In an effort to reduce the volume of emails going out to our members, the Nanaimo Division has created this quarterly newsletter full of information we feel will be of interest to local Physicians. If you have content you would like to include in the next newsletter, please contact us at recruit.nanaimo@divisionsbc.ca.



NDoFP Newsletter - Winter 2019 Edition

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February 5, 2019: Splash into the New Year February 11, 2019:

Colleague Connections, Enhancing Successful Relationships

February 21 - 23, 2019: Post Graduate Review in Family Medicine

May 31 - June 1, 2019: MAID (Medical Assistance in Dying), 2019

Welcome to Our New CORE Partners

Minnoz Restaurant: 15% off regular priced entree items with CORE card.

Nanaimo Museum: 10% of regular priced items in the gift shop with CORE card.

A Letter from the Board Chair

Dear Division Members,

I'd like to begin by extending New Year greetings to you and your families and in the spirit of the profession, I hope it's a healthy one! For those of you who don't know me, the focus of my medical practice is emergency and addictions medicine, I've been a Board Director since March 2016 and Board Chair since September 2018.

I'd like to acknowledge my Board colleagues including: past Chair, Dr. Melissa Oberholster (I don't mind saying, she is a tough act to follow); Dr. Patrick Kerridge, Hospitalist, our financial wizard (Treasurer/Secretary) & the RCI co-lead; Dr. Melissa Gillis, Family Physician, and our Pathways lead; Dr. John Trepess, Family Physician and co-lead of the **Recruitment and Retention Advisory Group; Dr. Matt** Toom, Family Physician and newly minted CME Accreditation Lead; Dr. Scott Takeda, Hospitalist and newest Physician member to our Board; Courtney **DeFriend, Regional Manager, Mental Health** Substance Use, First Nations Health Authority; and Doug Torrie, Barrister & Solicitor with Vining Senini whose work is primarily focused on commercial and business matters. Courtney and Doug were appointed and welcomed to the Board at our AGM in September last year. It's a talented group that I feel honoured to be a part of as we work together to represent our Division members.

If you've taken part in recent Division engagement events, you're likely becoming more familiar with the terms, Patient Medical Home (College of the Family Physicians of Canada) and Primary Care Network (BC Ministry of Health). Fully realized, these initiatives are intended to guide primary care system change that makes it easier for patients to access the right care at the right place. The system inputs include additional Family Physicians and better supporting those we're fortunate to have in our community. Community-based teams will be available including additional Nurse Practitioners, allied health support and streamlined, integrated services from Island Health.

Most recently, the Minister of Health announced the next urgent primary care centre (UPCC) will open in Nanaimo (currently in negotiation with the Ministry) and it will form part of our primary care network.

The engagement around the UPCC has given us a flavour of the partnership potential for the development of the network - GPs, NPs, Specialists, the Nanaimo Medical Staff Engagement Society, First Nations, the City of Nanaimo, Island Health, the Ministry of Health – all working together to improve something we share as common ground, improved patient care and support for one another in providing it. We see the net effect of these changes measured in years, not months.



Further along in the newsletter, you'll see an article about Orthopedic surgery redesign. It's an example of the Ministry of Health's expectations around an improved integration of Specialists with primary care and more streamlined referral forms and processes. The Ministry has similar expectations for improvements to digital health communication, cancer care, wait lists, transitions in care, end of life care and specialized services delivered by health authorities, e.g., mental health substance use and care for frail/complex seniors and those living with chronic disease. Woven throughout the system changes is a commitment to cultural safety and humility. Achieved, these changes will truly be transformative.

However, our contributions to broader system change is only part of our Division work. We remain

committed to the priorities supported by our members: Recruitment and Retention; non-pharma Continuing Medical Education; Substance Use; Residential Care Initiative; Management of Complex Wound Care; and enhancing primary care for First Nation community members.

In closing, I'd like to ask the medical community to assist us with the coming system changes by continuing to provide your valuable input. If we're all able to step back and imagine the larger picture of primary/acute/community integration and the positive connections we'll form, it will create an environment in which system transformation can flourish in Nanaimo.

I look forward to contributing to this in the Chair role and in my practice that straddles acute and community care.

"In Ojibwe and Cree culture, leadership didn't mean power; it meant caring" (quotation borrowed from pg 59, All our Relations, by Tanya Talaga, 2018 CBC Massey Lectures)

With gratitude,

Roger Walmsley, MD, Board Chair



Upcoming Division Events



For Your Information...

Nanaimo Orthopedic Surgeons Streamlining Referral Process afoot in Nanaimo. All referrals and appointments will be coordinated through orthopedics along with education and self-management support for patients. There will also be round the clock access to care or advice, including but not limited to pain management.

The surgeons' vision includes a central orthopedic centre for excellent orthopedic care; a pooled referral system; engagement of allied health providers; an amalgamated EMR for surgeons; and, a central data base for research one that will drive quality improvement. The end result will be a one-stop shop for all surgical and non-surgical orthopedic services with a triage process that ensures patients are seen in the appropriate stream. All patients will be seen by a Physician and if needed can be referred from the non-surgical stream to the surgical one and visa versa. A Physiatrist and MSK/Sports Medicine Physicians will be recruited onto the orthopedic team along with other allied health care providers.

Currently, 3400 patients from Ladysmith, Port Alberni, Nanaimo, Oceanside and rural/remote locations are waiting to see 5 orthopedic surgeons in Nanaimo. They are recruiting a 6th surgeon without any additional resources and will alter operating room time to accommodate him/her. Based on their experience, the surgeons estimate approximately 25% of those wait listed will require surgery.

A meeting with interested GPs from the above areas was held October 14, 2018 where Dr. Cobus Smith, Chief of Orthopedic Surgery, presented the vision and work completed to date. A second meeting was held on January 10, 2019 with GP representatives to discuss and finalize the draft referral form and process which includes a communication loop back to the referring providers. Patients will be notified of their appointments, surgery, etc. by the orthopedic centre.

A list of EMRs used by Family Physicians and Nurse Practitioners has been provided to the surgeons as their plan includes having the referral form EMR ready. The entire process will take several months of effort and we'll keep you updated on the progress.

As a next step, Dr. Smith and Dr. Chris Cameron are planning a CME in partnership with the Division and the Nanaimo Medical Staff Engagement Society. It will provide an opportunity for knowledge exchange about tools, techniques and resources to use in your own practices and information about the new referral process.

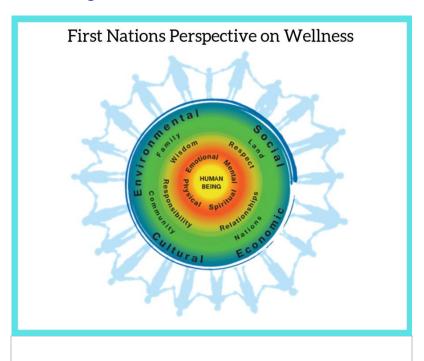
For further information, please contact Leslie Keenan, Executive Director <u>Lkeenan@divisionsbc.ca</u>



Cultural Safety & Humility: A Step Towards Reconciliation

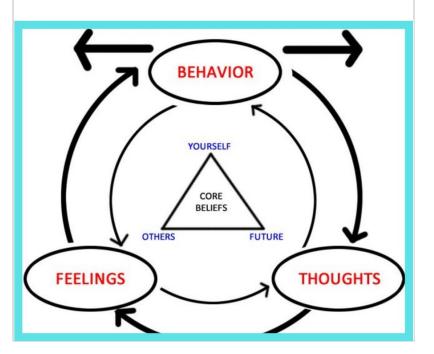
As part of the Division's commitment to *Cultural Safety and Humility*, the Board recently approved an organizational wide strategy that includes: a foundational online 3-hour course, "Aboriginal Health: For the Next Seven Generations for the Children" free to all providers. As experiential opportunities become available in the community, the Tillicum Lelum Friendship Centre has agreed to update the Division on these and we will share them with Division members; an annual CME devoted to cultural safety and humility; and, a sustainability plan that ensures all existing and new Board members and Division staff complete the online course as part of their orientation. As the Primary Care Network initiative begins to take form, any provider who wants to participate in the network and utilize its benefits will be asked to take the online course. The Ministry of Health outlines their expectation for this commitment in their policy papers. It will form part of the agreement we enter with the Ministry in order to access additional community services, allied health providers, additional GPs, NPs, etc. The online course focuses on the "why" of cultural safety and humility while the experiential opportunities focus on the "how". Some examples of the latter may include participation in sweat lodges, medicine walks, cultural crafts, language and other traditions.

For further information, please contact <u>Lkeenan@divisionsbc.ca</u>



Cognitive Behaviour Skills Training (CBT)

Since beginning the CBT groups in April 2018, we've seen a steady increase in the number of patients being referred. The growth trajectory is similar to CBT in Victoria where the program was first developed. The current group is full and the next session beginning in February is filling quickly with 5 spots left for patients with mild to moderate anxiety and/or depression.



Below is a summary of key activities in the past 8 months:

~ 46 patients have completed the program.

~ Dr. Kehinde Oluyede, Psychiatrist, has run 22 classes with one GP completing this month and another

scheduled to begin classes in February. Both GPs will be open to accepting referrals from other clinics.

~ 4 Family Medicine Residents have participated with a 5th set to begin next month and another on the wait list to join.

~ The Division now has an online booking system for patients once they've been successfully referred to the program.

~ Dr. Jennifer Whyte, GP from Victoria and trained in CBT there, completed 16 additional classes in Nanaimo.

As patient referrals increase, our aim is to provide a positive learning experience, reduce some of the burden felt by primary care providers and improve patient outcomes. The overall evaluation of the CBT program will be completed at end of March 2019.

Snuneymuxw Wellness Centre

Relationships and services continue to grow and flourish at the Snuneymuxw Wellness Centre. There are currently 7 GPs sharing shifts 2 days per week in a team-based environment to support community members. Additional health care includes a visiting Pediatrician, a Traditional Chinese Medicine practitioner, home care, home support, mental health and addictions counselling/support, infant/child development, Social Work, Youth Support, and Women's Support groups.

GP sessionals are supported by Island Health and funded by the Ministry of Health and the First Nations Health Authority. In 2018, on average, Physicians saw 18 patients per day. There were 364 different patients seen for a total of 968 Physician appointments. The centre has reached its capacity for primary care and the Snuneymuxw community are applying for additional GP sessionals through Island Health.

The new Wellness Centre is slated to open in South Nanaimo in Spring 2019 which will also provide space for traditional medicine, dental care, lab and pharmacy. Additional GP sessionals will allow the centre to attach an additional 30% of patients and give more time to allow urgent and culturally sensitive visits. The Centre services will also be open to the broader community.



Wound Care

Project Manager: Laura Loudon

Wound Care Family Practice Clinic Visits - Schedule Your Visit Today!

New Tools

The Nanaimo Wound Care (WC) Initiative is excited to announce the roll-out of the WC, GP/NP Triage/ Decision-Making Algorithm and Patient WC Passports.

The algorithm, developed over the past year through consultation/testing with local GPs, Specialists, Family Practice Residents and Nurses is intended to help build awareness of local resources. Our hope is this new tool will prove valuable in supporting your clinical decision making and assist navigation services for your patients.

Patient WC Passports

To empower patients on their WC journey, we've also created a Patient WC Passport. Patients are encouraged to use the passport to set self-management goals, track appointments/providers/treatment instructions and test results.

Clinic Visits

Physician Lead, Dr. Poteryko and Laura Loudon are currently visiting clinics to demonstrate the Algorithm and Patient Self-Management materials to support the management/referral of complex wounds. In addition, we'll be joined by a specialty WC nurse who will provide WC education and speak to the recent changes Island Health has made to improve WC provided through Nanaimo Community Health Services.

To schedule a clinic visit please contact Laura at <u>lloudon@divisionsbc.ca</u>. Sessional payment provided.



Patient Medical Home & Primary Care Network

Project Manager: Laura Loudon

Towards a Better Nanaimo for Primary Care

Patient Medical Home (PMH) - What is it?

By definition, a PMH is a Family Practice supported to its full potential at the centre of Primary Care (PC). When the systems around your clinic are robust and integrated, you are better supported to ensure your patients receive the care they need. The latter refers to the Patient Care Network (PCN).

Your Opinion Matters!

Fall 2018 was a flurry of activity around the current state and future of PC in Nanaimo. Including a Division-wide PMH event, an Urgent Primary Care Centre (UPCC) gathering, several PMH clinic visits/meetings, and a series of UPCC community/Physician think-tanks. While the specific goals of these events varied, our overall goal was to provide opportunities to learn from the experiences and knowledge of our members/community partners to inform PC planning for the future.

For More Info...

Please see these new 1-page info sheets provided by GPSC by clicking below:

>> Click Here for Info Sheets

Resource Access - Referral Form...

Many providers are unaware that patients have access to 30 different community services with Island Health through referral from their GP or NP. These services are available by referral using this form (see page 3 of the form for a listing of the services) >>

Thank You!

The Division thanks everyone for their time/dedication and we hope you will continue on this journey as we plan our PCN.

Your involvement with the PMH/PCN events, clinic visits and engaging with the Practice Support Program (with the PMH self-assessments/phases of EMR panel development) all contribute to our community readiness for PCN planning.

Going Forward...

Nanaimo is set to submit our expression of interest to gain approval to begin our PCN service planning in Spring 2019 (waiting on date from the Ministry of Health).

We will continue to inform you of opportunities to become involved and be heard. In the meantime, if you would like to arrange a clinic visit with our Physician Lead, Dr. David Sims and Laura, please email <u>lloudon@divisionbc.ca</u>. Sessional payment provided.

Alternatively, you may reach out directly to the PSP to learn more about the PMH practice support tools and incentives available. Please contact Ian Carson at <u>ian.carson@viha.ca</u>.



>> Click Here for Referral Form

Residential Care Initiative

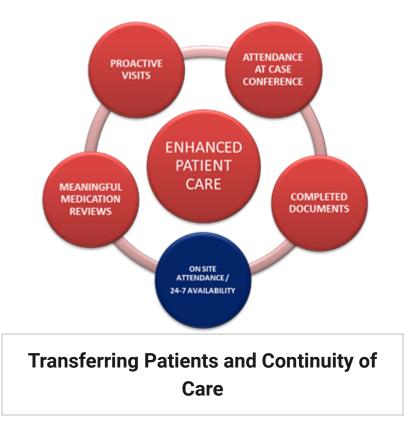
Project Manager: Beccy Robson

How Are We Doing?

Just over 3 years ago, we commenced the Residential Care Initiative (RCI) in Nanaimo. At that time there were nearly 90 Family Physicians with patients in Long Term Care (LTC). Ironically, despite the large number of Physicians in some facilities, the majority of residents relied on day to day care from the Medical Director or 'house doctor'. Since 2015, the RCI actions have reduced the total number of Physicians visiting patients in LTC by 35%. Now, 92% of patients are looked after by a team of 32 *RCI Physicians*. Some of these Physicians provide facility core team care (caring for 10-40 patients), whilst others provide longitudinal care for their own clinic patients.

>> Click Here for LTC Access Policy Change

Every LTC facility has core RCI Physicians providing consistent care in line with the GPSC Best Practice Expectations. There remain only 2 facility panels with more than 40 residents, and these are being actively addressed by the RCI project team.



GPSC BEST PRACTICE EXPECTATIONS

Better Communication...

To make it easier for Physicians to choose the best care for their patients, facilities will now contact all Physicians by fax to request their preference for the continuation of care upon patient admission to LTC. The details of this procedure are contained in the RCI Transfer Policy.

>> Click Here for RCI Transfer Policy

Sustainability Guidelines

An additional benefit of the recruitment of RCI Physicians is the opportunity to pro-actively plan care. A document has been produced in agreement with facility management and RCI Physicians to provide guidance for continuity of care in the case of Physician absence (short or long term).

>> Click Here for Sustainability Guidlines

Planning for the Future...

As the RCI matures, Family Physicians can request to provide care for clusters of patients (10-40) at their chosen facility and when the opportunity arises. This provides a guarantee of sustainability of care across the LTC community.



Get Involved!

If you are interested in learning more about the RCI, or would like to consider being a Core Physician, please email Beccy Robson at <u>brobson@divisionsbc.ca</u>.

Making Medication Reviews More Meaningful...

New Process...

Facility licensing requirements require medication reviews to be undertaken at LTC facilities every 6 months. This process allows for a meaningful conversation between a facility Pharmacist and the MRP about a patient's symptoms, current medications, potential contraindications and possible deprescribing for polypharmacy. In 2018, a multi-disciplinary working group comprising Physicians, Pharmacists, RNs, and Directors of Care, met to review & improve the existing medication review process for LTC residents.

The result is a simple guide to the medication review process for Family Physicians accompanied by standardized documentation for use by the facility. Participating LTC facilities will be implementing the new process in the coming months for future medication reviews.

Summary of Changes:

1) All MRPs with LTC patients will receive approximately 4 weeks notification that a review is scheduled, allowing opportunity to participate in person or by telephone.

2) 1 week before the review, facility staff will complete a 1-page summary of the patient's medical progress and forward it to both the pharmacist and to the MRP.

3) On the day of the review, the pharmacy will provide a full list of current medications for review with MRP.

4) Based on the guidelines produced by the working group, the Physician and pharmacist can review and amend medications together.

The medication review can be conducted by telephone, and can be *billed to MSP Billing Code:* 14077.

If you have any questions, please contact RCI.Nanaimo@divisionsbc.ca.

BeST Care for Challenging Behaviours in LTC

Team Development...

Behavioural Support Teams (BeST) are being developed in 4 pilot LTC facilities in Nanaimo through a Shared Care (Doctors of BC) funded project led by the Division. A multidisciplinary working group comprised of Family Physicians, Psychiatrists, Geriatric Specialty Services Nurse Clinicians, LTC facility staff, and patient representatives has been working to improve the care of LTC residents displaying challenging dementia behaviours.

PIECES TM

At the heart of this initiative is the <u>PIECES™</u> approach championed as best practice by care staff and clinicians across Canada. Pilot sites at Kiwanis Lodge; Eden Gardens; Malaspina Chartwell; and Nanaimo Memory & Complex Care are educating caregivers in behavioural approaches including PIECES[™], and Gentle Persuasive Approach training with the support of the NDoFP.

>> Click Here for More PIECES Info

Referral Improvement...

To facilitate assessment, and support management of LTC patients, the project group has developed a comprehensive PIECES[™] based checklist aimed to improve appropriate referrals to Island Health Geriatric Specialty Services team.

New Ways of Working...

Recent reductions in clinical Geri-Psychiatric services within Island Health has focused attention on achieving successful outcomes, but has also created opportunities for alternative approaches for management of dementia patients.

A trial process of multi-disciplinary shared rounds is underway in central Nanaimo, aiming to enhance access to consults, whilst offering opportunities for informal peer mentorship. More information on this innovative approach will be available after the pilot phase.

>> Click Here for Island Health Update on Geri-Psychiatric Services

For more information about the BeST project, please contact <u>brobson@divisionbc.ca</u>.



Accepting New Patients?

Any Physicians or clinics with the capacity to accept new patients, please contact our recruitment team today by email at <u>recruit.nanaimo@divisionsbc.ca</u> or call (250) 591-1200.

Are You Interested in Becoming a Mentor?

You Are Invited to Our:

Colleague Connections: Enhancing Successful Relationships Event

Date: February 11, 2019 Time: 1800 - 2000 hrs Venue: Longwood Brew Pub (Upstairs Room)

For more info or to RSVP, please contact our recruitment team today by email recruit.nanaimo@divisionsbc.ca or call (250) 591-1200.



Thank You to our Sponsors

We would like to thank everyone for attending our first Resident Learning Session: R1 General Billing and Banking & Debt Management. We also extend our gratitude to all presenters and sponsors, RBC and Scotia Banks for your ongoing support.



Elise Morgan Commercial Account Manager RBC Royal Bank (250) 741-3520 elise.morgan@rbc.com Ken Foster, MSc. BEd. Professional & Healthcare Specialist Scotiabank (250) 216-0837 ken.foster@scotiabank.com

Substance Use

Project Manager: Beccy Robson

Evolving Doors: Improving Patient Access to Opioid Agonist Treatment

GP OAT Network

The Division is excited to be leading a regional project to develop a community of Opioid Agonist Treatment (OAT) prescribers across mid/north Vancouver Island. Following progress made by the previous Shared Care funded project to 'Empower Family Physicians to Manage Substance Use Patients' a new tranche of funding has been made available to the Division to map OAT prescribers from Mill Bay to Port Hardy (east to west coast).

This ambitious project will identify levels of expertise against a tiers of service health care model and create a mechanism to provide peer support to OAT prescribers, both new, and more experienced. We are pleased to be collaborating with the First Nations Health Authority, Island Health, Divisions of Family Practice, Corrections BC, and the BC College of Pharmacists to ensure this initiative is comprehensive, and meaningful within all communities.

If you would like more information about this initiative, please contact <u>brobson@divisionsbc.ca</u>.

Improved Outcomes...

Clear identification of all prescribing resources (and the gaps) will allow patients to access OAT within and between communities and support a continuum of care for successful treatment of, and recovery from, opioid use disorder.

The outcomes from this EVOLVING DOORS project will support work by Dr. Ramm Hering, *Medical Director for Addiction Medicine, Island Health* to identify and develop addictions expertise amongst Physicians. "I believe I need to be on long-term suboxone...To succeed I need passion, and to avoid boredom...something to strive towards...I have set goals for myself. [I am] working towards moving out on my own and am studying to go back to school...excercising and trying to take better care of my health and body."

> Vancouver Island OAT Patient 2016

Local Support for Addictions is only a Text Message Away!

A reminder that the *e-mentor* text program offers swift access to support from addictions Physicians based here on Vancouver Island. A team of expert mentors is pleased to offer local advice and information on any addictions issue.

No query is considered too big or too small, and may include specific medical questions, or simply opportunities to explore ideas, such as including addictions medicine into clinical practice.

To receive advice from a local addiction Physician, text your question (including the word addictions) to 450-990-6200. An e-mentor will respond within 2-4 hours....don't forget to include your contact details in the text! >> Click Here for More Info



Did you know there is local network of support to help you manage and treat patients with addictions?

450-990-6200

ASK: Your question

BENEFITS HOW DOES IT WORK? **SMS** 🗹 Fast Does not interrupt patient flow **Flexible** = Receive calls anywhere M Personal 1-2-1 advice and discussion (?)

Comprehensive All addictions concerns and queries answered

> In less time than it has taken to read this document, you could have E-MENTOR already requested a 1-2-1 support from an addictions specialist! Division of Family Tra

Community Health Network

What is it?

Many island communities have community health networks (CHN) whose efforts are focused on improving the social determinants of health. The networks are typically made up of social service agencies and other organizations that focus beyond the sphere of what we typically associate with "health care" needs, e.g., food, shelter, isolation, poverty, etc.

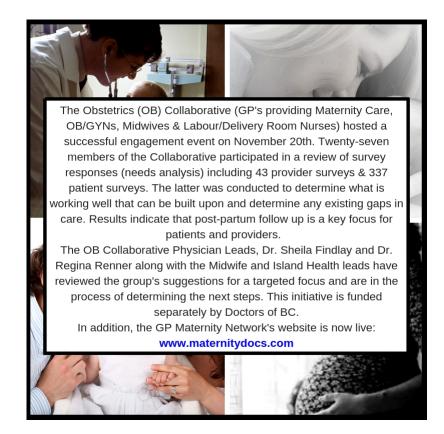
Island Health has funding for a part-time Coordinator devoted to supporting the network. The goal is to eventually link the work of the community health network to our primary care network that provides health services in an integrated way for providers and patients. The next steps are to hire a coordinator to assist in developing a structure and a strategic plan.

Community Forums Provide Feedback...

The development of a community network in Nanaimo is beginning to take shape through the support of the City, Island Health and the Division. Two forums were held last Fall with the intent of building awareness and understanding of what a CHN is, how it can connect with health services and to gain insights into how a network like this could function in Nanaimo. Close to one hundred participants attended each forum and are keen to move forward with a network in Nanaimo.



Obstetric Collaborative





Pathways is nearing full implementation across the province. There are only two Divisions remaining and it's anticipated that Pathways will be fully implemented next year. At this point over 95% of Division members in BC have access to Pathways.

New "Referral Tracker"

While Pathways has always been used as a tool to inform decisions about patient referrals, the addition of a new platform within Pathways, a "referral tracker" will allow physicians and their staff to send and track referrals as well. Features include:

1) A collaborative dashboard (that will be accessible through your existing account) where both GPs and Specialists can see patient referral status, e.g., sent, received, patient wait listed or booked, seen.

2) The ability to use your existing workflow to send a referral letter and accompanying documentation to the Specialist clinic.

3) Secure messaging between GP and Specialist offices through the dashboard.



4) Automated electronic patient notifications sent by email or text, which include patient instruction sets

The referral tracker pilot is finishing up in White Rock South Surrey before further spread across BC. In order for Nanaimo to participate, we will need all Family Physicians who want access to it, to have their "profile" on Pathways.

Click below for the short (one-page) survey for Family Physicians to complete (if you don't yet have a profile on Pathways).

>> Click Here for Family Practice Survey

Please send completed surveys to Janice Schmidt, our Pathways Administrator at <u>nanaimo@pathwaysbc.ca.</u>

Continuing Medical Education & Other Opportunities

Island Health Seeking Medical Director for Primary Care

Island Health sent the Division a link to a new regional position for Medical Director, Primary Care which is posted on the Island Health website. For those interested, the closing date is January 30, 2019.

>> Click Here for Position information and How to

Apply

UBC Enhanced Skills Program

Are you looking to refresh your skills or learn new ones? Consider applying for the UBC Enhanced Skills Program.

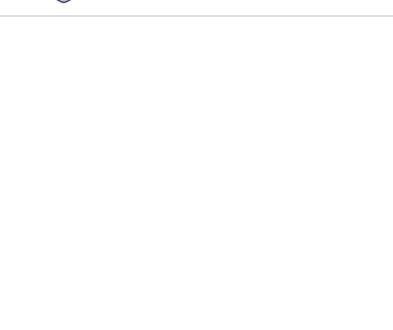
>> Click Here for More Details

UBC Care of the Elderly Intensive Review Course

>> Click Here for More Info



THE UNIVERSITY OF BRITISH COLUMBIA







Key Speaker G Michael Allan, MD, CCFP 16.75 Mainpro+



Upcoming Oncology CME Webcasts

BC Cancer's Family Practice Oncology Network hosts accredited monthly Oncology CME Webcasts with the

University of British Columbia's Division of Continuing Professional Development. There is no charge for these practice-ready sessions which run from 8-9:00 a.m., Pacific Time, and are accredited by the College of Family Physicians of Canada for one Mainpro+ credit each. Please join us!

>> Click Here to Register

Most Webcasts are recorded.

>> Click Here for Recorded Webcasts

Earn additional Mainpro+ credits through the College's Linking Learning exercises.

>> Click Here for Linking Learning Exercises

January 17: Managing Oncologic Emergencies – Superior Vena Cava Syndrome and Spinal Cord Compression presented by Dr. Devin Schellenberg of BC Cancer – Surrey

February 21: Managing Sexual Dysfunction in Cancer Patients presented by Dr. Stacy Elliott of the BC Centre for Sexual Medicine

March 21: Follow-up Care of Colorectal Cancer Patients presented by Dr. Howard Lim of BC Cancer – Vancouver.



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