A primary mandate of the OCFP is to develop, provide and accredit quality continuing professional development/medical education programs for family physicians and other health care professionals in Ontario.

Table of Contents

Continuing Medical Education Request Form .......................................................................................... 3
Understanding our Mainpro-C workshops .............................................................................................. 4
Other information ...................................................................................................................................... 4
Continuing Medical Education Programs ............................................................................................... 5
  Alzheimer’s Strategy/ Dementia .................................................................................................................. 5
    Behavioural and Psychological Symptoms of Dementia (BPSD): Applying the P.I.E.C.E.S. Framework for Effective Clinical Management of BPSD .......................................................................................... 5
    Diagnosis and Management of Patients with MCI and Dementia: Tips for the Family Physicians .......... 5
    Driving and Dementia .............................................................................................................................. 6

Best Practices in Reducing Unnecessary Tests, Treatments and Care (Don’t Just Do Something – Stand There!) ................................................................................................................................... 6

Children’s Health ........................................................................................................................................ 6
  Healthy Child Development: Attachment ................................................................................................. 6
  Healthy Child Development: Encouraging Breastfeeding: A Practical Approach for the Busy Clinician ...... 7
  Healthy Child Development: Fetal Alcohol Spectrum Disorder and Substance Use in Pregnancy .......... 7
  Healthy Child Development: Improving the Odds .................................................................................... 8
  Healthy Child Development: Nutrition and Child Development .............................................................. 8
  Healthy Child Development: Perinatal Depression .................................................................................. 8
  Healthy Child Development: Preventive Care Visits for School Age Children and Teens: Where is the Evidence? ........................................................................................................................................ 9
  Healthy Child Development: The Hidden Cost of Immunization ............................................................ 9

Chronic Disease Management ...................................................................................................................... 10
  Highlighting Broken Bones: Clinical Practice Guidelines for the Diagnosis and Management of Osteoporosis........................................................................................................................................ 10
  Insulin Preceptorship: Initiating Type-2 Diabetes Patients on Insulin ..................................................... 10
  Male Osteoporosis ...................................................................................................................................... 10
  Management of Childhood Obesity: Lifestyle, Diet, and Physical Activity ............................................ 11
Collaborative Mental Health Network (CMHN).................................................................11
15 Minute Psychiatric Assessment for Family Medicine..................................................11
CBT On-The-Fly .................................................................................................................11
Diabetes and Depression: Relevance and Identification...................................................12
Insomnia: Beyond the Basics ............................................................................................12
Mindfulness Based Cognitive Therapy: Professional and Personal Resilience ..................12
Managing Uncertainty: A Novel Approach to Undifferentiated Mental Disorders ..........13
Practical Office Management of Comorbid Alcohol and Anxiety Disorders ......................13
Emergency Medicine ........................................................................................................14
Emergency Medicine Primer for Family Physicians I.........................................................14
Emergency Medicine Primer for Family Physicians II......................................................15
Environmental Health .......................................................................................................15
Climate Change and Health: Should we care? Can we make a difference?........................15
Environment-linked Illnesses | Pregnancy & Early Childhood Environmental Exposures: Impacts, Prevention, Diagnosis and Management ...........................................................15
Environment-linked Illnesses | Risks of Environmental Exposures to Child and Adolescent Health and Remedies in Clinical Practice .........................................................................................16
Environment-linked Illnesses | Chronic Pain, Fatigue, and Chemical Intolerance Linked to Environment Exposures: Office Assessment and Management ........................................................16
Environment-linked Illnesses | Common Chronic Illnesses and the Environment ................................17
Leadership Development ...................................................................................................18
Leadership Development Program: Morale and Productivity ..........................................18
Leadership Development Program: Morale and Productivity ..........................................18
Leadership Development Program: Informal Leadership ................................................19
Leadership Development Program: Developing Coalitions ............................................19
Medical Mentoring for Addictions and Pain (MMAP).........................................................20
Pain and Addictions Primer for Family Physicians ..............................................................20
Musculoskeletal Joint Assessment ......................................................................................20
Slit Lamp ..............................................................................................................................21
Women’s Health ................................................................................................................21
Skills Transfer Workshop: Office Gynecological Procedures in Family Medicine ................21
Intrauterine Contraception: Theory to Practice .................................................................21
Continuing Medical Education Request Form

A primary mandate of the OCFP is to provide quality continuing professional development/medical education programs for family physicians and other health care professionals in Ontario. If there is an interest or need in your community for any of the following CME/CPD workshops, please submit the following form.

Requesting Organization: __________________________________________________________

Contact Name and Title: __________________________________________________________

Address: _________________________________________________________________________

Telephone Number: ____________________________

Email Address: _________________________________________________________________

Please list the workshops you are interested in having in your community:

1. _____________________________________________________________________________

2. _____________________________________________________________________________

3. _____________________________________________________________________________

Expected date and time of workshop? _________________________________________________

Is this date and time flexible? Yes ____  No ____

Expected number of participants? __________

Is this event open to other physicians and health professionals in the area? Yes ____  No ____

Is there space available at your organization? Yes ____  No ____

Is there access to a LCD projector and projector screen? Yes ____  No ____

Additional comments or requests

_____________________________________________________________________________

_____________________________________________________________________________

Please submit this form to the Ontario College of Family Physicians, 340 Richmond Street West, Toronto, ON, M5V 1X2, ocfpcme@cfpc.ca, Telephone: 416-867-9646, Fax: 416-867-9990.
Understanding our Mainpro-C workshops

- Mainpro-C programs provide excellent Continuing Professional Development through reflective-practice and applied learning.
- Mainpro-C workshops require a demonstration of self-reflection: this requires the completion of a pre-course needs assessment, session evaluation, and post-reflective questionnaire (two months after the workshop).
- The maximum ratio per one (1) facilitator is twelve (12) participants.

*For more information: [http://www.cfpc.ca/MainproCCredits/](http://www.cfpc.ca/MainproCCredits/)

Other information

- Workshop scheduling is based on availability of speakers.
- Fee structure will vary depending on funding, location (venue and food provisions), handout materials and number of participants/ required amount of speakers.
- Example of Standard Mainpro-C Administrative Charges:
  
<table>
<thead>
<tr>
<th>Workshops</th>
<th>Fee</th>
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<tbody>
<tr>
<td>3.0 hour workshop</td>
<td>$50 + HST per participant*</td>
</tr>
<tr>
<td>6.0 hour workshop</td>
<td>$75 + HST per participant*</td>
</tr>
</tbody>
</table>

*Not including speaker travel/honorarium, venue, audiovisual, food and beverages, extra handbook/toolkit fees, equipment rental, shipping, and staff travel

For more information, please contact us:

Ontario College of Family Physicians
340 Richmond Street West, Toronto, ON M5V 1X2
Telephone: 416-867-9646 | Fax: 416-867-9990
Email: ocfpcme@cfpc.ca | Website: [www.ocfp.on.ca](http://www.ocfp.on.ca)
Continuing Medical Education Programs

Alzheimer’s Strategy/ Dementia

Behavioural and Psychological Symptoms of Dementia (BPSD): Applying the P.I.E.C.E.S. Framework for Effective Clinical Management of BPSD

Learning Objectives:
- Assess and interpret common behavioural and psycho-social problems seen in patients affected by dementia, whether they live at home or in a Long Term Care home
- Present the risks, benefits and appropriate dose range of medications that are currently recommended for BPSD that may respond to pharmacological treatment for the purpose of obtaining informed consent
- Support health care team members in the monitoring of common side effects of drugs that may be used in the treatment of BPSD
- Support health care team members in the utilization of the P.I.E.C.E.S. assessment framework and the application of principles outlined in U-FIRST for the implementation of non-pharmaceutical approaches

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Diagnosis and Management of Patients with MCI and Dementia: Tips for the Family Physicians

It is estimated that 2/3 of persons in the community with dementia are undiagnosed and untreated, with significant implications for future health resource utilization in view of our aging population. Better identification and management at a primary care level is essential. Based on the successful accredited Memory Clinic Training Program developed by The Centre for Family Medicine and the Ontario College of Family Physicians, this case-based interactive session provides the busy family physician with pearls on the diagnosis and management of patients with Mild Cognitive Impairment and Dementia in ambulatory care.

Learning Objectives:
- List features that allow the clinical differentiation between normal aging, MCI, and the various types of dementia, and explain common office-based cognitive tests and investigations that can assist in the diagnosis
- Review basic initiation and monitoring of medications used in the management of patients with dementia
- Differentiate patients that can safely be diagnosed and managed by the family physician from those requiring a referral to a specialist

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.
Driving and Dementia
This workshop will allow participants to be able to appreciate the key risk factors to consider relating to driving assessment in the elderly; be familiar with an approach to assessing driving risk; be aware of legislated requirements of family physicians in relation to informing the Ministry of Transportation; and develop an approach for driving cessation when indicated.

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Best Practices in Reducing Unnecessary Tests, Treatments and Care (Don’t Just Do Something – Stand There!)
In an interactive workshop setting, participants will explore Best Practices Guidelines and evidence that either supports or refutes many common practices that are part of our work day. Through case based examples we will review the evidence that may or may not support the use of various tests, screening tools and treatments, helping the clinician to utilize resources appropriately. Attend and discover what you may be ordering or prescribing that may have no support in the scientific literature. In the words of Spike Lee “Time to do the right thing.”

Learning Objectives:
• Is it time to stop prescribing certain classes of drugs?
• When to order the appropriate x-ray?
• Do you really need to order that “blood panel” at an annual health examination?
• Feel confident in appropriate screening for breast, cervical and colon cancer

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Children’s Health

Healthy Child Development: Attachment
This workshop will assist the practitioner to develop an understanding of Attachment Theory and Attachment Disorder in infants and toddlers. There will be information provided on various parenting behaviours and their impact on patterns of attachment. Suggestions will be provided for some primary care interventions that can improve attachment and referral resources within the community for families with attachment issues. The Healthy Child Development Improving the Odds and Facing the Challenges Manuals will be used.

Learning Objectives:
• Develop an understanding of Attachment Theory and Attachment Disorders in infants and toddlers
• Develop an understanding of parenting behaviours both positive and negative, and their impact on patterns of attachment
• Describe some primary care interventions that can improve attachment/parenting and referral resources within the community for families with attachment/parenting issues
Healthy Child Development: Encouraging Breastfeeding: A Practical Approach for the Busy Clinician

Current evidence supports exclusive breastfeeding as the optimal method of early infant feeding, providing multiple health benefits and disease prevention for both infants and their mothers. Families receive much of their early care in the primary care family practice setting, therefore knowledge and support from their care team is essential to help promote, protect, and support successful and continued breastfeeding.

This interactive, case-based workshop entitled "Encouraging Breastfeeding: a practical approach for the busy clinician", has been developed specifically to meet the needs of the primary care provider. It provides practical, useful information and strategies to help support patients to breastfeed, while recognizing that care must fit into the framework of a busy clinic.

Learning Objectives:
- Describe breastfeeding basics including latch, positioning, and assessing adequacy of intake
- Discuss practical tips for approaching and managing common breastfeeding challenges, such as sore nipples, ankyloglossia, mastitis and low milk supply
- Demonstrate anticipatory guidance to help families with normal infant feeding and growth patterns
- Understand how to avoid common pitfalls in medical management that can undermine successful breastfeeding, particularly in relation to maternal illness, investigations and medications
- Know where to quickly access evidence-based resources for further breastfeeding support and medical management

Healthy Child Development: Fetal Alcohol Spectrum Disorder and Substance Use in Pregnancy

This workshop will provide primary care practitioners with an approach to Problematic Substance Use in Pregnancy. A National team of Obstetrics and Addictions experts developed resources for point of care use in the prenatal management of pregnancy complicated by use of commons substances such as Alcohol, Nicotine, Cannabis, Cocaine and Opiates. A Women Centered/Harm Reduction Approach will be showcased with cases to illustrate key management issues, which will include methadone maintenance therapy. Specific Management Issues for Labour and Delivery, the Post Partum Period, Newborn care and Breastfeeding will be reviewed. This workshop will also explore strategies for early identification of women at risk from substance use during pregnancy. It will also cover areas relevant to child development and approaches for linkage to community resources to optimize management of common behavioural issues that develop in children affected by this condition.

Learning Objectives:
- Describe a Woman Centered / Harm Reduction approach to Problematic Substance Use in Pregnancy
- Describe how various substances (Alcohol, Nicotine, Cannabis, Cocaine, Opiates) impact approach to medical care during the prenatal, peripartum and post partum periods
- Describe the impact of substances on breastfeeding and newborn care including how alcohol can lead to Fetal Alcohol Spectrum Disorder

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.
Healthy Child Development: Improving the Odds
The quality of early childhood experiences has an important influence on brain development and subsequent learning, behavior and health. The purpose of this program is to highlight developments in early neurodevelopment and to explore how these developments can be incorporated into primary care. This workshop will provide an overview of the field of Preventative Pediatric Health Care (0 - 6 years) through the well baby/child visit, using various evidence-based tools. In particular, the Rourke Baby Record, the M-CHAT, and the Nipissing District Developmental Screen will be utilized. Early identification of preconception and prenatal psychosocial issues, a Preconception checklist and the Antenatal Record will be reviewed. The Edinburgh Screen will be reviewed as a tool to identify post partum depression.

Learning Objectives:
• Identify risk factors which can impact brain development during the early years and recognize how family practice teams can optimize proactive health and developmental surveillance
• Consider the role of preconception interventions to optimize developmental outcomes and review evidence regarding clinical strategies that can be included in antenatal, post partum and well child visits
• Use case examples of well child visits as an example of how to do a full review of parent-child interactions, demonstrate practice tools for the primary care setting to assist in monitoring child developmental milestones (motor, language, social, cognitive)
• Discuss the role of community resources to support families with children and how to improve developmental outcomes

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Healthy Child Development: Nutrition and Child Development
This workshop will cover maternal nutrition and dietary intake in the prenatal period and its impact on child health outcomes. Information regarding exclusive breastfeeding of the infant and introduction of solids will be reviewed in detail. Iron deficiency, other nutritional deficiencies and health impact of fortified formulas for those children who are not breastfed will be discussed. The Healthy Child Development Improving the Odds Manual will be used as a resource.

Learning Objectives:
• Understand maternal nutrition and dietary intake in the prenatal period, during breastfeeding and its impact on child health outcomes
• Understand feeding of the infant and introduction of solids
• Understand common nutritional deficiencies (i.e. iron deficiency) and how to prevent them through anticipatory guidance regarding nutritional choices
• Understand how to use the NutriSTEP tool for screening for nutritional problems

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Healthy Child Development: Perinatal Depression
This workshop will cover issues related to the normal psychological development of women in pregnancy and how it can affect their adjustment to their newborn and affect attachment in the parental /child relationship. The workshop will also look at the diagnosis and treatment options for women suffering from perinatal depression, anxiety and Post partum psychosis. Strategies for using Interpersonal Psychotherapy as a treatment modality for those women who are suffering from post partum mood disorders will be reviewed.
Practical tools such as the Edinburgh Post Partum Screening Tool, Flowcharts and Decision Guides for clinical management of Perinatal Depression will be included.

Learning Objectives:
- Describe normal psychological development of women in pregnancy
- Discuss diagnosis and treatment options for perinatal depression, anxiety and post partum psychosis
- Demonstrate the use of clinical tools to aid in clinical management of perinatal depression (i.e. Edinburgh Post Partum Screening Tool)

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Healthy Child Development: Preventive Care Visits for School Age Children and Teens: Where is the Evidence?
This workshop will explore evidence and tools for periodic health visits for school age children and teens. The Greig Health Record is an evidence-based health promotion guide for clinicians caring for children and adolescents aged six to 17 years. It is meant to provide a template for periodic health visits that is easy to use and is easily adaptable for electronic medical records. On the Greig Health Record, where possible, evidence-based information is displayed, and levels of evidence are indicated in boldface type for good evidence and italics for fair evidence. Included in the record are pages of guidelines and resources for reference

Learning Objectives:
- Review the evidence for periodic health visits in school age children and teens
- Review the use of the Greig Health Record check-list
- Explore resources available and included in the Greig Health Record
- Review common presentations and issues in this age group

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Healthy Child Development: The Hidden Cost of Immunization
This presentation will include a review of the research literature around immunization pain and will go over newly produced Canadian Clinical Practice Guidelines. There will be video clips of psychological interventions and needle administration techniques to show how a health care professional can work with families to reduce immunization pain. A thorough review of medical options for treating immunization pain (acetaminophen, ibuprofen, analgesic patches/creams, etc.) will be presented. Finally, this program will look at interdisciplinary practice management systems so that this new information can be incorporated into Family Practice Health Teams for use by all professionals (nurse practitioners, family practice nurses, registered practical nurses, social workers, etc.)

Learning Objectives:
- Describe the research evidence relating to management of immunization pain in children
- Utilize psychological interventions, needle technique interventions and analgesic options
- Describe how to integrate this new knowledge into clinical practice in family health teams

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.
Chronic Disease Management

Highlighting Broken Bones: Clinical Practice Guidelines for the Diagnosis and Management of Osteoporosis
Learning Objectives:
- Have an understanding of the current osteoporosis care gap
- Develop an understanding of the 10 year risk stratification and treatment algorithm

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Insulin Preceptorship: Initiating Type-2 Diabetes Patients on Insulin
The purpose of this program is to enhance the skills and knowledge of primary care physicians (PCP’s), and diabetes education teams (i.e. nurse, pharmacist and dietitian), who practice in a Primary Care Clinic or Family Health Team, deal with uncontrolled glycemia in patients with T2DM.

As a result of participating in this preceptorship, participants will be able to apply the following objectives to their practice:
- Selecting the most appropriate treatment protocol to promote optimal glycemic control
- Apply strategies to overcome the barriers to initiating insulin therapy in appropriate patients
- Treating to guidelines established by the CDA, patients with T2DM- why and how, minimizing hypoglycaemia
- Benefits of earlier insulinization in T2DM
- Who, when and how to supplement oral anti-diabetic agents (OAD’s), with insulin, or to switch from NPH to basal insulin analogues if control is not optimized
- Differences between traditional insulin and the new basal insulin analogues
- Recognizing and tackling PCP barriers, which include:
  - Initial activation barrier (i.e. the energy it takes to begin)
  - Fears of negative feedback from patient and/or DEC
  - The biggest barrier: Time (time at the outset and during following visits)

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Male Osteoporosis
Learning Objectives:
- Identify Risk factors for low bone mineral density in men
- Identify those at risk for fragility fracture
- Recognize fractures as a trigger for investigation for osteoporosis
- Appropriately investigate osteoporosis in men and recommend treatment

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.
Management of Childhood Obesity: Lifestyle, Diet, and Physical Activity

Childhood obesity is reaching epidemic proportions in our modern society. An interplay between genetic and environmental factors is likely responsible. Unfortunately, this knowledge has not translated into effective public health measures aimed at curbing the problem. In addition to describing the impact of this condition on our youth, important principles in weight management of the obese or overweight child are presented. Preventative measures in the family practice setting will also be discussed as well as exploring ways physical activity can be combined with other management strategies. Case examples will provide the background for the discussion.

Participants will:
- Learn about the epidemiology of obesity in children
- Learn how to assess overweight children in the primary care setting
- Learn pragmatic interventions for overweight children including diet and physical activity interventions
- Learn of a new tool for detecting ‘at risk’ toddlers

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 6.0 CFPC Mainpro-C Credits.

Collaborative Mental Health Network (CMHN)

15 Minute Psychiatric Assessment for Family Medicine

Whether it is a new patient, a rarely seen patient or a well known patient with a new presentation, finding yourself in a clinical situation that suggests a possible mental disorder can be anxiety inducing when the patient has been booked for a standard 10-15 minute visit and your waiting room is full. This session will provide a practical approach to screening for mental disorders associated with the highest risk to self or others. The goal of the session is to enable the physician to answer the question “Is there something that I need to do about this patient’s condition today?” The format will include clearly worded screening questions focused on identifying psychopathology and areas of risk related to the identified psychopathology.

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

CBT On-The-Fly

Although family physicians rely primarily on pharmacotherapy to treat depression and anxiety, research and clinical experience suggests that many patients experience only partial relief and still remain vulnerable to relapse if they stop medication. Cognitive Behaviour Therapy (CBT) is the most empirically supported psychological treatment for anxiety and depression and also has been shown to prevent relapse. In the hands-on, skills oriented interactive workshop, participants will acquire basic CBT tools that they can integrate into their own general clinical practice.

Learning Objectives:
- Describe the principles of CBT in their patients
- Formulate patient psychological difficulties using a cognitive model
- Implement basic cognitive and behavioural interventions for anxiety

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 6.0 CFPC Mainpro-C Credits.
Diabetes and Depression: Relevance and Identification

Learning Objectives:

- Importance of recognizing and treating co-morbid major depressive episodes (MDE with Diabetes)
- Learn to quickly and reliably assess patients for possible Clinical Depression
- Initiating Treatment

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Insomnia: Beyond the Basics

Insomnia is a common complaint in all areas of medicine but patients rely primarily on family physicians for treatment of insomnia. In many cases insomnia is either a transient disruption of an otherwise normal sleep pattern or a symptom of another medical problem and is resolved with relative ease. The latter cases come and go without challenging family physicians. Challenges arise when the usual counselling on basic sleep hygiene and standard hypnotics do not seem to resolve the patient’s complaints or the problem becomes chronic, recurrent and the primary focus for the patient. This workshop is intended to provide family physicians with the knowledge, skills, and tools required for the management of difficult to treat insomnia and will make the management of uncomplicated insomnia feel very easy.

Participants will learn about setting the “internal clock” and other advanced but easy to use behavioural techniques to manage insomnia. Strategic and safe use of available sedative-hypnotics across the life cycle will be clearly delineated with the objective of improving participants’ confidence in using and not using available medication. Elderly populations are a particular challenge and thus will be a special focus of the workshop. Finally, while the intent of the workshop is to improve your ability to help your patients improve restful sleep, the workshop is designed to be highly interactive and stimulating.

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Mindfulness Based Cognitive Therapy: Professional and Personal Resilience

Mindfulness is a non-judgmental way of paying attention in the present moment. This evidence based work helps patients to relate differently to such conditions as Depression, opening them to possibilities for change. Mindfulness may increase the ability to accept what cannot be changed, reducing emotional reactivity and negative thinking. Cognitive Behaviour Therapy (CBT) is a treatment modality examining the relationship between beliefs, thoughts, feelings and behaviours. People suffering from Depression often have negative thoughts which increase suffering and hopelessness. CBT identifies thoughts as thoughts (rather than the facts we believe them to be) and helps patients adopt more constructive beliefs, often leading to changes in moods and behaviours.

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 6.0 CFPC Mainpro-C Credits.
Managing Uncertainty: A Novel Approach to Undifferentiated Mental Disorders

Family Physicians are often the first and only point of contact for patients with Mental Disorders that often present in an undifferentiated manner. This lack of differentiation and the frequently serious nature of these conditions often evokes anxiety in the treating physician. Traditional Diagnostic Psychiatric models used in teaching medical students and residents may not be congruent with actual practice. This seminar will introduce participants to a non-diagnostic model of assessing and managing Mental Disorders in Primary Care focusing on Risk, Functional Impairment and Critical Symptoms. This highly organized approach to assessment and management will target the physician's attention on the following questions in order of priority: What do I need to do today? What should I address soon? What do I need to think about over the longer term? The premise of this model is that the diagnosis in Mental Disorders often declares itself over time but that patients often require treatment before there is diagnostic clarification. The focus on diagnostically focused assessment may result in a delay between when practitioners identify a problem and when they actually feel able to intervene. Such delays can result in the missing of key opportunities to provide treatment when critical treatment decisions need to be made. Lack of diagnostic certainty and the idea that treatment is dependent upon it likely increase physician anxiety and discomfort in treating these conditions. We will organize our thinking around assessment and management to quickly and clearly identify potential risks to patient and others, delineate the patient's functional impairments that may require clinical attention and identify critical symptoms. These finite categories will guide information gathering and behaviour. This session will be highly interactive and will use clinical cases to both explore and apply the model.

Learning Objectives:

- To learn a novel approach to the management of Mental Disorders organized around the Risk, Function and Symptoms (RFS)
- To apply the RFS model to clinical cases
- To be able to apply the RFS model in clinical practice
- To learn the critical risks, functional impairments and symptoms of distress that may go undetected in the undifferentiated presentation of Mental Disorders

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Practical Office Management of Comorbid Alcohol and Anxiety Disorders

What clinical challenges are presented by comorbid alcohol misuse and major depressive episode? This module provides primary care providers with practical information to identify patients with comorbid major depressive episodes (MDE) and alcohol misuse and to manage these patients over the course of their illness.

The clinical challenges addressed are:

- Understanding the difference between symptoms of major depressive episodes caused by alcohol (alcohol-induced MDE) versus symptoms of major depressive episodes that co-exist with alcohol misuse but are not exclusively caused by the alcohol (comorbid alcohol misuse and MDE)
- Identifying alcohol misuse in patients presenting with symptoms of MDE
- Managing true comorbid alcohol misuse and MDE with the goal of achieving remission in both MDE and alcohol misuse and managing relapses over the life time course of the illnesses

The module is divided into the following sections: How do I identify comorbid alcohol misuse and MDE? How do I assess alcohol misuse and MDE? How do I manage alcohol misuse and MDE?
Emergency Medicine

Emergency Medicine Primer for Family Physicians I

This 2 day course is being offered as an update for those family physicians who are currently working regular shifts in the Emergency Department (within the last two years, 3-4 shifts per month). Because of the intense pace of the course, it is intended as a refresher course for physicians who already have two years of Emergency Department experience in addition to residency.

Part A: Knowledge: Participants are asked to select 16 from the 21 topics listed below. The speakers will present 16 topics (over 2 days) based on consensus; however participants are provided with reading material for all 21 topics. Each topic is presented in 30 min.

1. What you don’t know about asthma and COPD
2. The First 15 min – Part I
3. The First 15 min – Part II
4. Pulmonary Embolism and Deep Vein Thrombosis (PE/DVT)
5. Cardiac Emergencies I
6. Cardiac Emergencies II
7. Rapid Sequence Intubation
8. Head & C-spine injuries in adults
9. Common Orthopedic Conditions – Fractures
10. ENT Emergencies
11. Evaluation and Management of Patients with Acute Headache
12. Neurological Emergencies
13. Gynecologic Emergencies
14. Pediatric Emergencies
15. Pediatric Emergencies – Part II
16. Abdominal Emergencies
17. Pain Management
18. Procedural Sedation
19. Severe Infections and Important Emerging Infections
20. Acute Toxicology
21. Psychiatric Emergencies: Managing Psychosis and Medical Clearance

Part B: Skills – Practical Workshops

Day 1: Participants select 2 out of 3 of the following workshops:
   a. Slit lamp/ foreign bodies in the eye 45 minutes
   b. EKG interpretation 45 minutes
   c. Lumbar Puncture 45 minutes

Day 2: Participants select 2 out of 3 of the following workshops:
   d. Casting/Splinting 1 hour
   e. Ortho/X-rays 1 hour
   f. Airway practice with mannequins 1 hour
     - Adult and pediatric/infant
Emergency Medicine Primer for Family Physicians II

This 1 day course is being offered to family physicians who have taken the Emergency Medicine Primer for Family Physicians I; however, those who have not participated in this course are welcome to apply. This program will provide a refresher course for those who have worked in emergency departments previously (at least for 2 past years) and an update for those who are currently working in an emergency department.

Topics:
1. Antibiotics: Which Drugs for Which Bugs
2. Red Flags and Misdiagnoses in the ER
3. Medicolegal Issues
4. Diabetic Emergencies
5. Obstetrics/Gynecological Emergencies
6. Gadgets and Toys
7. Toxicology II
8. Reduction of Dislocations in the Emergency Department

Environmental Health

Climate Change and Health: Should we care? Can we make a difference?

Climate change is considered the greatest challenge to public health in our time. The Ontario College of Family Physicians 2008 report describes the health effects, including the effects of increased heat and smog, waterborne disease and Lyme disease that will affect us all, with Arctic populations and developing countries more affected. We all need to reduce our carbon footprints, as individuals and as a society. This presentation will provide tools for family physicians in dealing with clinical cases, in reducing the carbon footprints of our medical activities, and we will discuss how family physicians might become involved as advocates for a healthier future, both on a personal and a professional level.

Learning Objectives:
• To review the current evidence on climate change and health, and to learn how to apply this knowledge to clinical practice
• To learn how to green the office
• To formulate a role for the family physician as an advocate for a healthy planet in the office and in our communities

Environment-linked Illnesses | Pregnancy & Early Childhood Environmental Exposures: Impacts, Prevention, Diagnosis and Management

Environmental exposures in preconception and during pregnancy are associated with many serious childhood conditions. In addition, fetal exposures are now recognized to contribute to the development of adult
diseases. The combined cost of environmentally attributable disease is billions for Canada, and includes common conditions such as reduced IQ, behavioural disorders, obesity and diabetes.

This module will focus on abnormal birth outcomes such as low birth weight, neurodevelopmental problems in the early years, and conditions of immune dysfunction, such as allergies and asthma. The evidence for associations between environmental exposures and poor health outcomes in early childhood will be reviewed. Effective tools for reducing prenatal and early childhood exposures will be identified and used in small groups with clinical cases. Participants will be able to assess and modify their current office tools for preventing and diagnosing environment-related illness in pre-conception, pregnancy and childhood up to age 4.

Learning Objectives:
- Recognize significant preconception and prenatal exposures and practice strategies for counseling in exposure reduction
- Identify four serious health effects in children up to age 4 that are linked to prenatal environmental exposures and what to do about them
- Practice use of office-based tools to identify and reduce clinically important prenatal and childhood exposures

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Environment-linked Illnesses | Risks of Environmental Exposures to Child and Adolescent Health and Remedies in Clinical Practice
Childhood and pre-adolescence is a time for rapid growth and development of all the body systems, and orderly processes can be disrupted by harmful exposures in air, dust, food, water and consumer products, leading to life-long chronic illness effects. Adolescence includes puberty and sexual/reproductive maturation where delicate hormonal balances can be disturbed by toxic chemicals, even at low levels. Late adolescence is a time for independence-seeking and often risk-taking behaviours that increase hazardous exposures such as body art, food and drink additives, caffeine, tobacco, alcohol and illicit drugs. Through information and case discussions, participants will recognize risks and remedies.

Learning Objectives:
- Apply key exposure questions for age stages of childhood/adolescence about home, hobbies, school, occupation, personal habits, diet and drugs
- Readily access teaching tools and resources to motivate and help minimize potentially harmful exposures
- Monitor reductions in harmful or potentially harmful exposures, as well as manage cases clinically

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.

Environment-linked Illnesses | Chronic Pain, Fatigue, and Chemical Intolerance Linked to Environment Exposures: Office Assessment and Management
Pain, fatigue, rashes, breathing and neuroendocrine problems are very common symptom presentations in the office. They pose challenges to rule out readily treatable medical and environmental determinants and to diagnose chronic complex, frequently disabling, and often invisible medical conditions such as myalgic encephalomyelitis-chronic fatigue syndrome (ME-CFS), fibromyalgia (FM), or environmental sensitivities—multiple chemical sensitivities (ES-MCS). According to the Canadian Community Health Survey, these
Conditions are surprisingly prevalent, together rivaling the numbers for diabetes or heart disease. This session, through practice aids, case examples, and discussion, brings practical medical information and practice tools to diagnose and effectively manage this neglected patient population.

**Learning Objectives:**
- Include exposure history and use appropriate ‘ruling out’ tests to evaluate the impact and treat environmental/dietary influences on health
- Diagnose and treat patients with Myalgic Encephalomyelitis-Chronic Fatigue Syndrome, Fibromyalgia and Environmental Sensitivities-Multiple Chemical Sensitivities using the current consensus criteria
- Assess the degree of patient disability and document findings on insurance forms.

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**Environment-linked Illnesses | Common Chronic Illnesses and the Environment**

Almost 80 percent of Canadians over the age of 65 years have one chronic medical illness and approximately 70 percent of these people have two or more. The incidence of multi-morbid illnesses is increasing involving cardiovascular, respiratory, endocrine, neurological and immunological systems, but only a small percent are genetically predetermined.

The common pathophysiological mechanisms leading to multi-morbidity will be briefly reviewed, as well as the impact of environmental exposures, diet, exercise and other multiple determinants of health. Clinical case examples will be used to learn how to perform and integrate the environmental exposure history into routine office practice to identify and manage patients at risk for chronic illness and multi-morbidity. Participants will also learn and practice specific evidence-based strategies to motivate their patients to buy in to health-promoting lifestyle changes, such as environmental control, improved diet, goal-directed exercise and stress reduction techniques.

**Learning Objectives:**
- To list the commonly shared mechanisms of multi-morbid chronic illnesses
- To practise the exposure history to identify patients at risk, in order to prevent development of, and/or manage multi-morbidity
- To integrate skills re lifestyle modification in the office to help patients initiate and maintain effective self-management skills

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Leadership Development

Leadership Development Program: Morale and Productivity
Case #1 – Monday Morning at the Office

Many family practice physicians work under significant demands in their office setting. While patients expect full attention to their presenting concerns, there are other competing demands that occupy the physician, not the least of which is the work environment of the practice setting, the relationship with colleagues and supporting staff. Many unexpected events can create pressure to manage a variety of competing demands on attention and focus. This scenario is created to engage participants in a real life situation on an ordinary practice day.

The Case Scenario and discussion questions are designed to provoke discussion related to individual leadership challenges common to working in a collaborative group practice setting. The Leaders for Life Framework has been utilized to structure the case discussion with an intention to focus learning on skill development at the level of self management in a complex situation as well as the skill of being able to engage others effectively in resolving a difficult challenge.

Learning Objectives:
- To explore individual leadership style and personal skill in dealing with challenge
- To apply the LEADS framework to the case scenario
- To compare various strategies and approaches based on LEADS to resolve the case scenario challenge
- To review personal learning from the discussion
- To develop an individual learning goal(s) for transferring the learning to your practice setting
- To evaluate the effectiveness of applying the LEADS framework to family practice physician leadership development

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Leadership Development Program: Morale and Productivity
Case #2 – Oh dear, what can the matter be?

Many family physicians realize that there is more to a family practice than ‘seeing patients’. A positive and supportive work environment is what they expect, for themselves, colleagues, staff and patients. It can be challenging entering a new practice. Even established physicians may realize one day that their work environment has deteriorated over time. Often the first sign of this and the wake up call is from patient complaints or from the observations of a new physician joining the practice. This scenario is created to engage the participants in a real life situation in a family practice where dissatisfaction in the office environment has been identified.

The discussion plan is designed to provoke discussion related to common challenges working in a family practice. The Leaders for Life Framework has been utilized to structure the case discussion with an intention to focus learning on skill development at the level of self management and the skill of being able to engage others in creating change within the workplace.
Learning Objectives:
- To explore individual leadership style and personal skill in dealing with challenge
- To apply the LEADS framework to the case scenario
- To compare various strategies and approaches based on LEADS to resolve the case scenario challenge
- To discuss personal learning from the discussion
- To develop an individual learning goal(s) for transferring the learning to the practice setting

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Leadership Development Program: Informal Leadership
Case #3 – Being a Change Champion is Hard Work

Family physicians often work in team-based settings. While collaborative teams can enhance patient care and professional satisfaction, collaborative teams can be challenging to build, especially if you are not in a formal leadership position with authority.

This case scenario is designed to stimulate a discussion of how a “change champion” is created and how a change champion, without the benefit of formal leadership, title or authority can exert informal leadership to achieve change.

The Leaders for Life framework has been utilized to structure and to facilitate the case discussion with a focus on leadership skill development in self-management, engaging others and developing coalitions.

Learning Objectives:
- To explore your individual leadership style and skills in dealing with a challenge
- To apply the LEADS framework to the case scenario
- To compare various strategies and approaches based on the LEADS framework to resolve the case scenario challenge
- To develop individual leadership learning goals that can be applied to your practice setting
- To evaluate the effectiveness of applying the LEADS framework to family practice physician leadership development

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Leadership Development Program: Developing Coalitions
Case #4 – Coalitions are Temporary Fusions

Frequently family practice groups recognize a need for action that is beyond the individual ability of any one family practice group to achieve. In these situations, it is often helpful for that individual family practice group to find another like-minded group or groups with whom to work together. When two or more groups decide to join together, voluntarily and temporarily, and for a specific common purpose, they form partnerships, networks and alliances. For this case, we will use the LEADS term, coalition.
The Leaders for Life Framework has been utilized to structure the case discussion with a focus on leadership skill development in relationship to the formation of a coalition.

Learning Objectives:
- To explore your individual leadership style and skills in dealing with the challenge of building a coalition
- To apply the LEADS framework to the case scenario
- To compare various strategies and approaches based on the LEADS framework to resolve the case scenario challenge
- To develop individual leadership learning goals that can be applied to your practice setting
- To evaluate the effectiveness of applying the LEADS framework to family practice physician leadership development

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Medical Mentoring for Addictions and Pain (MMAP)

Pain and Addictions Primer for Family Physicians
Patients presenting with the complications of opioid addiction and chronic pain are difficult to manage in the context of a family practice. This 1 day course is offered to family physicians with a comprehensive family medicine practice who care for pain/addictions patients or those physicians with focused practices in pain and/or addictions care. Topics include: introduction; before prescribing opioids; safe opioid prescriptions in the office; comprehensive care in pain patients; titration and monitoring of patients; opioid addiction approaches; urine drug testing; management of patients with high opioid doses; and the downside of opioids. This course was co-developed with Centres for Pain Management (CPM).

Learning Objectives:
- Update on opioid guidelines
- Understand the treatment and diagnosis of patients with addictions
- Understand the pitfalls associated with opioid treatment of patients with chronic pain
- Understand and apply the Canadian guidelines

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 6.0 CFPC Mainpro-C Credits.

Musculoskeletal Joint Assessment

Musculoskeletal Joint Assessment and Musculoskeletal Examination is a critical component to correctly diagnosing joint injury and managing disease. Health practitioners can be faced with a variety of presentations each day in their practice. Keeping on top of the most current and advanced diagnostic techniques is critical to positive patient outcomes and timely recovery. Don’t miss out on this comprehensive workshop which will bring your diagnostic skills to the current state-of-practice. Assessment covered include: Ankle, Back, Shoulder, Knee and Hip.

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 6.0 CFPC Mainpro-C Credits.
Slit Lamp

Learning Objectives:
- Understand the basic principles of optics as they apply to using the slit lamp
- Identify your dominant eye
- Be able to identify the essential components of a slit lamp
- Be able to consistently bring the cornea into focus
- Understand how to properly assess the anterior chamber
- Describe the technique used to remove foreign bodies from an eye using a slit lamp

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Women’s Health

Skills Transfer Workshop: Office Gynecological Procedures in Family Medicine
This workshop will briefly review an updated approach to the diagnosis and management of 5 benign uterine conditions (fibroids, abnormal uterine bleeding, endometriosis, chronic pelvic pain and pelvic organ prolapse). Using state-of-the-art models, participants will learn techniques for performing endometrial biopsies, inserting of the levonorgestrel IUS and fitting, inserting and caring for pessaries. This is a hands-on, interactive workshop.

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Intrauterine Contraception: Theory to Practice
This hands-on, interactive workshop will review the current copper and hormonal intra-uterine devices available and discuss the benefits, risks and counselling issues surrounding their use. Insertion techniques and troubleshooting challenging situations with be discussed and practiced on state-of-the-art gynecological models.

Learning Objectives:
- Review IUD key information including selecting appropriate patients, pros/cons of different IUD options, and counselling
- Hands-on practice of techniques for different IUDs
- Troubleshooting and practical pearls

This program meets the accreditation criteria of the College of Family Physicians of Canada, and has been accredited for 3.0 CFPC Mainpro-C Credits.
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