

ANNUAL BUSINESS MEETING

CANADIAN ASSOCIATION OF EMERGENCY PHYSICIANS

JUNE 7, 1985

OTTAWA, ONTARIO

Executive Members Present: Dr. T. Sosnowski  
Dr. S. Glazer  
Dr. P. Lane  
Dr. T. Gilkinson  
Dr. M. Tetreault

The Annual Business Meeting of the Canadian Association of Emergency Physicians was called to order at 15:20 hours. The chairman made some opening remarks about the success of the annual scientific meeting and thanked Dr. Anna Malawski and her team for this success.

1. Approval of Agenda:

The agenda circulated was approved on a motion by Dr. Ahuja seconded by Dr. Tollefson.

2. Approval of minutes:

The minutes of the Annual Business Meeting of April 3 1984 in Vancouver were approved as submitted on a motion by Dr. Lane seconded by Dr. Neal.

3. Business Arising from the Minutes:

3.1: Extension of practise eligibility:

Dr. Sosnowski reported that the Royal-College specialty committee on Emergency Medicine had considered our proposal about extension of practise eligibility and had refused any extension of eligibility. Some members present made clear their unhappiness with this decision it was suggested by Dr. Baillie that they as individuals write to the Royal College to this effect. It was pointed out that as an association CAEP had done it's utmost in this matter.

3.2: CMA statements on Emergency Medicine:

Dr. Sosnowski commented on the history of the CMA statements on Emergency Medicine and CAEP's objections to them. He informed the members that a committee had been formed at the CMA to discuss and revise these statements. CAEP shall be represented on this committee.

#### 4. REPORTS:

##### 4.1: President's Report:

Dr. Sosnowski began his report by thanking all members of the organisation as well as this year's executive for their support throughout the year.

He then went over the past year's highlights which included liaison on an international level with colleagues in Australia, the UK and the United-States with the planning of an international meeting of Emergency Physicians in London in April 1986. Also Dr. Sosnowski commented on the second year of examinations at the Royal College level and third year at the Canadian College. He noted that on the specialty committee at the Royal College we now had a large majority of full time emergency physicians. He reflected on the importance of finally being entrenched as a recognized specialty but warned against complacency now that major gains have been made.

Dr. Sosnowski then reflected on the importance of members getting directly involved in the affairs of the organisation if CAEP were to continue assuming a leadership role in our communities. He also re-emphasised the importance of increasing our numbers if CAEP wishes to more effeciently shape our future. This should be done by individual members on a local level.

##### 4.2: Membership and Treasurer:

###### 4.2.1: Membership:

Dr. Gilkinson presented his report which had been previously circulated. He noted that membership was holding stable with 379 paid members 1 year ago and 375 paid members now.

The report was accepted by the members on a motion by Dr. Maynard seconded by Dr. Johnston.

###### 4.2.2: Treasurer:

Dr. Gilkinson reviewed the financial status of the organisation which had previously been circulated. He pointed out that the percentage of full-time emergency physicians as opposed to part time ( associate) members was approximately 60%.

The report was accepted on a motion by Dr. Vicar seconded by Dr. McGuire.

##### 4.3: Publications:

Dr. Lane reported on the activities of the publications committee. He pointed out that for the first time the CAEP review needed no financial support from the organisation. Once again he stated the great difficulty of

obtaining articles for publication.

During the past year the executive had discussed the possible merger of the review with either the critical care society's publication or the Archives of Emergency Medicine, or the Trauma Association of Canada. No fusion is probable in a foreseeable future. Dr. Lane then announced that Dr. L. Fulton would be assuming a more important role as co-editor.

Dr. Lane concluded his report by putting out a call for an editor to replace him in the coming year.

Dr. Lane's report was accepted on a motion by Dr. Mann seconded by Dr. Head.

#### 4.4: Residents Committee:

Dr. Head reported on the activities of the residents committee during the past year. The highlight of the past year was the changes brought about in many programs seemingly as a result of last year's meeting between program directors and residents at the Vancouver scientific meeting.

The residents annual meeting was held on June 6 and they elected the chairman of their committee for the coming year. He is Dr. David Williams of Toronto.

Dr. Head's report was accepted on a motion by Dr. McGuire seconded by Dr. Gilkinson.

#### 4.5: Pre-hospital Care:

Dr. Johnston began his report by commenting on the usual state of chaos of pre-hospital care across the country.

Specific areas of interest to the section this past year were the content of training programs and exams for pre-hospital personnel. A committee of members shall be struck to prepare a position paper on this. Also the section has been interested in the question of medical equipment on commercial aircraft. Dr. Johnston discussed the different possibilities and levels of our involvement as emergency physicians as to this question. No firm suggestions were made. He then commented on the success of the first National ACLS competition held in Ottawa 3 days ago and organised by the ACT foundation of Canada. It was suggested that CAEP write a letter of congratulations to ACT on this subject. Carried.

Dr. Johnston's report was accepted on a motion by Dr. Lane

seconded by Dr. Baillie.

#### 4.6 Education:

Dr. Maynard presented his report on education. He reviewed credits for post graduate education then presented his committee's suggestions for undergraduate education in Emergency Medicine. They were that all students receive both BCLS and ACLS courses and also a 40 hour course in Emergency Medicine. The specific contents of these proposals will be forwarded to all members for comments in the coming months.

Dr. Maynard's report was accepted on a motion by Dr. Powell seconded by Dr. Christenson.

#### 4.7 Trauma:

Dr. Lane reported on the activities of the section on trauma. The main thrust this year was on liaison with the Trauma Association of Canada and their efforts to establish a trauma registry in Canada. A position paper to this effect is being written and it was suggested that CAEP could contribute financially towards this goal.

Dr. Lane's report was accepted on a motion by Dr. Baillie seconded by Dr. Maynard.

#### 4.8 Toxicology:

A ad hoc committee on toxicology has been formed. Dr. Vicas reported on it's goals and objectives.

1- To encourage Emergency Physicians to assume a leading role in hospitals, universities and the community in the field of toxicology.

2- To collaborate with and work to improve quality of regional poison control centers.

3- To promote prevention.

4- To promote more research in the field.

Dr. Vicas also pointed out the great importance of Emergency Physicians reporting incidents of poisoning.

#### 4.9: Drinking and Driving:

Dr. Tollefson reported on the numerous activities of this committee. Dr. Tollefson, with the executive, submitted a brief to parliamentary commission on Bill C-18 which was very well recieved. The important points where CAEP's presentation seemed to have made positive impact were that Emergency Physcians wold be immune from prosecution for taking blood samples on a warrant and that the use of certificates would probably keep us from having

to testify in court.

Dr. Hargot of Hamilton has accepted the task of producing a Canadian PSA on drinking and Driving.

Dr. Tollefson presented lapel buttons on drinking and driving which shall be distributed to all members.

Dr. Tollefson concluded by announcing that, during the coming year, there would be at least four "drunk-busters" contests in Canada aimed at promoting the negative public awareness of the problem of drinking and driving.

#### 4.10: Annual Meeting:

##### 4.10.1: Royal College of Physicians and Surgeons:

Dr. Glazer brought members up to date on the program for the coming Royal College meeting in September in Vancouver.

##### 4.10.2: 1985 Meeting:

Dr. Malawski announced that the present scientific meeting would make a profit for the organization and that the number of attendants was approximately one-hundred and fifty.

##### 4.10.3: 1986: Dr. Neal:

The 1986 Meeting in Edmonton will be a joint meeting of CAEP, NENA and Interphase. The goal for this meeting is one thousand (1,000) participants. Dr. Neal then commented on the program which promises to be most interesting.

#### 4.11: Nominations:

Dr. Lane presented the report for the nominations committee:

Nominations for the executive for the coming year:

President: Dr. S. Glazer  
President-elect: Dr. M. Tetreault  
Secretary: Dr. J. Ahuja  
Treasurer: Dr. T. Gilkinson  
Member-at-large: Dr. B. Scharf

Nominations by Dr. P. Lane seconded by Dr. Johnston  
Carried unanimously.

Nominations for Sections:

Pre-hospital Care: Dr. R. Johnston  
Pediatrics: Dr. M. Tennenbein  
Residents: Dr. D. Williams

Trauma: Dr. P. Lane

Nominations for standing Committees:

Membership: Dr. T. Gilkinson

Policy and Standards: Dr. D. Jones

Constitution and by-laws:  
Dr. G. Powell

Education: Dr. J. Maynard

Publications: Dr. P. Lane

Annual Meeting: Dr. C. Neal

Nominated by Dr. Lane seconded by Dr. Ahuja.  
Unopposed.

5. NEW BUSINESS:

Members brought up the problem with standardisation of Royal College exams and anecdotes about injustices and the difficulty of conducting fair oral examinations. This led to prolonged discussion about examination techniques,; no resolution was put forth.

There being no other business the meeting was adjourned on a motion by Dr. Mann seconded by Dr. Vicas.