



ROYAL COLLEGE
OF PHYSICIANS AND SURGEONS OF CANADA
COLLÈGE ROYAL
DES MÉDECINS ET CHIRURGIENS DU CANADA

Specialty Committee activities during 2013

Specialty committees continued to play an active role throughout 2013 in advancing professional training and standards of practice in the various medical and surgical disciplines. These committees play a vital role in shaping and advancing specialty medicine in Canada.

Please click the discipline title below to read a high-level summary of each committee's activities during the past year.

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Adolescent Medicine

Chair: Debra K. Katzman, MD, FRCPC

Vice-chair: Sheri M. Findlay, MD, FRCPC

Exam committee chair: Eudice Goldberg, MD, FRCPC

The Specialty Committee in Adolescent Medicine had a busy year. The following outlines the accomplishments and new initiatives in 2013:

- The revised *Objectives of Training and Final In-Training Evaluation Report* were approved by the Royal College.
- Made editorial revisions to the Specific Standards of Accreditation.
- No fellows sat the exam this fall. The exam remains a written, short answer exam.
- Developed and applied for Junior Faculty Scholarship. The committee is awaiting decision about how to move forward.
- Succession planning established for committee members.
- Dr. Findlay will assume the role of chair of the committee in July 2014.
- Program director's quarterly teleconference, chaired by Giosi DiMeglio, MD, FRCPC, is ongoing.
- National Adolescent Health Rounds occur quarterly. All Adolescent Medicine programs in Canada are invited to present and participate.
- Initiated national academic half-day webinars for residents in Adolescent Medicine Training Programs. These are ongoing.
- The committee now has a designated standing meeting time at the annual Society for Adolescent Health and Medicine.

Adolescent and Young Adult (AYA) Oncology

Chair: Abha A. Gupta, MD, FRCPC

The Working Group in AYA Oncology received final approval to start developing the area of focused competence (AFC-diploma). The working group had several conference calls during which time the membership was established, which includes both pediatric and adult medical oncologists from across the country. The working group successfully identified the top 10 criteria for becoming a successful AYA Oncologist.

The working group will continue working closely with the Royal College to develop the final standards documents and submit program applications for accreditation by 2014 year end.

Adult Echocardiography

Chair: James Tam, MD, FRCPC

The Area of Focused Competence (AFC-diploma) Subcommittee in Adult Echocardiography is delighted to have all of the standards documents approved by the Royal College, and looks forward to reviewing applications from the various universities to set up programs in 2014. The subcommittee will be hosting two web based education sessions to assist in this process, along with streamlining defined Royal College in-training and final in-training evaluation reports. The AFC-diploma subcommittee has decided to delay the process of

defining practice eligibility routes of entry for the time being, and looks forward to further guidance from the Royal College in developing this area.

Aerospace Medicine

Chair: Dave Salisbury, MD, FRCPC

Vice-chair: Andrew Downes, MD

The Area of Focused Competence (AFC-diploma) Working Group in Aerospace Medicine has been hard at work developing all the documentation to move the AFC-diploma beyond preliminary approval to full implementation. In 2013, the working group completed final drafts of the *Competency Training Requirements* (CTR), the competency portfolio and the first draft of the *Standards of Accreditation* (SA). In 2014, the working group plans to complete the rest of the documentation and submit it for approval.

Anesthesiology

Chair: Michael Sullivan, MD, FRCPC

Vice-chair: Hélène Pellerin, MD, FRCPC

Exam committee co-chairs: Sandra Tatsiris, MD, FRCPC (English) and Pascal Labrecque, MD, FRCPC (French)

The Specialty Committee in Anesthesiology has had a great year. The *Objectives of Training* were approved for July 1, 2013 and work continues on the document suite. Candidates approved for the Practice Eligibility Route have progressed to the traditional examination through Route A. The national curriculum is close to publication on the Royal College website. Plans are in place to update the curriculum regularly. The specialty committee approved a Task Force to develop a National Simulation Curriculum and work is progressing well.

Pain Medicine has completed its development as a subspecialty of Anesthesiology and will begin intake of trainees in July 2014. Congratulations to all of the members of the Pain Medicine subspecialty and in particular to Patricia Morley-Forster, MD, FRCPC winner of the Canadian Anesthesiologists Society Gold Medal for her work in this area.

Much of the year has focused on Competence By Design (CBD), the Royal College plan for competency based medical education. The University of Ottawa will pilot a CBD program with intake in July 2015. The specialty committee members have worked hard to educate themselves to participate and lead the specialty in this transformation of postgraduate medical education in Canada.

Child and Adolescent Psychiatry

Chair: John Leverette, MD, FRCPC

Vice-chair: Ruth Russell, MD, FRCPC

Exam committee chair: Nathalie Gingras, MD, FRCPC

2013 continued major strides forward in the subspecialty's development. With additions during the year, a total of nine of 16 potential programs had received approval and others who had been deferred were reworking aspects of their applications for accreditation for resubmission. The subspecialty's first examination was held in September with candidates coming via the Practice Eligibility Route for subspecialists (PER-sub). Some 273 PER-sub applications were approved with 249 candidates sitting the examination supported by a review course in the early summer conducted by our national specialty society (NSS).

Business was conducted through email, web interfaces, teleconferences and two face-to-face meetings - one at the Royal College headquarters and the other in conjunction with the NSS.

2014 will see the completion of the applications for new approval by the remaining university programs, the second examination with numbers continuing to come via PER-sub and work by the specialty committee subcommittees to integrate the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) into the *Objectives of Training* and to anticipate and prepare the subspecialty for competency-based education.

Clinical Immunology and Allergy

Chair: Susan Wasserman, MD, FRCPC

Vice-chair: D.W. Moote, MD FRCPC

Exam committee chair: Chantal Lemire, MD FRCPC

The specialty committee has been hard at work with a number of exciting initiatives. The first "Practice Oral Structure Clinical Examination (OSCE)" at the annual meeting of the National Specialty Society (NSS) was a tremendous success. The 28 participating Fellows advised it was a valuable and positive experience. The committee would like to thank the dedicated faculty who committed their time and expertise. This initiative will continue on a yearly basis.

Ongoing activities include CanMEDS programing at the annual scientific NSS meeting, a bank of documents to share best practices and examination questions, and a revision of the document suite, approved last year, to reflect "Competency-based Education".

A national survey will be conducted to examine current practice patterns and needs. The committee expects this will inform educational content for all training programs.

The chair would like to thank the Royal College and Sharyon Smith for their continued support in all these endeavours. The residency training programs continue to show good recruitment, reflecting the rising interest across the country by trainees and the hard work and commitment of the faculty.

This year the specialty committee will be highly involved in ensuring the quality and success of the above activities.

Clinical Pharmacology & Toxicology

Chair: Shinya Ito, MD, FRCPC

Vice-chair: George Dresser, MD, FRCPC

Exam committee chair: Doreen Matsui, MD, FRCPC

In 2013, the Specialty Committee in Clinical Pharmacology & Toxicology successfully completed updating the *Objectives of Training (OTR)*, the *Specific Standards of Accreditation (SSA)* and the *Specialty Training Requirements (STR)*. The new OTR not only encompasses core skill sets of Clinical Pharmacologists/Toxicologists, but also addresses emerging therapeutics science and clinical practice including pharmacogenetics and clinical toxicology. Concepts and standards outlined in these documents define the current nature of the discipline, allowing the committee to maximize efficiency of the training and bring the field forward. They collectively represent the high standard of the discipline in Canada.

In 2014, the committee will complete discussion on how to create the best training pathway for professionals in population-based therapeutics/toxicology practice, who may work in drug regulatory agencies and institutions dealing with environmental toxicology. This new initiative will be one of the first of its kind worldwide.

Clinician Investigator Program

Chair: Norman Rosenblum, MD, FRCPC

Vice-chair: Bernard Têtu, MD, FRCPC

The Clinician Investigator Program (CIP) Advisory Committee was actively engaged in specialty specific discussions and program review during the past year. Currently, there are 15 accredited programs, three of which are new programs. The committee engaged at a high rate of participation in providing pre- and post-review assessments of programs and in two face-to-face committee meetings. Summative assessment of programs reviewed highlighted the dedication of universities and program directors to the 'CIP mission' and the high quality of educational experiences within programs. The *Specific Standards of Accreditation* were approved. The advisory committee focused on mechanisms to connect CIP trainees nationally via the joint annual meeting of the Canadian Society of Clinical Investigation (CSCI) and the Clinical Investigator Trainee Association of Canada (CITAC). CIP trainees participated in larger numbers in the 2013 CSCI/CITAC annual meeting, specifically in career development seminars designed for postgraduate research-intensive trainees. Looking forward, the advisory committee will continue to support programs, facilitate career development opportunities across programs, and work with the Royal College on further development of educational guidelines.

Critical Care Medicine

Chair: John Drover, MD, FRCSC

Vice-chair: Ron Gottesman, MD, FRCPC

Exam committee chairs: Alison Fox-Robichaud, MD, FRCPC

The specialty committee has been active dealing with the usual annual work of reviewing documents for program accreditation review. The committee finalized the Practice Eligibility Route for subspecialists (PER-sub) documents, allowing clinicians to use this route to challenge the certification examinations. The committee also completed the revision of the standards document suite and expects this to go through final approval and posting in July 2014. The updated *Objectives of Training Requirements* will be used to create the updated blueprint for the examination. The revised *Specialty Training Requirements* with a proposal to eliminate the overlap training between the subspecialty and the entry specialties was presented to the Committee on Specialties (COS). It was noted by the COS to be a major change and as a result will undergo a wide consultation process.

The hot item on the horizon for 2014 is the move towards competency-based training at the Royal College known as Competence By Design (CBD). The committee has identified this as a major opportunity to improve training for the discipline and will be devoting effort to this in 2014. Also, in July 2014 Dr. Gottesman will assume the position as chair of the committee.

Cytopathology

Chair: Michele Weir, MD, FRCPC

Vice-chair: Shahid Islam, MD, FRCPC

The working group transitioned to a formal committee this year, upon completion of the standards documents for the Area of Focused Competence (AFC-diploma) in Cytopathology. After teleconferences and many emails, the working group finalized the *Competency Training Requirements, Competency Portfolio, Standards for Accreditation* and the template for the Application for Accreditation for programs. The working group also completed the mandatory assessment tools for the program including a multisource feedback tool, Laboratory Encounter Cards, logbook, and the Preparation Laboratory and Quality Assurance Final ITERs. After a much needed break, in 2014, the committee will start to review incoming program applications for accreditation and diploma trainee applicants' portfolios. The AFC-diploma committee is in a holding pattern regarding the electronic development of the e-logbooks and e-Portfolio and the Practice Eligibility Route (PER) pathway, pending further developments at the Royal College, so stay tuned!

Sincere thanks to all the committee members, as well as to Mrs. Carrie Morgan, Jolanta Karpinski, MD, FRCPC and Farhan Bhanji, MD, FRCPC, for their outstanding contributions to the AFC-diploma in Cytopathology.

Dermatology

Chair: Richard Haber, MD, FRCPC

Vice-chair: Vicki Taraska, MD, FRCPC

Exam committee chair: Alain Brassard, MD, FRCPC

The specialty committee is pleased to report that all specialty documents are up to date. As well, all nine residency programs in Canada have full accreditation.

In 2013, the committee discussed approval of an area of focused competence (AFC-diploma) in pediatric dermatology submitted by the Hospital for Sick Children in Toronto. The AFC-diploma application was for pediatricians to complete a structured one to two year program in pediatric dermatology. Unfortunately, the committee could not support this proposal. Members objected to pediatricians using the term pediatric dermatologist and felt the program was not comprehensive enough in areas such as dermatopathology and dermatologic surgery. Members also had concerns that the public could have difficulty distinguishing between Royal College trained Dermatologists seeing pediatric dermatology patients and Pediatricians with this diploma designation. The applicant has appealed to the Committee on Specialties (COS). Final adjudication has not yet occurred and this matter is still under consideration by the COS.

The specialty committee continues to discuss the Practice Eligibility Route (PER) for foreign trained dermatologists. The committee supports Route A and feels that all dermatologists should pass the Royal College Fellowship examination in order to practice as a Dermatologist.

Developmental Pediatrics

Chair: Golda Milo-Manson, MD, FRCPC

Vice-chair: Jennifer L. McLean, MD, FRCPC

Exam committee chair: Pam Frid, MD, FRCPC

It has been a busy year for the specialty committee with the revision and approval of the national standards documents. In addition, members arrived at consensus in answering questions posed by the Committee on Specialties (COS) discipline review.

It was a busy year as well for program directors with both the University of Toronto and the University of British Columbia undergoing successful Royal College accreditation reviews. Congratulations to Anne Kawamura, MD, FRCPC, University of Toronto program director and Esias Van Rensburg, MD, FRCPC, University of British Columbia program director.

Under the leadership of Dr. Frid and the exam committee, six candidates wrote the second subspecialty exam last fall.

The specialty committee looks forward to an exciting year ahead as members consider human resources questions posed by the COS, and as the committee begins the journey towards a competency based curriculum for the residency programs. The University of Manitoba will undergo Royal College accreditation review.

A special thank you to the specialty committee administrator, Ms. Carolin St. Denis for her outstanding support to the committee!

Diagnostic Radiology

Chair: Grant Stoneham, MD, FRCPC

Vice-chair: Jose Aquino, MD, FRCPC

Exam committee chair: Robert Abraham, MD, FRCPC

The Specialty Committee in Diagnostic Radiology had another busy and interesting year. Discussion and action occurred related to the following issues:

- The committee made revisions to the *Objectives of Training*, the *Final In-Training Evaluation Report*, and the *Specialty Training Requirements*. These will be submitted to the Royal College for final approval, with adoption planned for July 2014.
- The committee reviewed the process for a regular Committee on Specialties review, and provided direction and guidance for the response. The chair generated a document for final approval by the committee, for submission January 15, 2014.
- The committee generated a specialty specific scope of practice document for review of candidates for the Practice Eligibility Route (PER) for certification. The committee also created a "user's guide" to apply to the document to ensure consistent assessment of candidates.
- Participated in, and supported, the application for recognition of Interventional Radiology as a new subspecialty of Diagnostic Radiology.
- Supported an application for recognition of an area of focused competence in point of care musculoskeletal ultrasound in Rheumatology.
- Started the process for integrating Competence by Design into planning for the future of the discipline.

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Emergency Medicine

Chair: Brian Holroyd, MD, FRCPC

Vice-chair: Glen Bandiera, MD, FRCPC

Exam committee chair: Eric Clark, MD, FRCPC

The specialty committee congratulates the 14 Royal College Emergency Medicine residencies nation-wide on their successes in 2013.

The committee reviewed and updated the *Specific Standards of Accreditation*, the *Objectives of Training*, the *Specialty Training Requirements*, the *Final In-Training Evaluation Report* and the *Pre-survey Questionnaire*. With the upcoming release of CanMEDS 2015 and Competence by Design, the committee will be undertaking a major revision of these documents.

In compliance with the Royal College policy on the Practice Eligible Route, the specialty committee is developing a current scope of practice assessment tool.

The committee is pleased that Emergency Medicine was designated as one of the entry specialties for the subspecialty of Pain Medicine.

The committee participated in and provided input to the "Dual College - Dual Certification" initiative undertaken by the Canadian Association of Emergency Physicians (CAEP). The CAEP, the Royal College and the College of Family Physicians of Canada (CFPC) subsequently agreed to form the "Collaborative Working Group on the Future of Emergency Medicine in Canada". The Royal College designated Jason Frank, MD, FRCPC and Brian Holroyd, MD, FRCPC as its representatives on the working group. The initial teleconference of the working group was held on October 28, 2013.

Endocrinology & Metabolism

Chair: Chris Symonds, MD, FRCPC

Vice-chair: Elizabeth Sellers, MD, FRCPC

Exam committee chair: Elizabeth Cummings, MD, FRCPC

In 2013, the Specialty Committee in Endocrinology & Metabolism focused on, or was in the process of addressing the following:

- After a number of meetings and several revisions of drafts, the committee has successfully completed a full review and update of the document suite. These documents have been approved and were effective as of July 1, 2013.
- The committee met in the spring to discuss the development of a possible national curriculum with ties to the upcoming development of milestones and competencies.
- The committee continues to support a very well-received program-wide annual practice exam. Special recognition for the organization of this exam should go to Jeannette Goguen, MD, FRCPC and Breay Paty, MD, FRCPC.
- The Specialty Committee in Endocrinology & Metabolism wishes to highlight that resident applications across the country to our 12 adult and seven pediatric endocrinology programs continues to increase every year- a tribute to the hard work of the faculty and program directors.

Forensic Pathology

Chair: Michael Shkrum, MD, FRCPC

Vice-chair: Simon Avis, MD, FRCPC

Exam committee chair: Thambirajah Balachandra, MD, FRCPC

A Forensic Pathology subcommittee composed of the chair of the specialty committee and representatives from the three accredited residency programs met to discuss:

- Development of a national curriculum
- An outline of competencies for Forensic Pathology residents and timelines for achievement of training milestones during their one year of training

These items will be discussed at a March 2014 meeting of the specialty committee.

The Specialty Committees in Anatomical Pathology and General Pathology agreed that its representatives meet with the Forensic Pathology chair to discuss autopsy competencies. This subcommittee prepared a detailed outline of pre-autopsy, autopsy and post-autopsy competencies. This document will now be vetted by the Anatomical Pathology and General Pathology committees.

The next challenge will be the implementation and evaluation of these competencies for Forensic Pathology, Anatomical Pathology and General Pathology residents in the context of the Royal College framework for competency-based medical education.

Forensic Psychiatry

Chair: Gary Chaimowitz, MB, ChB, MBA, FRCPC

Vice-chair: Brad Booth, MD, FRCPC, DABPN (Forensic Psychiatry)

Exam committee chair: John Bradford, MB, ChB, DPM, FFPsych, MRCPsych, DABPN, DABFP, FRCPC, FRCPsych, FACPsych, FAPA

The first examination in Forensic Psychiatry was held in September, heralding a new era in Forensic Psychiatry in Canada. Over 100 psychiatrists wrote, and with the examination results in, the discipline now has the first cadre of Royal College certified Forensic Psychiatrists in Canada. This was the result of a momentous task undertaken by numerous people over the past many years, whose hard work and commitment the committee acknowledges.

The committee anticipates it will be reviewing further training program applications in 2014. As of this time, four programs have been approved for training.

The liaison activities continue with active communication with Child and Adolescent Psychiatry and Geriatric Psychiatry around common issues in training and potential future areas of focused competence disciplines. An area of interest has been and will be the committee's work in the area of scope of practice for Child and Adolescent Forensic Psychiatry. The Specialty Committee in Forensic Psychiatry along with the other Psychiatry subspecialty committees continues to work on refining the Practice Eligibility Route for subspecialists.

The specialty committee would like to thank the Royal College and Fellows for allowing the committee to serve them and the subspecialty.

Gastroenterology

Chair: Winnie Wong, MD, FRCPC

Vice-chairs: (Adult) Sylvain Coderre, MD, FRCPC and (pediatrics) Catherine Walsh, MD, FRCPC

Exam committee chair: Connie Switzer, MD, FRCPC

The committee welcomed several new members: Dr. Walsh as vice-chair (Pediatrics), Sharyle Fowler, MD, FRCPC (region 2), and Sunil Patel, MD, FRCPC (region 5). A vice-chair (Pediatrics) position has been added to ensure appropriate pediatric representation on the committee.

An Area of Focused Competence (AFC-diploma) in Hepatology was approved. An AFC-diploma application in solid organ transplant is currently being reviewed.

The chair would like to thank the exam committee for their hard work. 2013 saw an unprecedented number of candidates, 73 in total, presenting for the exam.

The chair would also like to thank the committee members for their hard work and timely program reviews with the extra layer of complexity related to the accreditation pilot project.

With enthusiastic support from the two intrepid vice-chairs, Gastroenterology will strive to become an early adopter of Competency Based Medical Education (CBME) and CanMEDs 2015. The committee is working on a pilot project to create milestones for three focused areas: endoscopy, nutrition, and hepatology.

For all the specialty committee and exam committee members completing their term in 2013, a very heartfelt thank you for the hard work and dedication.

General Internal Medicine

Chair: Sharon E. Card, MD, FRCSC

Vice-chair: Narmin Kassam, MD, FRCSC

Exam committee chair: Bert Govig, MD, FRCSC

The Specialty Committee in General Internal Medicine finalized its document suite in December 2012 which allowed new programs to start applying in January 2013. The specialty committee is very pleased that eight universities have newly approved subspecialty programs in General Internal Medicine and anticipates at least six more applications in late 2013 through to spring 2014.

The first examination will be held in September 2014. The examination committee under the able and energetic guidance of Dr. Govig has been working extremely hard on the first examination which will be a written short answer question examination.

Access to the examination will be both through the traditional residency route and the Practice Eligibility Route for subspecialists (PER-sub). The specialty committee completed the documentation to enable PER-sub applicants to apply by June 2013 and is currently reviewing applications.

2014 is predicted to be busy not only with the documentation review for applications and PER-sub but as the committee prepares for the initiation of the competence by design project.

The chair thanks the members of the specialty committee for their continued passion, insight, commitment and stewardship of our profession.

General Pathology

Chair: Allam Shawwa, MD, FRCPC

Vice-chair: Tariq Aziz, MD, FRCPC

Exam committee chair: Ann Guzowski, MD, FRCPC

In 2013, the specialty committee met four times. The focus was to update the *Specialty Training Requirements* and to develop a response to the Committee on Specialties focused review. The specialty committee continues to discuss the possibility of an alternate pathway for Medical Biochemistry as a subspecialty of General Pathology. The pre-survey questionnaire was reviewed.

The General Pathology curriculum for manager was developed and the committee continues to work on the molecular and autopsy curriculums. The specialty committee met with the Anatomical Pathology committee to find common grounds in postgraduate years one and two. The committee helped in the establishment of an Area of Focused Competence in Cytopathology. There is now a special interest group in General pathology under the Canadian Association of Pathologists. This is to help promote the specialty.

In 2014, the committee will be working on the proposal for a name change to anatomical and clinical pathology. The name change is to better define a general pathologist. The term "general pathologist" is not clear and has a limited meaning to the public and medical colleagues.

The specialty committee continues to discuss ways of promoting the specialty with the postgraduate deans and pathology chairs.

General Surgery

Chair: Eric Webber, MD, FRCSC

Vice-chair: David Pace, MD, FRCSC

Exam committee chair: Brock Vair, MD, FRCSC

This past year has been very busy for this specialty committee. The committee met twice during the year and participated in the one day General Surgery Summit hosted by the Royal College in May. The Summit included a broad range of participants representing the breadth of General Surgery in Canada, as well as leaders in related disciplines and international guests. The recommendations arising from the summit have provided the specialty committee with clear guidance on future directions for residency training in General Surgery. The committee's first priority is defining the *Objectives of Training (OTR)*. A subcommittee has been created to provide to draft revised OTR for the next meeting in February 2014.

In addition, seven General Surgery residency programs underwent accreditation surveys in 2013, and the voting members have been busy providing specialty specific guidance to the surveyors and making recommendations based on the survey reports.

Geriatric Medicine

Chair: Terumi Izukawa, MD, FRCPC

Vice-chair: Laura Diachun, MD, FRCPC

Exam committee chair: Janet Kushner Kow, MD, FRCPC

The Specialty Committee in Geriatric Medicine met twice this year. The document suite was revised to clarify one issue and the committee began the process of gradual review and updating by creating a "parking lot" version. Voting members participated in the accreditation of University of Toronto, University of Alberta, Western University and University of British Columbia. The University of Calgary's program was reactivated. A successful exam was run, allowing for an increase in the number of Royal College certified geriatricians by almost five per cent.

In 2014, the committee will begin looking at scope of practice in preparation for the Practice Eligibility Route for subspecialists (PER-sub) and start to work on milestones of competency in preparation for CanMEDS 2015. Program reviews will continue including the unique "Réseau" program at Universities of Montreal, McGill, Laval and Sherbrooke. Most importantly, the new chair, Dr. Diachun will take the lead of the committee in July 2014.

Geriatric Psychiatry

Chair: Melissa Andrew, MD, FRCPC

Vice-chair: Catherine Shea, MD, FRCPC

Exam committee chairs: Susan Lieff, MD, FRCPC and Francois Rousseau, MD, FRCPC

While many trainees began a two-year program in 2012, two received credit for previous training experiences in Psychiatry that were consistent with the *Specialty Training Requirements*, and were able to write the final written examination. The inaugural subspecialty examination took place in September. The vast majority of candidates accessed the examination via the Practice Eligibility Route for subspecialists (PER-sub). The specialty committee devoted considerable time to reviewing applications via the PER-sub, due, in part, to the considerable variability of practice settings and scope of practicing Geriatric Psychiatrists prior to subspecialty recognition.

A second annual national exam review course was held at the Canadian Academy of Geriatric Psychiatry (CAGP) Annual Scientific Meeting, with approximately 120 participants. A small-group learning version followed, with 41 learners presently enrolled in biweekly, in-depth study sessions online.

Plans for the upcoming year include supporting the writing of applications to expand the array of new programs available. Existing programs will undergo new program accreditation reviews. The first examination results will be analyzed, and new test items continue to be generated. The specialty committee will continue to participate in advocacy efforts to address the lack of sustained funding commitments for training positions, which has hindered the pace of expansion of the subspecialty.

Gynecologic Oncology

Chair: James Bentley, MBChB, FRCSC

Vice-chair: Prafull Ghatage, MD, FRCSC

Exam committee chair: Stéphane Laframboise, MD, FRCSC

During the last year, the document suite for Gynecologic Oncology was revised and approved by the voting members; it is currently under review by the Royal College.

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The discipline had a regular review by the Committee on Specialties and several recommendations were made. A focused review will be submitted for spring 2014. In view of the recommendations made, the committee has instituted two yearly meetings held in conjunction with the Society of Gynecologic Oncology of Canada. During recent meetings there has been wide discussion around a review of physician resources in the subspecialty.

During 2014, the committee will focus on developing the Practice Eligibility Route for subspecialists (PER-sub) documents.

Gynecologic Reproductive Endocrinology & Infertility (GREI)

Chair: Togas Tulandi, MD, FRCSC

Vice-chair: Gillian Ruth Graves, FRCSC

Exam committee chair: Gillian Ruth Graves, FRCSC

Members of the committee have been concerned that some physicians are practicing advanced assisted reproductive technology including in-vitro fertilization without proper training. This is a poor medical practice that can lead to complications including ovarian hyperstimulation syndrome, injury to internal organs and even death. The committee relayed its concerns to the colleges of medicine across Canada. The responses have been positive.

The specialty committee would like to synchronize the duration of fellowship with other obstetric and gynecology subspecialties in Canada, and propose to delete the phrase "A maximum of one year of which may be undertaken at the third or fourth year residency level during training for Certification in Obstetrics and Gynecology" from GREI's training requirements. Accordingly, the committee requested the Committee on Specialties (COS) eliminate this double counting. COS identified the request as *major* in nature and will conduct a national consultation of stakeholders and will review the results at the 2014 COS meeting.

All Canadian programs in GREI were accredited in 2013.

The committee will explore the Practice Eligibility Route for subspecialists in 2014.

Hematological Pathology

Chair: Marciano Reis, MD, FRCPC

Vice-chair: Kate Chipperfield, MD, FRCPC

Exam committee chair: Kate Chipperfield, MD, FRCPC

The specialty continues to attract a good number of residents. There has been a stable number of candidates for the certification examination and all Canadian trainees have been successful in finding employment.

The discipline specific training documents are fully up to date, and all regions are represented on the committee.

Hematology

Chair: Darrell White, MD, FRCPC

Vice-chair: Eugenia Piliotis, MD, FRCPC

Exam committee chair: Lynn Savoie, MD, FRCPC

The Specialty Committee in Hematology continues to be well engaged having met in Ottawa in February as well by teleconference in the summer.

Rates of participation in accreditation reviews continue to be excellent. Nationally, the training programs are felt to be of high quality with few problematic weaknesses. The committee works closely with the Hematology exam committee and also interacts frequently with the specialty committees in Hematological Pathology and Pediatric Hematology/Oncology. The committee has had a close working relationship with the Canadian Hematology Society with improved representation in both directions. Area of Focused Competence (AFC-diploma) activity continues to be reviewed and discussed. The AFC-diploma Committee in Transfusion Medicine remains active and the Hematology specialty committee chair participates in this committee. As well, the AFC-diploma application process for thrombosis and vascular medicine continues to move forward positively.

Finally, trainees have been performing well on the specialty exam. The exam format has changed slightly with digitalized images used in place of glass microscope slides for the past two exams.

Infectious Diseases

Chair: Andrew Morris, MD, FRCPC

Exam committee chair: Geoffrey Taylor, MD, FRCPC

Areas of particular attention in 2013 (and moving forward to 2014) include:

- reviewing the document suite;
- Human Resources for Health (HRH); and
- development of a national curriculum

Infectious Diseases has continued to evolve over the past number of years. More and more physicians are partaking in activities that were not previously considered an important part of the discipline including outpatient parenteral antimicrobial therapy, viral hepatitis management, antimicrobial stewardship, infection prevention and control, and others. Because of the rather limited time available for training, consideration is being given to attenuating the time spent on microbiology rotations. Consultation and proposed modifications will be discussed in 2014.

Consistent with the Royal College's interest in HRH, the committee explored the issue of employment following training. The committee discovered that over the past three years, 77 physicians (excluding those funded independently or from foreign services) have completed training in Canada with 38 per cent of these physicians trained in pediatric Infectious Diseases. Fifty six per cent are pursuing additional training, with 65 per cent of adult and 39 per cent of pediatric Fellows doing additional training. Ten out of the 17 pediatric Fellows not pursuing additional training do not have full-time positions.

Internal Medicine

Chair: William Coke, MD, FRCPC

Vice-chair: James Nishikawa, MD, FRCPC

Exam committee chairs: Rose Hatala, MD, FRCPC, Daniel Panisko, MD, FRCPC, and Isabelle Hébert, MD, FRCPC

The specialty committee approved the revised training requirements for residents completing a fourth year in Internal Medicine. The committee looked at developing competency based training goals, objectives, curricula and related new evaluation methods in response to CanMEDS 2015 and Competence by Design (CBD). As part of the process, the committee established a working group in collaboration with the Canadian Association of Internal Medicine Training Program Directors (CAIMPD), with the first workshop tentatively scheduled for June 2014.

The committee participated with the Medical Council of Canada and the provincial registrars to develop national standards to assess medical specialists trained outside Canada through the National Assessment Collaborative Practice Ready Assessment (NAC PRA) project. The committee has also been working to finalize a Practice Eligibility Route in Internal Medicine, for determining if medical specialists already in practice in Canada can become eligible for certification either through the traditional examinations, or an alternative evaluation process yet to be established.

The committee reviewed the ongoing shortage of medical specialists, particularly general internists, outside the major centres across the country. The chair will undertake a review of physician resources across Canada based on data from the Canadian Medical Association Master File and CAPER, to identify ongoing trends.

Medical Biochemistry

Chair: Yves Giguère, MD, FRCPC

Vice-chair: Andre Mattman, MD, FRCPC

Exam committee chair: Murray Potter, MD, FRCPC

The specialty committee finalized the restructuring of the specialty training program. The *Specific Standards of Accreditation (SSA)*, *Objectives of Training*, the *Specialty Training Requirements*, and the *Final In-Training Evaluation Report* were revised in order to reflect the new reality of the training program with three years of Internal Medicine or Pediatrics followed by two years of laboratory training. Residents are entering the new curriculum as of July 2013.

The specialty committee is following the impact of the new training program on the number of candidates applying to the specialty, and eventually to Medical Biochemistry as a subspecialty of Internal Medicine or Pediatrics.

The main challenge of the coming years will be to monitor the transition to evaluate the success of the restructuring of the discipline.

In 2014, the committee will focus on an area of focused competence in molecular diagnostics in collaboration with other laboratory specialties.

The COS will conduct a focused review of the transition of the training program in 2014.

Medical Genetics

Chair: Micheil Innes, MD, FRCPC

Vice-chair: Bernie Chodirker, MD, FRCPC

Exam committee chairs: François Bernier, MD, FRCPC

The Specialty Committee in Medical Genetics met for one day in Ottawa in the spring and during the Canadian College of Medical Geneticists (CCMG) meeting in Toronto in November. The remainder of the committee business was conducted by email. The committee is pleased that all training programs continue to have full accreditation. A major accomplishment in 2013 was continued work on the Practice Eligibility Route and the discipline training documents continue to be refined. A major focus of the committee for the next year is a continued emphasis on implementing competencies related to genomics and genomic medicine into training documents. The specialty committee in collaboration with the "Care for Rare" research consortium is also working on new educational initiatives related to genomic medicine. Issues related to human resource needs in Medical Genetics will remain an important topic for further consideration in 2014.

Medical Microbiology

Chair: David Haldane, MB, FRCPC

Vice-chair: Marie Louie, MD, FRCPC

Exam committee chair: Paul Van Caesele, MD, FRCPC

The committee revised the *Final In-Training Evaluation Report* and the *Pre-survey Questionnaire*. These two documents will be in use in 2014. The scope of practice document for the Practice Eligibility Route process was reviewed.

Two residency training programs underwent evaluation using the new format during 2013. Both were exempt from on-site surveys after review of the documentation.

The examination committee has suggested a number of changes to the examination, with the adoption of an Objective Structured Clinical Examination (OSCE) format. There has been discussion of the practical component of the exam. While it may be merged into the OSCE component, there are reservations about discontinuing it. Discussions are ongoing.

The specialty committee is very concerned about the findings of the Royal College employment report that indicates that recent graduates of Medical Microbiology residency training programs are having employment issues. The committee will conduct a survey of program directors to ascertain the number of graduates that are being impacted in 2014.

Competence based training has been proposed for the specialty and milestones will need to be developed. Further discussion is required on how to implement in the specialty and the role of the ePortfolio.

Medical Oncology

Chair: Scott Berry, MD, FRCPC

Vice-chair: Scott North, MD, FRCPC

Exam committee chair: Piotr Czaykowski, MD, FRCPC

The specialty committee was very happy to welcome several new members to the committee this year: Erin Powell, MD, FRCPC (Memorial University, new program), Vincent

Castonguay, MD, FRCPC (Laval University), Nazik Hammad, MD, FRCPC (Queen's University), and Scott Owen, MD, FRCPC (McGill University).

2013 was an extremely busy year with three of the largest programs in the country going through the accreditation process, and an application for a new program. Despite the heavy workload, the voting members remained actively engaged and were enthusiastic participants in the accreditation process.

In 2013, the committee expanded the annual in-person meeting to one-and-a-half days to allow for more fulsome discussion on key issues. A substantial part of the meeting was devoted to competency based medical education (CBME). The specialty committee is keen to be at the forefront of integrating competency based medical education into our specialty training. A subcommittee CBME was launched and met regularly through the year to develop Medical Oncology milestones. Their current goal is to have a pilot project in competency based medical education for interested training programs ready for launch by July 2014.

The specialty committee updated the suite of specialty specific documents. This has ensured that these documents accurately reflect the changes we see in our continuously evolving subspecialty.

The committee was involved in the development of the new Area of Focused Competence (AFC-diploma) in Adolescent and Young Adult Oncology with Dr. North being a key member. The committee participated in the final review and endorsement of this new program.

In summary, the Specialty Committee in Medical Oncology is very proud of the excellent engagement of the members and a very successful and productive year.

Neonatal-Perinatal Medicine

Chair: Aaron Chiu, MD, FRCPC

Vice-chair: Harish Amin, MD, FRCPC

Exam committee chair: Brian Simmons, MD, FRCPC

The specialty committee revised the training requirements in response to the changing needs of the subspecialty. The training requirements have a renewed focus on the clinical, procedural, and technological aspects of neonatology. The revised contents are detailed in the new Royal College documents for the subspecialty which will be implemented for July 1, 2014, once final approval is granted.

The 10th Annual Neonatal Oral Structured Clinical Examination (OSCE) was held in April. For the first time ever, all trainees undertook the OSCE at the same site with concurrent French and English exam tracks. The annual OSCE demonstrated the high degree of collaboration amongst the training programs and program directors.

As a result of the tremendous work by faculty and members of the specialty committee, the Royal College Committee on Specialties granted Neonatal-Perinatal Medicine full approval during its review of the subspecialty this year.

Finally 2014 will be a transitional year in leadership. Dr. Simmons, chair of the exam committee, completes his term and will be replaced by Alixe Howlett, MD, FRCPC on January 1, 2014. Dr. Amin will replace Dr. Chiu as chair of the specialty committee on July 1, 2014.

Nephrology

Chair: Euan Carlisle, MD, FRCPC

Exam committee chair: Suneet Singh, MD, FRCPC

In 2013, the revision of the Nephrology *Final In-Training Evaluation Report* was completed, providing better alignment with the goals and standards of training. The main topic discussed at the 2013 Nephrology specialty meeting was the upcoming switch to competency-based education, and this will continue to be a focus over the next few years.

The creation of an Area of Focused Competence (AFC-diploma) for solid organ transplant is an important issue for many Nephrologists specializing in kidney transplantation; the Specialty Committee in Nephrology has indicated its support for this initiative.

Neurology

Interim Chair: Chris Watling, MD, FRCPC

Exam committee chair: Christine De Meulemeester, MD, FRCPC

The specialty committee has been working to facilitate sharing of information, resources, and curricular tools among Neurology programs in Canada. An Alfresco site has been developed through the Royal College to serve as a repository for these resources. Its success will depend on program directors not only accessing the site and making use of the resources, but also contributing resources and innovations for others to share. In addition, a survey has been developed and distributed to all program directors to explore shared curricular needs across the country. Results are being analyzed and it is hoped that this survey will serve as a guide to direct future collaborative education efforts. The committee will turn its attention in 2014 to the neurology-specific challenges and opportunities presented by the Competence by Design initiative.

An unexpected challenge for 2014 is the recruitment of a new chair. The previous chair, William Fletcher, MD, FRCPC stepped down earlier than expected. The committee is very grateful for Dr. Fletcher's valuable contributions to the vibrancy of Neurology in Canada. Dr. Fletcher leaves large shoes to fill.

Neuroradiology

Chair: Robert J. Sevick, MD, FRCPC

Vice-chair: William F. Morrish, MD, FRCPC

Exam committee chair: Walter J. Montanera, MD, FRCPC

Like other specialties and subspecialties, the Specialty Committee in Neuroradiology is trying to understand how a competency-based curriculum will be implemented. The second cohort of candidates took the certification examination in 2013. The specialty committee is in the process of determining how a significant number of Royal College certified Diagnostic Radiologists who train in Neuroradiology in the United States can become eligible to write the Royal College exam in Neuroradiology. The goal is to have the greatest proportion possible of those entering practice in Canada sit the exam. The committee is also working to support all training programs in upholding the high standards of the Royal College and achieving full accreditation status.

Neurosurgery

Chair: Gary Redekop, MD, FRCSC

Vice-chair: Vivek Mehta, MD, FRCSC

Exam committee chair: John Hurlbert, MD, FRCSC

The specialty committee enjoys a high level of engagement and participation on the part of all members, with excellent attendance at the winter meeting in Ottawa at the Royal College and a summer meeting held in conjunction with the annual congress of the Canadian Neurosurgical Society. The specialty had significant representation in the Duty Hours forum held in the spring in Ottawa, and will also participate in the upcoming Physician Employment Summit.

This past July saw the second Boot Camp for first year residents, with residents and faculty from across Canada gathering in Halifax for a mix of didactic, simulated, and hands-on sessions covering the basics of what beginning neurosurgery residents need to know.

The specialty committee had its first applicant via the Practice Eligibility Route, and has developed a scope of practice document to assist in the assessment of potential candidates. A working group has been established to begin planning for the Milestones Project initiative, and continue to engage in discussions regarding entry into Critical Care Medicine for residents who have completed training in Neurosurgery.

Obstetrics and Gynecology

Chair: Amanda Skoll, MD, FRCSC

Vice-chair: Wylam Faught, MD, FRCSC

Exam committee chair: Marie-Jocelyne Martel, MD, FRCSC

The specialty committee moved a number of projects forward in 2013. First, the committee completed the Practice Eligibility Route (PER) assessment document for practitioners seeking entry to Royal College examinations through PER. This has now been accepted by the Royal College.

The committee oversaw the accreditation of four programs across the county, including participation in the accreditation pilot conducted at the Universities of British Columbia, McGill, and Toronto. Training programs across the country are strong and robust, and led by dynamic program directors.

The major priority for 2014 will be exploration of the curriculum in terms of competency based medical education, as mandated by the Royal College's 'Competence by Design' project. This will have major implications for postgraduate training. The committee is partnering with the Association of Academic Professionals in Obstetrics and Gynecology (APOG) to develop this curriculum and looks forward to this exciting work.

The committee will also be focusing on maximizing communication with the Society of Obstetricians and Gynecologists of Canada (SOGC) and with APOG and has formalized representation from those organizations on the committee.

Orthopedic Surgery

Chair: Tim Carey MD FRCSC

Vice-chair: Joel Werier MD FRCSC

Exam committee chairs: Karl-Andre Lalonde MD FRCSC and Ron El-Hawary MD FRCSC

The specialty committee has had a productive year. As well as the routine tasks of tending to documentation and ensuring continued review and improvement of specialty education, the committee has had fruitful discussions regarding the increasing problem of under-employment of graduates. Program directors have discussed options including enrollment decreases. The specialty committee is working closely with the Canadian Orthopedic Association to examine all the factors related to job positions across the country, and continues to advocate for recognition of the disconnect between timely access to musculoskeletal care and resource allocation.

The pilot competency based training program in orthopedics at the University of Toronto has been followed with interest by the committee, and the University of Toronto program has generously shared knowledge and tools they have had success with. Interest in applying some of these training modifications to other Orthopedic programs has led to the development of a subcommittee tasked with making an application to the Fundamental Innovations in Residency Education program, and it is anticipated this will be submitted in the upcoming year.

Otolaryngology-Head and Neck Surgery

Chair: Brian D. Westerberg, MD, FRCSC

Vice-chair or chair-elect: Wayne Matthews, MD, FRCSC

Exam Committee chairs: Marie-Jo Olivier, MD, FRCSC and Marty Corsten, MD, FRCSC

Highlights of the year's activities include:

- All programs are currently Accredited with Regular Review.
- Competency Based Medical Education (CBME) improves training and assessment of residents in learning surgical skills necessary to perform tympanomastoidectomy and endoscopic sinus surgery and continues to be explored using a Delphi process to determine milestones in training. This is expected to be completed in 2014.
- Human Resources for Health (HRH) data is being collected by the Royal College, the specialty committee and by the Canadian Society of Otolaryngology-Head and Neck Surgery (CSOHNS), with special consideration to the number of training positions necessary in Canada.
- Both the specialty committee and the CSOHNS recognize the value of international electives and training objectives, and principles for such electives have been developed to ensure both educational value as well as resident safety.
- Recognizing the need for stereoscopic vision when performing procedures under an operating microscope, the specialty committee has reviewed data surrounding mandatory visual assessment as part of the CaRMS process for applying to the discipline. Some programs have instituted such a policy already, and it is expected others will follow.
- Dr. Matthews will assume the role of chair of the specialty committee in July 2014.

Pain Medicine

Chair: Patricia Morley-Forster, MD, FRCPC

Vice-chair: Dan Peter Gray, MD, FRCPC

The Specialty Committee in Pain Medicine has progressed well through 2013 and three centres plan to begin intake of trainees for the two year program in July 2014. The committee is pleased to be working towards offering the first examination September 2016. The examination committee will be established in 2014.

The committee has also developed Practice Eligibility Route for subspecialists (PER-sub) documentation as an alternate route for eligibility for examination.

With the addition of program directors, the committee membership is continuing to grow. To date, 11 university centres across Canada have appointed program directors.

Palliative Medicine

Chair: Deborah Dudgeon, MD, FRCPC

2013 was an exciting year for Palliative Medicine in Canada. In October, the Royal College Council approved recognition of Palliative Medicine as a “two year subspecialty with multiple entry routes” and that “the Palliative Medicine subspecialty designation be allowed for any physician who can demonstrate the necessary prerequisite competencies for the discipline as defined by the specialty specific training documents.” A working group is being formed to oversee the initial stages of implementation. There are currently 13 fully accredited Palliative Medicine Programs across the country. These are programs within the Conjoint Palliative Medicine Program jointly accredited by the College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada. The one-year conjoint program will continue to exist at least until the subspecialty is in place.

Pediatric Emergency Medicine

Chair: Gina Neto, MD, FRCPC

Vice-chair: Karen Black, MD, FRCPC

Exam committee chair: Anna Karwowska, MD, FRCPC

The Specialty Committee in Pediatric Emergency Medicine has completed the revisions of the national standards documents and they have been finalized and approved. All of the programs are accredited with regular survey. The examination process continues to run well.

The committee has supported the development of a national Pediatric Emergency Medicine simulation curriculum and has engaged program directors and simulation leaders across the country to work on this initiative.

Preliminary work has begun on the development of milestones for Pediatric Emergency Medicine and this will be an increasing focus of the committee moving forward. The guidelines for the Practice Eligibility Route for subspecialists in Pediatric Emergency Medicine will be developed including the scope of practice document for the specialty.

Pediatric Hematology/Oncology

Chair: David Dix, MBChB, FRCPC

Vice-chair: Sheila Weitzman, MB, FRCPC

Exam committee chair: Donna Johnston, MD, FRCPC

The specialty committee focused much of its efforts this year on revising the Pediatric Hematology/Oncology document suite. All documents received final approval in 2013. These documents are central to setting the standards for competence and training in the discipline, and are a key component to ensuring that specialty training reflects current practice.

In addition, the committee worked with a number of special-interest groups within the subspecialty to provide support and advice regarding the development of Areas of Focused Competence (AFC-diploma) programs. The "Adolescent and Young Adult (AYA) Oncology" interest group in Canada has, with the full support of the specialty committee, recently received Royal College recognition as an AFC-diploma, and the committee commends this group on their efforts and initiative.

The specialty committee provided on-going support for the examination committee, which continues to successfully deal with the challenges associated with developing an annual examination for a small subspecialty group.

The committee has continued to actively engage program directors across Canada and continues to consolidate its relationship with C17 (our National Specialty Society for Pediatric Hematology/Oncology). The specialty committee is formally represented at and provides an annual report to the C17 Annual General Meeting.

Pediatric Surgery

Chair: Juan Bass, MD, FRCSC

Vice-chair: Grant Miller, MD, FRCSC

Exam committee chair: David Price, MD, FRCSC

Program reviews:

- Post-survey documentation and recommendations for McGill University and University of Toronto Programs (Accredited).
- Pre-survey documentation for University of British Columbia program. (On site survey November 2013).
- McMaster University Accredited as a new program.

Milestones-Competence by Design:

The Specialty Committee in Pediatric Surgery requested to participate in a pilot project for Competence by Design (CBD) and CanMEDS 2015. The CBD Milestone model is happening in the USA. Pediatric Surgery participates in a North American Match for trainee selection. Members thought it was important not to wait until 2015 but to start working on a Canadian system equivalent to the US system to maintain reciprocity. A workshop under the guidance of Jason Frank, MD, FRCPC was organized at the Royal College in November. A representative of the Accreditation Council for Graduate Medical Education (ACGME) was present. Plans to have further meetings are in place. The aim is to have a document by the

summer of 2014 for further analysis by the Royal College and to be modeled by the Royal College's vision for CBD and CanMEDS 2015.

Psychiatry

Chair: Paul Dagg, MD, FRCPC

Vice-chair: Nathalie Gingras, MD, FRCPC

Exam committee chairs: Karen Saperson, MD, FRCPC and Sophie L'Heureux, MD, FRCPC

Documentation Review

The pre-survey questionnaire was revised with the goal of greater standardization and objectivity, replacing several narrative sections with tables. The specialty committee has identified further areas in the tables that require clarity. The *Final In-Training Evaluation Report* is currently being reviewed to reflect the updated *Objectives of Training*.

Practice Eligibility Route (PER)

There has been a lot of focus in the past year on developing an alternative assessment process for Psychiatrists working in Canada who are not eligible for the examination as per the PER process approved by Council. At this stage, the exam design is almost done, and the committee will be moving to testing in the New Year with a hope to pilot in 2014.

Examination

The short answer questions (SAQs) have been dropped from the exam due to a lack of discrimination between the SAQs and the multiple choice questions. The exam committee is in the process of transition to new English and French co-chairs.

Public Health and Preventive Medicine

Chair: Jane Buxton, MBBS, FRCPC

Vice-chair: Lawrence Elliott, MD, FRCPC

Exam committee chair: Linda Pinsonneault, MD, FRCPC

All 14 Public Health and Preventive Medicine (PHPM) programs in Canada are fully accredited and 21 candidates sat the Royal College exam in 2013.

The specialty committee submitted revised *Objectives of Training* (OTR) to the Royal College. The new, more detailed, OTR was developed collaboratively with program director input. Changes include increasing the minimum requirement for resident field placements from one year to 18 months. The documents will be further revised with input from the Royal College.

The PHPM program directors had a productive meeting in November 2013 to discuss program issues prior to the specialty meeting.

Radiation Oncology

Chair: Theresa Trotter, MD, FRCPC

Vice-chair: Matthew Parliament, MD, FRCPC

Exam committee chair: Isabelle Roy, MD, FRCPC

The specialty committee continues to have quarterly meetings (two by teleconference) with separate program director quarterly meetings. The two groups meet at the National Specialty Society (NSS) annual meeting.

All thirteen radiation oncology residency training programs continue to be fully accredited.

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The committee worked with the Canadian Brachytherapy Group on part I of the area of focused competence program in brachytherapy. The part I application was approved by the Committee on Specialties (COS) in November. Part II will be considered at the COS meeting in March 2014.

Four candidates submitted a practice eligibility route scope of practice and were approved, indicating eligibility to challenge the certification exam.

A working group headed by Pam Catton, MD, FRCPC and Meredith Giuliani, MD, FRCPC submitted an 'Imaging Curriculum for Radiation Oncology' to the specialty committee in September. This document has been distributed to all training programs. As a result, two working groups were struck to update the radiobiology curriculum and the physics curriculum. A revision to the *Specialty Training Requirements* has been submitted to the Office of Specialty Education.

The specialty committee continues to collaborate with the National Specialty Society on issues related to human resources.

Respirology

Chair: David McCormack, MD, FRCPC

Vice-chair: Lori Whitehead, MD, FRCPC

Exam committee chairs: Paul Hernandez, MD, FRCPC and Bruno Raby, MD, FRCPC

This year, an electronic bulletin board (posted on the Canadian Thoracic Society website) was established where programs can list (and applicants can search for) fellowship training opportunities. This is functioning well with most centers participating and over 20 fellowships listed. The bulletin board will be updated regularly throughout the year.

The committee is monitoring human resources issues carefully and has been tracking the ability of new Respirology graduates to obtain employment as specialists. No problems have been identified; however this will be watched closely with an annual survey.

The exam format will be changing for the 2015 exams. Drs. Hernandez and Raby will be working with the specialty committee in 2014 to effect these changes.

A major issue for training programs is the introduction of Competence by Design. This will have a significant impact on how training programs are structured. This will be discussed at length in 2014 and in detail at the specialty committee meeting in conjunction with the annual Canadian Respiratory conference in Calgary.

Rheumatology

Chair: David Robinson, MD, FRCPC

Vice-chair: Claire LeBlanc, MD, FRCPC

Exam committee chair: Eric Grant, MD, FRCPC

With the able assistance of Royal College staff, the Specialty Committee in Rheumatology held two very productive meetings in 2013. Among the issues addressed was the development of point-of-care musculoskeletal ultrasound as a potential Area of Focused Competence discipline. It is expected an application will go forward in 2014. The coming year will see turnover in both the adult and pediatric exam committee chairs. Elaine Yacyshyn, MD, FRCPC and Shirley Tse, MD, FRCPC will assume these respective positions

taking over from Drs. Grant and LeBlanc whose efforts over the past years are greatly appreciated.

The coming year will also see Rheumatology undergo its Committee on Specialties review and the start of planning for Competency Based Education and CanMEDS 2015.

Sport and Exercise Medicine

Chair: Merrilee Zetaruk, MD, FRCPC

A working group for the new Area of Focused Competence (AFC-diploma) in Sport and Exercise Medicine (SEM) has been formed; members of the group represent each of the primary specialties that are entry routes for SEM: Orthopedic Surgery (Bob McCormack, MD, FRCSC), Emergency Medicine (Bob Foxford, MD, FRCPC and Anita Pozgay, MD, FRCPC), Rheumatology (Claire LeBlanc, MD, FRCPC), Internal Medicine (Mark Roberts, MD, FRCPC), Physical Medicine and Rehabilitation (Deirdre McLean, MD, FRCPC), and Pediatrics (Dr. Zetaruk). The working group has continued to refine the documents, including the *Competency Training Requirements*, evaluation portfolio, and documents for accreditation of individual programs. The documents have been circulated to members of the Canadian Academy of Sport and Exercise Medicine, including fellowship directors and Board members, for review and comments. Once this feedback has been provided, the documents will be finalized. Once the documents are finalized, postgraduate offices will be notified and invited to apply for accreditation of programs.

Surgical Foundations

Chair: Douglas Hedden, MD, FRCSC

Vice-chair: Deepak Dath, MD, FRCSC

Exam committee chair: Ashutosh Singhal, MD, FRCSC

The Surgical Foundations Advisory Committee (SFAC) focused on the development of the *Standards for Surgical Foundations* (SSF). As Surgical Foundations is not an accredited program, the B standards do not apply. To assist programs during accreditation surveys, the SSF were developed, and follow the same basic format as the *Specialty Specific Standards for Accreditation*. The SSF were approved and came into effect on July 1, 2013.

The SFAC is forming a subcommittee to rewrite the specialty documents to follow the competency-based stages and milestones of Competence by Design (CBD). The subcommittee will have its first meeting in May to begin developing the expected competencies and appropriate milestones.

As directed by the Committee on Specialties, the SFAC approached both Ophthalmology and Obstetrics and Gynecology to join Surgical Foundations. Ophthalmology declined but the committee is now working with Obstetrics and Gynecology to finalize the arrangements for them to enter the program.

The SFAC would like to offer the examination more than once a year and are in discussions with the Royal College. The exam committee structure has been altered to make all program directors corresponding members and to truncate the list to only those who have actively participated.

Thoracic Surgery

Chair: Gail Darling, MD, FRCSC

Vice-chair: Richard Bigsby, MD, FRCSC

Exam committee chair: Paul Dubois, MD, FRCSC

The specialty committee had a very active year with four meetings in total. In addition to usual business (documents, accreditation and exams), the issues addressed this year included:

1. Responding to the Committee on Specialties (COS) regarding entry pathways into Thoracic Surgery, the committee revised the entry criteria allowing entry from General Surgery and Cardiac Surgery but stipulated the mandatory training in General Surgery required. A final decision from the COS is pending.
2. The national curriculum was accepted by the specialty committee and has now been translated into both official languages.
3. The committee is considering using CaRMS for resident applications to General Surgery. The committee is in the process of seeking support from programs, and determining financial feasibility.
4. The committee had preliminary discussions on competency based medical education. The committee agreed to start looking at video-assisted thoracoscopic surgery (VATS) lobectomy and tracheal resection.
5. The committee is working to develop a "tool kit" for teaching and evaluating the Intrinsic Roles to share best practices across programs.
6. The committee was asked to consider a proposal for an Area of Focused Competence (AFC-diploma) for solid organ transplant and after due consideration and consultation, recommended that pulmonary transplantation not be included in this proposal.
7. The Thoracic Surgery Boot Camp was held in Toronto, led by Kazu Yasufuku, MD and was open to all residents. The course included hands on training in endobronchial ultrasound transbronchial aspiration (EBUS-TBNA), rigid bronchoscopy, insertion of airway stents and VATS lobectomy. The Boot Camp for 2014 will take place in July in Toronto.

Urology

Chair: Andrew MacNeily, MD, FRCSC

Vice-chair: Serge Carrier, MD, FRCSC

Exam committee chair: Ron Kodama, MD, FRCSC

The main ongoing and contentious challenge of our committee is to define specifically what technical procedures graduates of Canadian Urology residency programs should be competent to perform. Changes in technology, specifically minimally invasive surgery and image guided therapies, as well as improved medical managements and knowledge regarding the natural history of many urological diseases has changed the volume of major surgeries performed at most training centers. Reaching consensus on what graduates should be/are competent to independently perform is difficult. Definitions of competence are vague and currently immeasurable in any standard fashion. It is hoped that with the introduction of competency based medical education, e-case logs and the milestones project, the discipline will make progress in this challenging area of graduate medical education.