



CAS Newsletter

Editor: Dr. D.W. Fear / Volume 6, Number 2 / Summer 1990

Working Together for Progress

Dear Colleagues,

The CAS entered the last decade of this century on the right foot. During the last five years, our Society has taken giant steps, and the starting point was the in-depth restructuring of the CAS's central office.

During this phase we increased our membership through an improved recruiting system, enhanced the Society's finances, improved member services, increased the operational efficiency of our various committees and, especially, turned our Annual Meeting into a major event.

Indeed, our Vancouver meeting, which was held in June, was unquestionably a major event in terms of both the number of anaesthetists registered (871) — the largest number of registrants in the history of our Society — as well as in terms of the impressively high scientific quality of speakers, submissions and presentations.

At the President's Dinner in June, I had the distinct honour of becoming your president for the year 1990–1991. It is with great enthusiasm that I intend to sustain the momentum that currently propels the CAS.

Over the last two years, a debate has existed over whether or not to accept anaesthesia technicians. You can see that the CAS is listening to its members throughout Canada, and our solid democratic structures helped us to bring this debate to a happy conclusion.

This fall the CAS will publish the new Guidelines to the Practice of Anaesthesia. These guidelines are the result of a great deal of work by the CAS Committee on Standards of Practice, and we hope that it will meet your needs and expectations. These guidelines will be reviewed and updated periodically in order to accommodate current trends in the practice of our specialty in Canada.

We will face other challenges soon, including the development of a position on maintenance of competence. This subject is currently being examined by the CAS Committee on Continuing Education in conjunction with the Royal College of Physicians and Surgeons of Canada. You will be kept abreast of all developments, and you can rest assured that we are working in our members' interests on this issue. At the appropriate time, you will



be invited to participate in discussions which will, undoubtedly, occur within the Society.

Dear colleagues, we are here to protect your interests, and it is with you that we intend to continue working for the progress and advancement of the Society.

I look forward to meeting many of you this year.

Jacques Samson, MD, CSPQ, FRCP
President

Great Gift Ideas for CAS Members

The Canadian Anaesthetists' Society offers the following items for sale to members.

Prices include shipping and handling. All orders must be pre-paid and sent with a cheque (payable to the Canadian Anaesthetists' Society) to 187 Gerrard Street East, Toronto, Ontario, M5A 2E5. Allow 4–6 weeks for delivery. Do not send cash!!!

Canadian Anaesthetists' Society Man's Silk Tie

100% silk tie bearing the shield of your Society. Available in navy or burgundy with or without matching silk pocket handkerchief.

Cost: \$20.00/tie \$5.00/pocket handkerchief
(free gift box available on request)

Canadian Anaesthetists' Society Mug

Made of durable white ironstone with the CAS shield in blue. Holds 12 ounces of your favourite beverage.

Cost: \$10.00/mug

Canadian Anaesthetists' Society Pen

Large sturdy "roller-ball" pen with the CAS logo "wrapped" on the pen lid. Black ink, white barrel with blue logo.

Cost: \$3.00/pen

Maintenance of Competence: How Does it Affect You?

Editor's Note:

Dr. John Clark, Chair of the Committee on Continuing Education, presents some important information for all practising anaesthetists regarding the development of maintenance of competence programmes. While still in its embryonic stage, this is an opportunity for members to air their views. Letters to the Editor are welcome and a selection of comments from members will be published in a forthcoming issue of the Newsletter.

The Committee on Continuing Education has been given the task by the Council of the

(continued on page 2)

MAINTENANCE OF COMPETENCE

continued from page 1

Society to develop a position for the Society in regards to Maintenance of Competence.

In the past two years, the Royal College of Physicians and Surgeons of Canada has hosted two conferences of all specialties to discuss this topic. The Royal College is actively involved in promoting the development of (a) Maintenance of Competence Programme(s) for specialists. In the near future several specialties will become involved in pilot projects. There is complete agreement that we, as physicians, should take the initiative in the development and establishment of Maintenance of Competence programmes. It should be noted that the College of Family Physicians of Canada has had a Maintenance of Competence system in place for many years.

A. What is Competence?

Competence can be defined as the combination of knowledge, skills, attitudes, and judgment necessary for the performance of professional responsibilities and services.

B. What is Performance?

Performance is the execution of professional responsibilities and services.

C. What is Continuing Education?

Continuing Education comprises those educational activities undertaken by practising professionals, following completion of formal education and training, for the purpose of maintaining their professional knowledge, skills and attitudes.

It should be noted that the definitions of competence, performance and continuing education are clearly distinct, are not synonymous and carry distinctly different implications for the elaboration of an appropriate Maintenance of Competence Programme.

D. How would a Maintenance of Competence Programme Affect the Practising Anaesthetist?

Firstly, one has to define the characteristics of a competent anaesthetist. It is necessary to take into account that each individual anaesthetist's practice may vary considerably, i.e. not only must we consider anaesthesia in the O.R. as it pertains to all the different specialties, but we must also consider pain management, intensive care and other areas in which anaesthetists are involved.

The competent anaesthetist must have the ability to assess patients, to select appropriate techniques, to provide care both preoperatively, intraoperatively and postoperatively, and to possess the scientific knowledge necessary to provide a sound base for a good clinical practice. This includes knowledge of the principles of pharmacology, physiology and physics. It is also necessary to understand the principles of anaesthetic equipment and the special needs of particular groups of patients in all age brackets. Finally, one must maintain the know-

ledge, skills and attitudes necessary to the practice of safe anaesthesia. The importance of quality assurance and risk management in anaesthesia must be understood, and a program of personal continuing education to keep abreast of developments in the field of individual practice, and in other relevant fields, is required.

E. How Do You Maintain Competence?

The individual anaesthetist will be encouraged to keep a log of his/her educational activities. This is, in fact, already required in some jurisdictions at the request of the licensing authorities and/or hospital boards in order to maintain privileges. Various educational activities can be useful in helping to maintain competence, and it has been suggested that the Canadian Anaesthetists' Society should publish guidelines on activities that can be useful in the Maintenance of Competence.

F. How Can Maintenance of Competence be Assured?

The Committee feels that re-certification or "point-counting" systems are inappropriate in a Maintenance of Competence system. Any system should not be

punitive in nature. The Committee does feel that, although there are many ways of attempting to assess Maintenance of Competence, the most effective way to make a true evaluation is to establish a system which incorporates peer review. A peer review system can take many forms: one-on-one in the O.R., chart reviews, oral presentations etc. By this mechanism, performance, actual practice, professional activity and self educational activity can be assessed.

Recent WFSA Publications

Resuscitation Handbook by Dr. Peter Baskett, 1989, at £9.95 from Harper & Row in Europe, from J.B. Lipincott in the USA and Canada, or from Dr. Peter Baskett, Department of Anaesthetics, Frenchay Hospital, Bristol BS16 1LE, UK.

Basic Techniques of Nerve Blockade by Dr. D. Bruce Scott, 1989, at £10 from Information Consulting Medical AB, Geijergatan 50, S216 19 Malmo, Sweden or write to Dr. D. Bruce Scott, 10 York Place, Edinburgh EH1 3EP, UK.

Source: WFSA Newsletter, Number 20, July 1990

1990-1991 Members of Executive & Council

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Committee Reports

Allied Health Professions

Dr. Ian White

In order to enhance the relationship with other allied health professions, the committee recommended to the Council of the CAS that:

The CAS develop a closer affiliation at the executive level with the Operating Room Nurses' Association and the Post-Anaesthesia Nurses' Association;

The CAS become involved in the development of effective quality assurance programmes, many of which are administered by nurses;

The CAS maintain its mutually strong association with the Canadian Society of Respiratory Technology;

The CAS maintain its strong association with the Royal College of Physicians and Surgeons of Canada;

The CAS maintain its association with the Canadian Society of Cardiovascular Perfusionists;

The CAS maintain its association with the Emergency Medicine Technologists, but that this association be reviewed at regular intervals.



The CAS Newsletter is published quarterly by the Canadian Anaesthetists' Society and distributed free of charge to all members. It is available in French upon request (SCA bulletin de nouvelles). Letters to the Editor, articles, and suggestions for articles are invited.

Editor: Dr. David W. Fear
Production Manager: Ms. Jane Leckey
Printer: Britannia Printers Inc.
Contributors: Dr. J. Clark
Dr. J. Samson

Send inquiries, correspondence and address changes to:

CAS Newsletter
Canadian Anaesthetists' Society
187 Gerrard Street East
Toronto, Ontario, Canada M5A 2E5
Tel: (416) 923-1449
Fax: (416) 944-1228

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With the team approach to health care, these associations will be very useful in the future and will certainly enhance the image of anaesthesia as a very significant member of this team.

An anaesthesia technician programme is being planned for the Michener Institute in Toronto. A steering committee, to which Drs. Soder and White have been appointed, will review the development of this programme. A local curriculum committee has been set up, and will include various members of the Department of Anaesthesia at the University of Toronto. A report will be made to the steering committee in September 1990.

There has been further discussion with respect to the anaesthesia technicians' "Description of Duties," which had been circulated to the members of the Society. It is emphasized that the anaesthesia technician is employed to assist the anaesthetist in the provision of safe anaesthesia, and all clinical acts performed by the technician must be under the direct supervision of the anaesthetist. In addition, the phrase "but not necessarily limited to," which appeared overly permissive, was deleted from the "Description of Duties." There was support for these changes from both the Allied Health Professions Committee and from Council, and the Society is confident that members' fears will be allayed by these significant changes.

Manpower

Dr. Frank King

The committee has recommended to Council that a "Lifestyle Questionnaire" be sent to over 2500 physicians practising anaesthesia in Canada. The objective of this project is to obtain a more detailed picture of the lifestyle of the practising anaesthetist, including workload, population distribution, hours of work, hospital facilities, anaesthetic facilities, other professional activities, annual leave, study leave, work-study leave, work satisfaction, perceived problems, and retirement plans. It is felt by the committee that this kind of information is vital for future planning in this country. The Executive will consider this proposal and its funding implications, and a further report will be submitted at the next Council meeting.

ACUDA

Dr. Jean-Pierre Tétrault

The new Executive of ACUDA consists of Dr. Jean-Pierre Tétrault, President, Dr. Douglas Craig, Vice-President, Dr. Ray Matthews, Secretary-Treasurer, Dr. David Bevan, Chair of the Management Committee, Dr. Doug DuVal, Chair of the Education Committee and the Chair of the Research Committee.

ACUDA has revised its Constitution and By-Laws and some of the new items include:

- Membership includes every member of the University Departments;

- Each Department sends three voting members to the General Meeting;
- Three regional chapters were created: Eastern, Central and Western. These Chapters will meet during the fall and spring and, thus, should vastly improve the preparations for the Annual General Meeting;
- The association bodies will issue a Newsletter which will be sent to members at an appropriate time of the year and would facilitate communication within the membership;
- A registry of members, which would include their affiliation within bodies relevant to ACUDA business will be created and issued to members (the Royal College, the CMA, the CAS etc.).

Medical Economics

Dr. Angela Enright

The committee continues to monitor and collate information on the economic issues affecting the practice of anaesthesia across the country. While acknowledging significant regional differences, an attempt is being made to collect other information which will be useful in the negotiating process for anaesthetists. A questionnaire has been sent to each member of the committee and to provincial economics committee chairs to obtain information with respect to pre-op assessment fees, surcharges, after-hours premiums, earnings, overhead costs, CMPA reimbursement and fees for obstetrical anaesthesia/analgesia.

The committee is also dealing with the issue of relative-value guides, which are basically fee schedules which take into account the complexity of the case, the intensity demanded and the amount of time required to complete the case. It is an attempt to deal with disparities both within and between the sections. At the present time, British Columbia is undertaking the development of a relative-value guide. Alberta is in the early stages of planning, and it would appear that Ontario will also follow suit.

Scientific Affairs

Dr. Robert Byrick

The due date for abstracts for the 1991 Annual Meeting will be December 14, 1990. This will permit time for the evaluation of abstracts prior to the February 8-10 Mid-Winter Council meeting.

If more than 200 abstracts are received for the 1991 meeting, they will be reviewed by half the committee, and the Chairman will separate them according to the special expertise of the members of the Scientific Affairs Committee.

The seminar, "How to Kick-Start a Career in Research" was a success, with 46 residents attending. The committee proposes to have a similar seminar for residents next year; the tentative subject is "How to Optimize Your Operating Room Experience." This seminar will involve the Committee on Continuing Education, chaired by Dr. John Clark. The committee is well into the planning stage for the 1991 meeting, and further information will be available in the near future as speakers and topics are confirmed.



VANCOUVER

New Award Announced

Dr. Roderick A. Gordon (pictured below) was honoured at the recent CAS Annual Meeting in Vancouver when the creation of a new award in his name was announced. The R.A. Gordon Career Research Award will be awarded for the first time in 1993, the 50th anniversary of the Society, to an established Canadian researcher. This award is named after an individual who has made immense contributions to the field of anaesthesia in Canada and world-wide. As one of the founding members of the CAS and founding Editor of the Canadian Anaesthetists' Society Journal (now the Canadian Journal of Anaesthesia) he has had inestimable influence on the Society for some 48 years.

The award (up to \$20,000.00 in any one year) will be funded by interest generated by the capital in the Research Fund. Members are encouraged to consider the CAS Research Fund in their planned annual giving, through direct donations, and through other channels such as bequests or life-time wills.

The CAS salutes Dr. Gordon and thanks him for his efforts on behalf of anaesthesia in Canada. Please give generously to the Research Fund to help finance this important award which will continue to promote the ideals first conceived by Dr. Gordon.



Mrs. Marijke Crosby, Local Arrangements Co-Chair; Dr. Desmond Writer, CAS President; Dr. Mitsugu Fujimori, President, Japan Society of Anesthesiology; and Dr. John Crosby, Local Arrangements Co-Chair.

Thanks to Annual Meeting Organizers

The 47th Annual Meeting, held recently in Vancouver, was the largest and most successful ever: 871 medical practitioners and 429 accompanying adults and children attended the meeting. The commercial exhibit sold out very quickly, and 65 companies occupied 91 booths.

Special thanks go to the approximately 50 delegates from the Japan Society of Anesthesiology, without whose support and cooperation the meeting would not have been such a tremendous success. Dr. Robert Byrick, Chairman of the CAS Committee on Scientific Affairs, must also be commended for his superb work in coordinating the scientific content of the meeting. Many thanks are extended to the Local Arrangements Committee which, under the guidance of Dr. John & Mrs. Marijke Crosby, arranged the many social events, all of which were well attended. A superb group of volunteers pitched in to assist with the many events. Special thanks is due to the youth volunteers for their energy and cheerfulness: Mike Baker (16), Chris Baker (12), Colin Blackstock (15), Gavin Blackstock (13), James Wishart (13), Erin Jardine (12), and Tara Cannell (10). Also thanks to Ms. Karen Zunder for her creative commemorative T-shirts.

The central office staff must be congratulated for their efforts in ensuring the success of the meeting. The Society commends the work of Ms. Ann Andrews, Ms. Cynthia Lank, Ms. Sam Breen, Ms. Christine Kofler, Ms. Jane Leckey and Ms. Deanna McDonnell. Ms. Kerry McClenaghan and Ms. Ann Wright, who were "volunteered" to help, deserve much praise, as does Ms. Vanessa Pullen, who took care of the office while everyone else was in Vancouver.



Dr. R.A. Gordon accepts a certificate which commemorates the creation of the R.A. Gordon Career Research Award.

HIGHLIGHTS



FUN RUN - Stanley Park Seawall

A total of 110 runners/walkers registered for this event and they came in all shapes and sizes, the youngest being 3 months.

In the 3 km category, 10-year old Sara Ogden was the female winner and Errol Berenbaum was the male winner.

Joyce Ogden was first in the women's 6 km run and Charles Loader first in the men's.

In the 9 km run, Patricia Morton and Albert Christ were the winners in the female and male categories respectively.

Special mention goes to 11-year old Tim Ogden in the 9 km race. He was the 7th fastest and beat his father!

Thanks to Dr. David Robinson and his team of volunteers and especially to Critikon for a very successful event.



A team effort

1990 Research Award Winners

The Canadian Anaesthetists' Society Research Award was won by Dr. Beverly Orser of the University of Toronto for her paper, "The influence of ketamine on intracellular regulation of the NMDA receptor".

The I.C.I. Pharma Canadian Research Award in Anaesthesia was presented to Dr. Pascal Labrecque of McGill University for his paper entitled, "The vascular effects of isoflurane on freeze-traumatized rat brain".

The David S. Sheridan Canadian Research Award in Anaesthesia was won by Dr. Gregory C. Allen of the University of Ottawa for his project entitled, "In-vitro contracture response of skeletal muscle to Doxorubicin, a specific activator of sarcoplasmic reticulum calcium release".

The Dr. Paul Janssen Canadian Research Fellowship Award in Anaesthesia was presented to Dr. Pierre Fiset of McGill University for his project entitled, "Computer controlled infusion of alfentanil in paediatric patients undergoing cardiectomy".

The winners are to be praised for the high quality of their research. It is hoped that these awards will encourage young investigators to carry out anaesthesia-related research in Canada. It is vital that members of the Canadian Anaesthetists' Society continue to support anaesthesia research through tax deductible donations to the CAS Research Fund.

47th Annual Meeting Prize Winners

CAS Medal

Dr. Emerson Moffitt from Halifax, Nova Scotia was awarded this highest honour in recognition of his illustrious career and enormous contribution to the Canadian Anaesthetists' Society.



Dr. Desmond Writer, President CAS & Dr. Emerson Moffitt.

Residents' Competition

1st Prize:

Dr. Ronald Segstro
University of Western Ontario
"The efficacy of indomethacin as a postoperative analgesic following total hip arthroplasty"

2nd Prize:

Dr. Jeff Leon
University of Toronto
"Cranial duplex sonography: does isoflurane affect the cerebrovascular response to carbon dioxide in anaesthetized children?"

3rd Prize:

Dr. I. Lynn Murphy
University of Ottawa
"The clinical significance of diffusion hypoxia in children"

Art Exhibit

The art exhibits were judged in the following five categories:

- 1. Photography**
Leg Rower Fisherman by Joel Parlow
- 2. Painting**
Thoughts of Spring by Gayle Gardner
- 3. Crafts**
Manitoba Bison by Kenneth Baron
- 4. People's Choice**
1st: Day Dreams by Elaine Binns
2nd: Halloween Pumpkin by Elaine Binns
- 5. Most Original**
Carnival by Marie-Claire Blaise

Division Reports

BRITISH COLUMBIA: Fee Negotiations Deadlocked

Dr. Brian Saunders

Economic issues continue to plague the BC Section. The Section, along with all other Sections within the BCMA, is deadlocked in the current government fee negotiations. In addition, the Section on Anaesthesia is involved in discussions on fee distributions for the other Sections. However, most issues have taken a back seat to the BCMA/government fee negotiations. The government recently appointed a Royal Commission to investigate health care costs in British Columbia. Not only was this seen by the profession as a stalling tactic, but the profession was also concerned that no medical representative was appointed to the Commission. While negotiations are being carried out, the medical profession is considering a number of alternatives which include opting out of the MSP (Medical Services Plan). This proposal seems to be gaining considerable support as a result of the enormous frustration felt by all doctors in the province.

ALBERTA: Relative-Value Guide Proposed

Dr. Douglas DuVal

Alberta Health has indicated that it wishes to undertake a fullscale revision of its payment system for anaesthetists as soon as this is practical. As part of the Alberta Medical Association's initiative to develop a relative-value guide for all practitioners in the province, the Section on Anaesthesia has proposed that we adopt a modification of the American Society of Anesthesiologists' relative-value guide, employing a progressive time-based component. This proposal has not been warmly received by the Alberta Medical Association's relative-value fee guide committee, which feels that a progressive time-based component (incremental increases in the number of time-units per hour as the case progresses) violates the concept of relative-value and may have implications for other Sections. Alberta Health, for rather vague reasons, would prefer a unit-based payment system modelled after that presently being used in the province of Ontario.

SASKATCHEWAN: Report on Health Care Under Scrutiny

Dr. Angela Enright

The long-awaited report entitled "Future Directions for Health Care in Saskatchewan" was recently published. It was commissioned by the government and chaired by the past Dean of Medicine, Dr. R. Murray. It is a wide-

-ranging document, covering all aspects of health care. The most controversial proposal recommends the establishment of health care regions with autonomous boards, similar to school districts and school boards. Each board would have its members elected and would have responsibility for all aspects of health care. With regards to payment for physician services, the Commission recommends a thorough analysis of the current payment schedule be undertaken and that other methods of payment be reviewed. The government is now studying this report.

The Western Division meeting was held in Saskatoon in March, with over eighty registrants and thirty commercial exhibitors.

MANITOBA: More Fee Negotiations Deadlocked

Dr. Suzanne Ulyot

The Manitoba Anaesthesia Society continues to be active unofficially on the Fee Tariff Committee and the Income Disparity Committee of the Manitoba Medical Association. Fee negotiations are entirely up in the air at this moment. Physicians are without a contract as of April 1990 and the MMA has decided to push for binding arbitration, in the belief that the membership and the general public are supportive.

ONTARIO: Quality Assurance System Sought by College

Dr. Geoffrey Dunn

The Canadian Anaesthetists' Society Ontario Division and the Ontario Medical Association Section on Anaesthesia were recently consulted by the Ontario College of Physicians and Surgeons for input into establishing a quality assurance system for independent health care facilities, which have recently been the subject of new legislation. A committee which fairly represents anaesthesia practice in the province of Ontario will make recommendations to the College over the next few months.

Negotiations continue at a slow pace between the OMA and the government. The last fee increase occurred in 1988. To date, there have been no discussions on monetary issues. The OMA is concentrating on achieving four points:

- A) Involvement in, and consultation regarding the planning of health care in the province;
- B) An acceptable mechanism for binding arbitration;
- C) Recognition as the sole negotiating body for physicians who so wish, regardless of the method of payment;
- D) The Rand Formula.

At the individual hospital level, budgets continue to be squeezed, although the government has announced funding for the expansion of certain designated programs such as cardiac surgery.

QUEBEC: Specialists to be Relocated

Dr. Michel Rouillard

The AAQ had its Annual Meeting at the Quebec Hilton on April 26-28, 1990, with 260 participants. The scientific component was enhanced by the presence of Dr. Ian Thompson of Winnipeg, who was the guest speaker.

The government of Quebec has a plan, to be implemented as of April 1990, which will reduce the number of specialists in the Montreal area by 243 and in the Quebec City area by 27. This represents the government's effort to distribute evenly the number of specialists across the province without recognizing that large urban centres usually show a high concentration of medical activities as compared to the periphery.

NEW BRUNSWICK: Medicare Billings to be Capped

Dr. Robert McLean

The government policy of fiscal restraint may soon have an impact on the practice of medicine in the province. The provincial government has announced major short-term policy measures including individual and global capping of medicare billings in their attempt to control spiralling health costs, policies they expect to introduce as legislation late this year.

Ongoing consultation and negotiation between the government and the provincial medical society has dealt largely with long-term solutions to health care cost containment. Government insistence on short-term measures was emphasized on April 26, with the Minister's public announcement of a unilateral decision to initiate major changes in the medicare system, changes which include differential billing fees for newly licensed general practitioners (rural 110% versus urban 75%), capping of both general practitioner and specialist incomes, and global medicare capping with quarterly assessment and pay-back by fee-reductions in the third quarter. Despite some provision for minor fee increases over the next three years, there are no provisions for utilization, for manpower fluctuations or for any form of arbitration.

It is felt by the medical community that the government attempt at a short-term solution will result in:

- A) A definite decrease in medical services and patient care both in the rural and urban communities;
- B) A disincentive to primary-care physicians and specialists, to settle in the province, as well as encouragement to relocate in other areas.

NOVA SCOTIA: No Action Taken on Report

Dr. Keith Hamilton

Although the report of the Commission on Health Care has been tabled, there has been no action taken by the government at this time.

PRINCE EDWARD ISLAND: Meeting Plans Underway

Dr. Douglas MacDonald

Plans are underway for the Atlantic regional meeting, to be held in September 1991 in Charlottetown.

NEWFOUNDLAND: Fee Schedule Established for Paediatrics

Dr. James Flynn

The perennial staffing problems at the Children's Hospital will hopefully improve with the new premium in the fee schedule for paediatric cases done at the Janeway Child Health Centre. Staffing in the major hospitals in St. John's is relatively stable, but there remains a persistent shortage of certified anaesthetists outside of St. John's.

Quebec 1991

The Canadian Anaesthetists' Society 48th Annual Meeting will be held in Quebec City from June 21-25, 1991.

The Quebec City Convention Centre will house the exhibits and some of the scientific meetings. The host hotel is the Quebec Hilton which is located minutes from old Quebec City and its many attractions. The Auberge des Gouverneurs, which is located next to the Quebec Hilton, is a second hotel to accommodate delegates.



SCIENTIFIC PROGRAMME

Royal College Lecturer: Dr. Marcel Boulanger

Topic: Image of the Profession

Refresher Course Lectures — Speakers include (in alphabetical order):

Paul Barash — New Haven
David Bevan — Montreal
Robert Crone — Boston
Joanne Douglas — Vancouver
Brendan Finucane — Edmonton

Joanne Guay — Montreal
Carol Hirsham — Baltimore
Arthur Lam — Washington
Donald Stanski — Palo Alto
Jean Louis Vincent — Brussels

Topics Include (in alphabetical order):

- Acute spinal cord injury: Monitoring and anaesthetic implications
- Anaesthesia for the cardiac patient having non-cardiac surgery
- Anaesthesia for the premature infant and neonate
- Coagulation abnormalities and obstetrical anaesthesia
- Foetal monitoring and neonatal resuscitation: What the anaesthetist needs to know
- New drugs for neuromuscular blockade and reversal
- Oxygen delivery in the critically ill
- Perioperative management of the asthmatic patient
- Regional anaesthesia: Complications and techniques

Workshops and Breakfast Seminars — Topics include:

- a) Advanced Trauma Life Support skills station program
- b) Medico-legal problems (held in conjunction with the Canadian Medical Protective Association)
- c) Paediatric analgesia
- d) Quality assurance

Symposia:

Frances Chung — Out-patient anaesthesia: State of the art
Jean-Pierre Tétrault — Post-operative analgesia

Clinical Forum: — Post-operative anaesthesia complications

Residents' Seminar: — How to optimize your operating room experience

Grand Rounds: — Case reports of difficult situations encountered in clinical practice (including information relevant to diagnosis and treatment) will be presented to a panel of experts. Information will follow.

We are anticipating the submission of many abstracts for oral and poster presentation, covering the multitude of areas of current research in anaesthesia.

As usual, there will be a large commercial exhibit along with several scientific and audio-visual displays.

SOCIAL PROGRAMME

The 1991 Annual Meeting will have a change in format worthy of note. As the meeting falls over the St-Jean-Baptiste holiday weekend, we aim to take full advantage of this opportunity to enjoy the festivities.

Plan to spend *Sunday* evening at the casual *Fun Night*, formerly held on Saturday. A dinner cruise along the St. Lawrence River aboard the "Louis Jolliet" will provide wonderful views of the city and, as a "Grand Finale", a splendid display of fireworks.

This year, the *free night* will fall on *Saturday* instead of *Sunday*, and will allow registrants to explore Quebec City at their own pace.

Registrants and spouses will be invited to join a hosted city tour, planned to follow the last Refresher Course on Saturday. During the bus tour you will see many of Quebec City's excellent restaurants. The tour will end at la Gare du Palais, where you will be invited for a champagne cocktail. You will then have the opportunity to meet the Mayor of Quebec City.

While at la Gare du Palais, you will be able to see suggested menus from a selection of restaurants. You can make reservations at the restaurant of your choice using cellular phones. Buses will then be available to take you to the restaurant that you have selected.

The Welcome Reception will remain on Friday and the black-tie President's Dinner, in its new format, will remain on Monday.

Plan to come and enjoy the "joie de vivre" of Quebec City!

1991

Research Awards

Application forms for the 1991 Research Awards are available from the CAS central office. The following awards are available:

The Canadian Anaesthetists' Society Research Award (\$20,000)

The David S. Sheridan Canadian Research Award (\$10,000)

The I.C.I. Pharma Canadian Research Award in Anaesthesia (\$5,000)

The Dr. Paul Janssen Canadian Research Fellowship Award in Anaesthesia (\$40,000)

For applications and further information, contact the CAS central office at:

187 Gerrard Street East
Toronto, Ontario
M5A 2E5
Telephone: (416) 923-1449

Upcoming Meetings

CANADIAN ANAESTHETISTS' SOCIETY ONTARIO DIVISION MEETING

Niagara Falls, Ontario
September 13-15, 1990

For information:

Dr. Fred Halliday
Greater Niagara General Hospital
P.O. Box 1018
Niagara Falls, ON L2E 6X2
Telephone: (416) 358-0171, ext. 386 (OR)

ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA 1990 ANNUAL MEETING

Toronto, Ontario
September 14-17, 1990

For information:

Ms. Anna Lee Chabot
Head — Meetings and Assemblies
Royal College of Physicians and
Surgeons of Canada
74 Stanley
Ottawa, ON K1M 1P4
Telephone: (613) 746-8177

AMERICAN SOCIETY OF REGIONAL ANESTHESIA/EDUCATION COMMITTEE OF THE ASSOCIATION OF ANAESTHETISTS OF QUEBEC FALL WORKSHOP

Montreal, Quebec
September 15-16, 1990

For information:

Mr. John Hinckley
American Society of Regional Anesthesia
1910 Byrd Avenue, Suite 118
Richmond, VA
23240-1086
Telephone: (804) 282-0010

SOCIETY FOR EDUCATION IN ANESTHESIA FALL MEETING AND WORKSHOPS

Las Vegas, Nevada
October 18, 1990

For information:

Ms. Carolyn Yowell
Society for Education in Anesthesia
11512 Allecingie Parkway
Richmond, VA
23235
Telephone: (804) 379-5513

AMERICAN SOCIETY OF ANESTHESIOLOGISTS 1990 ANNUAL MEETING

Las Vegas, Nevada
October 19-23, 1990

For information:

American Society of Anesthesiologists
515 Busse Highway
Park Ridge, IL
60068-3189
Telephone: (708) 825-5585

FIRST AUSTRALIAN-CANADIAN DIVING MEDICINE SYMPOSIUM

Sydney, Australia
November 15-18, 1990

For information:

Intermedsyn Symposia
124 Merton Street, 4th Floor
Toronto, ON M4S 2Z2
Telephone: (416) 484-1640

CANADIAN ANAESTHETISTS' SOCIETY 48th ANNUAL MEETING

Quebec City, Quebec
June 21-25, 1991

For Information:

Canadian Anaesthetists' Society
187 Gerrard Street East
Toronto, ON M5A 2E5
Telephone: (416) 923-1449

AUSTRALIAN SOCIETY OF ANAESTHETISTS/ CANADIAN ANAESTHETISTS' SOCIETY COMBINED SCIENTIFIC MEETING

Brisbane, Australia
October 12-16, 1991

For information:

Dr. J.P. Bradley — Conference Chairman
P.O. Box 1280
Milton, Queensland
Australia 4064
Telephone: (617) 369-0477

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