations</td>
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<tr>
<td>Family Medicine Information Night (Nov. 19th)</td>
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<tr>
<td>Procedures Day for 60 second year students</td>
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<tr>
<td>Creation of a port-folio for our FMIG (information document, history of our FMIG, budget, sample letters)</td>
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<tr>
<td>Applying for and receiving funding from Department of Health, Recruitment Office of the Regional Health Authorities</td>
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<tr>
<td>Obtaining a sustainable source of funding</td>
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<tr>
<td>Continuing apply for funding, with Faculty support- dependable funding will enhance activities and events, and help promote family medicine as a career option</td>
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<tr>
<td>Implementing charitable activities during the December holidays and hosting a public blood pressure clinic (Winter 2009)</td>
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</tbody>
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