

demic Emergency Medicine Research Directors' Workshop, which emphasized that the focus should be on the process, not the product.²

Is "research" the only form of scholarly activity?

Residents sought to broaden the accepted definition of scholarly activity to include original research (basic science and clinical), curriculum development, administrative projects, community health initiatives, completion of graduate-level courses, subspecialty or fellowship development

(e.g., aeromedical transport, prehospital care), utilization of new technologies (Web site development, handheld computer applications).

Although few conclusions were reached at the resident forum, strong themes emerged. Residents are curious about their specialty and eager to engage in scholarly activity. We will flourish with direction, strong mentorship and access to the necessary academic resources. Given the common questions we face in emergency medicine across Canada, increased collab-

oration among residents from different programs and specialties ought to be nurtured.

References

1. RCPSC (Royal College of Physicians and Surgeons of Canada) General Standards of Accreditation. Sept 1997. p. 12.
2. Summers RL, Fish S, Blanda M, Ternstrup T. Assessment of the "Scholarly Project" requirement for emergency medicine residents: report of the SAEM Research Directors' Workshop. *Acad Emerg Med* 1999;6:1160-5.

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CAEP Residents' Section: Where Do We Go From Here?

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Jason Frank, CAEP's Residents' Section representative for the last 2 years, is an active CAEP member who serves as a voting member of the Board. Before Jason, there was no active residents section and minimal resident involvement in CAEP. Jason has brought us a long way, and his efforts are laudable. His term ends at the next CAEP meeting, and at that time a new representative will be elected. Jason will aid the new section representative for the first year.

Residents at this year's workshop suggested several topics for the March 2001 (Calgary) workshop. Topics included the following.

Educational issues

- A forum with a coordinated discussion with staff physicians
- Teaching residents to teach
- Interaction between programs — going to other EM programs for courses or workshops

- Faculty and resident development

Resident issues

- Career planning
- Networking — occupational, social

Residency issues

- Role of training programs — length, future
- Subspecialty year and fellowship opportunities
- Advocacy role of the Residents' Section
- CCFP-EM residents — return to service requirements
- Political activism — position statements

Other training

- Critical incident stress management
- Stress management
- Presentation skills

Scheduling and activities

Most residents preferred the pre-conference format with a dinner, followed by a half-day session the next day. This eliminates conflicts with the main conference and provides an independent forum for resident interac-

tion. Next year we hope to arrange a recreational or sporting activity after the half-day session (which will no doubt cause an injury, yet also help promote our specialty.)

Residents' Web site

The residents who attended this year's workshop were in favour of the idea of a CAEP Web site section for residents only. Information on the site could include a list of previous exam questions, with answers; educational material such as case presentations; fellowship opportunities; and special educational opportunities. The Web site might also be used by the CCFP-EM residency committee for submissions of applications to the EM year.

Residents' listserve

A final priority was a listserve exclusively for EM residents to facilitate discussions about resident issues, special events, educational, fellowship or research opportunities.

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