



College Notes

The College of Physicians and Surgeons of Prince Edward Island

Spring 2018

Dear Colleagues:

The College office staff is pleased to issue the Spring edition of our *College Notes* as a means of communication with our members. This Newsletter provides a brief summary on some topics that we feel are important.

Our Council members for 2018:

Dr. Gary MacLean, President
Dr. Matt Kutcher, appointed by Government, Vice President
Dr. Rachel Kassner
Dr. Kristian Macdonald
Dr. Roy Montgomery, Acting Registrar
Dr. Jocelyn Peterson
Dr. Paul Seviour
Mr. Neil Robinson, Lay member appointed by Government
Ms. Verna Barlow, Lay member appointed by Government

The Office Staff:

Dr. Cyril Moyse, Registrar
Dr. Geraldine Johnston, Deputy Registrar
Melissa MacDonald, Office Manager
Sherry Glass, Administration Support

New Policies

New and revised Policies and other documents are continually added to the website once approved by Council. Please regularly check our website (www.cpspei.ca). Since our last newsletter we have added/revised the following policies:

- 1). Retention, Access and Transfer of Medical Records- New Policy, April, 2018
- 2). Supervision-Qualifications, Roles and Responsibilities-Revised Policy, February, 2018. Please note that when a physician is under on-site supervision, the supervisor and the supervisee must both be co-located at the same site; the supervisor cannot perform on-site supervision of a physician located in another town/city/building.
- 3). Methadone Treatment for Analgesia and Methadone Maintenance Treatment for Opioid Dependency- Health Canada will soon remove the requirement for an exemption to prescribe methadone for both addiction and analgesia. As a result of this change, these policies are currently being reviewed and will be revised shortly. The CME requirements for prescribing methadone are also being looked at and may be revised. Once the policies have been approved by Council, they will be posted on the website and emailed to the membership.

News

1). Methadone Prescribing

As some of you may be aware, on March 21, 2018, the Government of Canada published in the Canada Gazette, Part II, regulatory amendments that will change the way methadone is regulated under the *Controlled Drugs and Substances Act* (CDSA) and the *Narcotic Control Regulations* (NCR).

In summary, these will allow practitioners to prescribe, administer, sell or provide methadone without applying for and obtaining an exemption under subsection 56(1) of the CDSA. This is for both the treatment of opioid use disorders and for analgesia.

Please be advised that the amendments will come into force on May 19, 2018. More information regarding these can be found at <http://www.gazette.gc.ca/rp-pr/p2/2018/2018-03-21/html/sor-dors37-eng.html>

These regulatory amendments will help Canadians have greater access to a comprehensive array of treatment options.

2). PEI Action Plan to Prevent and Mitigate Opioid-Related Overdoses and Deaths

The provincial Government launched the PEI Action Plan to Prevent and Mitigate Opioid-Related Overdoses and Deaths in October, 2017. Among other things, the new Action Plan calls for collaboration on opioid supply with a formal prescription monitoring program, strengthening prescribing and dispensing practices in the province and reducing diversion of prescribed

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opioids. The Action Plan also calls for better pain management services in the province and physician education on pain management. One next step strategy is to develop and commence implementation of a clinician education and awareness strategy by the spring of 2018. To date, the CPSPEI has not received any word regarding the progress being made by Government on the prescription monitoring program, nor the clinician education and awareness strategy.

The full document on the Action Plan can be found at https://www.princeedwardisland.ca/sites/default/files/publications/web-opioid_action_plan_20oct2017.pdf

3). Federal Cannabis Legislation

The Federal Government is planning to legalize and strictly regulate cannabis. Royal Assent of Bill C45 is targeted for July 2018; however, it is likely that this date will be delayed. Bill C-45, an Act respecting cannabis and to amend the Controlled Drugs and Substances Act, the Criminal Code and other Acts was passed in the House of Commons on November 27, 2017. It was then referred to the Senate and given first reading there on November 28, 2017. The Senate adopted it at a second reading on March 22, 2018 and it has now been referred to the Senate Committee on Social Affairs, Science and Technology. This committee will then report their review and any recommendations back to the Senate. Once it passes a third reading at the Senate, it will be sent back to the House of Commons for review again. When both chambers agree on the final version, it will go to the Governor General to receive Royal assent, after which it becomes law. Once this happens, the provinces and territories then have to enact their legislation for the distribution and sale of cannabis. In addition, the provinces can increase the age limit, lower the possession limit, impose additional requirements on personal cultivation, set zoning restrictions for cannabis related businesses and restrict where and how cannabis may be consumed.

Cannabis for medical purposes will continue to exist to provide access to individuals who have an authorization to use cannabis for medical purposes.

For more information on the new Bill C-45 see <https://www.canada.ca/en/services/health/campaigns/legalizing-strictly-regulating-cannabis-facts.html> Updated Mar 3, 2018.

For more information on the PEI Government's cannabis legislation see the PEI Cannabis Policy Framework at

<http://www.princeedwardisland.ca/en/publication/cannabis-policy-framework> and

<http://www.princeedwardisland.ca/en/information/finance/cannabis-policy-and-legislation?wbdisable=true>

4). Federal MAID Legislation

On December 16, 2017, the Federal Government published draft regulations in the Canadian Gazette, Part I. All Canadians and key stakeholders were given the opportunity to review the proposed regulations and provide written comments by Feb 13, 2018. The draft regulations set out reporting requirements for those authorized to provide MAID (physicians and nurse practitioners) and for pharmacists who dispense medication for assisted dying. Personal data collected will be protected under the federal Privacy Act. Annual reports on MAID will be published from the information collected. The provincial regulatory bodies were invited to a technical briefing and were invited to send their written comments via the Canada Gazette Part I process. The final regulations are expected to be in place by the summer of 2018. Health Canada will begin to produce Annual Reports on MAID in 2019. Until then, interim reports every six months have and will be produced. The first report was issued on April 26, 2017 and is found at <https://www.canada.ca/en/health-canada/services/publications/health-system-services/medical-assistance-dying-interim-report-dec-2016.html>. The second report was issued on Oct 6, 2017 and is found at <https://www.canada.ca/en/health-canada/services/publications/health-system-services/medical-assistance-dying-interim-report-sep-2017.html>.

5). MSPEI Physician Health Program

On April 1, 2018, the Medical Society of PEI launched a new Physician Health Program. This is a milestone for the MSPEI. This program is based out of British Columbia, with Doctors of BC. The program provides completely confidential (and anonymous if desired) access to highly qualified counselors. It offers a 24-hour helpline for those in crisis, and an array of services to improve health and build resiliency. Please contact the MSPEI for more information.

6). New Horizon Addiction Rehabilitation Centers

Two new live-in addiction treatment centers have recently opened in Sydney, Nova Scotia. There is a six-bed facility for women and a separate twelve-bed facility for men. The private clinics offer primarily 45-day programs aimed at opioid, alcohol, cocaine and other substance abuse disorders. For more information: call 902-202-5058, fax-902-270-6234 or visit

www.newhorizonaddiction.ca.

7). Summer Locum Physicians

A reminder to all physicians that if you considering arranging a locum physician for your practise you first need to contact Health PEI, Nadine MacLean, at nmmaclean@gov.pe.ca. There are criteria that must be met prior to approval.

Professional Issues / Education

1). CMPA Publications

Important recent articles in the CMPA Perspective publications for all to read include:

December, 2017: Using electronic record systems with care

How the patient's voice advances safe care
 Chronic care can be improved with skillful communication
 Healthcare directives: what you really need to know

March, 2018: Suspect unlawful activity with prescriptions or medications? Here's how to respond
 College complaints on the rise: Better communication can help
 What to do if you're notified of a College complaint
 Is your patient a woman of reproductive age? Consider pregnancy

2). APMPR Audit

The Atlantic Provinces Medical Peer Review Program is having an external review carried out to assess its governance and to look at the quality and efficiency of the practise reviews. APMPR is seeking support from the three Atlantic provinces currently using APMPR. The CPSPEI is supportive of this endeavor. More information will follow after the audit.

3). Health Product Infowatch

Health Product Infowatch is a monthly Health Canada publication designed to raise awareness and to provide clinically relevant information to healthcare professionals concerning health products and their safety. Each publication includes a recap of health product advisories and summary safety reviews, as well as new health product safety information. The Health Canada Infowatch replaced HC's quarterly Canadian Adverse Reaction Newsletter (CARN) in 2015.

The Health Product Infowatch Publications can be found at: <http://www.hc-sc.gc.ca/dhp-mps/medeff/bulletin/index-eng.php>

Recent information in the Health Product Infowatch publications since our last newsletter:

- Summary Safety Review articles: Paradigm Insulin infusion pump, Breast Implants, Fluconazole, Green Tea Extract-containing NHPs, TactiCath Quartz, Benzodiazepines & Barbiturates, Gelyna (tingolimod), Proton Pump Inhibitors (PPIs), Sedative and anesthetic drugs, Zydelig (idelalisib), Avonex (interferon beta-1a), Barbed (knotless) sutures, Dipeptidylpeptidase-4 inhibitors (arogliptin, linagliptin, saxagliptin & sitagliptin), Jakavi (ruxolitinib), SGLT2 Inhibitors (canagliflozin, dapagliflozin, empagliflozin)
- Information Update: Health products containing mannitol, Breast Implants, Green tea extract-containing NHPs, Mifegymiso (mifepristone & misoprostol), Benzodiazepines & barbiturates, Opioid drugs, Sedative & anesthetic drugs, Epipen,
- Recent Monograph Updates: Clobex shampoo (clobetasol propionate solution 0.05%), Eprex (epoetin alfa), Gilyena (fingolimod), Ofev (nintedanib), Alcaine (pro paracaine hydrochloride)
- Advisories: Alesse 21, Alesse 28, Flintstones Plus Iron Multivitamin for children, Dianeal PD4 1.5% 5L SYSII, Ventolin Diskus (salbutamol), Alysena 21, Alysena 28
- Health Professional Risk Communication: Breast Implants, Green Tea Extract-containing NHPs, Mifegymiso (mifepristone & misoprostol, Alesse 21 & 28, Ofev (nintedanib), Tecentriq (atezolizumab), Erwinase (Erwinase-L-asparaginase)
- Drug Recall: Hydromorphone hydrochloride injection, Dianeal PD4 1.5% 5L SYSII, Ventolin Diskus (salbutamol), Carbocaine 2%, Alysena 28
- Medical Device Information Update: Easycare hospital bed, Barbed (knotless) sutures, Fentanyl-Detection Teststrips, TactiCath Quartz, Breast Implants, Paradigm insulin infusion pump

4) Notice from IWK Department of Pathology and Laboratory Medicine

The IWK Department of Pathology and Laboratory Medicine recently contacted the College office requesting we inform our members that the Maternal Fetal Medicine testing requisitions have been revised. The old requisitions will no longer be accepted as of July 1, 2018. For more information please email IWK.Laboratory@iwk.nshealth.ca

5) Resources regarding Opioid Prescribing

(i) The Opioid Wisely Campaign

Choosing Wisely Canada has launched 'Opioid Wisely', a campaign that encourages thoughtful conversation between clinicians and patients to reduce harms associated with opioid prescribing. The Opioid Wisely Campaign launched on March 1, 2018 with the support of over 30 participating organizations representing doctors, dentists, pharmacists, nurse practitioners, other health professionals, as well as patients and their families. Central to the campaign is a set of 14 specialty-specific recommendations for when the use of opioids should not be first-line therapy. These recommendations cover eleven different clinical specialties, with more recommendations from other specialties to be released over the coming months. The campaign also includes information resources to help patients have informed conversations with their clinicians about safe options for managing pain.

The Opioid Wisely campaign was initiated at the encouragement of the Pan-Canadian Collaborative on Education for Improved Opioid Prescribing. The Opioid Wisely Campaign can be found at <https://choosingwiselycanada.org/campaign/opioid-wisely/>.

(ii) Principles of Opioid Management

This resource, which comes from Fraser Health in British Columbia, will be added to our new Methadone Standard. It is a very good resource for prescribing opioid medication for analgesia in palliative care and includes prescribing information on methadone. It is found at <https://www.fraserhealth.ca/media/16FHSymptomGuidelinesOpioid.pdf>.

(iii) Centre for Effective Practice: The Opioid Tapering Template

The Centre for Effective Practice (CEP) is a federally-incorporated, not-for-profit organization founded in 2004 by the University of Toronto's Department of Family and Community Medicine. The CEP aims to close the gap between evidence and practice for healthcare providers. The CEP gives providers what they need to deliver the best care to their patients by engaging providers throughout the CEP processes to create evidence-based solutions that can be adapted into their local contexts. The CEP has developed a new clinical tool: The Opioid Tapering Template. This tool was developed by the CEP, in collaboration with the Ontario College of Family Physicians and the Nurse Practitioners' Association of Ontario, as part of the Knowledge Translation in Primary Care Initiative. It is based on the latest clinical guidelines and consultations with stakeholders and end users. The tool aims to support primary care providers with reducing opioid dosages safely and effectively. The Template is designed to assist providers with creating tapering plans with their patients and adjusting those plans as their patients' needs change due to pain, function and withdrawal symptoms. Throughout the tool, providers will find helpful talking points, fillable forms and links to relevant resources to further guide their approach. The new Opioid Tapering Template can be found at <https://thewellhealth.ca/opioidtaperingtool>.

The CEP has a number of other tools available on their website including: Adult Mental Health and Addictions, Antipsychotics and Dementia, Childhood Obesity, Chronic Insomnia, Chronic Non-Cancer Pain, Depression, Diabetes, End of Life/Advanced Care Planning, H1N1, Influenza Immunization, Low Back Pain, Medical Assistance in Dying, Neck Pain and Headache, Opioid Manager, Osteoarthritis, Poverty, Preconception, Secondary Stroke Prevention, Youth Mental Health. These tools can be found at <https://thewellhealth.ca/tools/>

(iv) Opioids: We can do better

This is a CMPA document from 2016, found at

http://www.cmpa-acpm.ca/static-assets/pdf/about/annual-meeting/com_16_opioid_We_can_do_better-e.pdf

(v) Pan-Canadian Trends in the Prescribing of Opioids, 2012-2016

This document, published in 2017, comes from the Canadian Institute for Health Information (CIHI). It is an analysis, using community-based prescription data, reporting on the number of people receiving opioid prescriptions and the quantity of opioids prescribed in Canada over the 5-year period 2012-2016. It is an informative read for those interested in recent trends in opioid prescribing. It can be found at

https://secure.cihi.ca/free_products/pan-canadian-trends-opioid-prescribing-2017-en-web.pdf

In addition, this document followed two previous documents also published by CIHI on the opioid problem in Canada: Hospitalizations and Emergency Department Visits Due to Opioid Poisoning in Canada (November 2016) found at

https://secure.cihi.ca/free_products/Opioid%20Poisoning%20Report%20%20EN.pdf and

Opioid-Related Harms in Canada (September 2017) found at

https://secure.cihi.ca/free_products/opioid-harms-chart-book-en.pdf

Extended Relationships

1). Federation of Medical Regulatory Authorities of Canada (FMRAC)

The FMRAC AGM will be held June 9-11, 2018 at the Delta Hotel in Charlottetown. This AGM will celebrate the 50th anniversary of FMRAC! The theme of this year's meeting is "Advancing Public Protection Through Risk-Based Regulation".

There are 3 education sessions during this meeting: Session I-Integrated Risk Management, Session II-FMRAC's Integrated Risk Management System (FIRMS), Session III- Physician Factors.

Any College member can attend this event and the educational sessions are CME accredited. The registration fee (includes open meetings, educational sessions, meal functions, 2 receptions and the President's dinner) is \$1000.00 and the guest fee is \$125.00 (includes 2 receptions and 1 dinner). Please consider coming to this year's meeting in Charlottetown!

2018 Survey of Canadian Family Physicians about treatment of patients with chronic pain

FMRAC has asked the College to circulate this survey of Canadian physicians known to our membership, in hopes that many will complete it. This survey is for family physicians who treat patients with chronic non-cancer pain (CNCP). If you do not fit this category please do not complete the survey.

Results of this survey will help develop educational programs about treatment of Chronic Non Cancer Pain.

Completion of this survey is voluntary, and neither the researchers nor the colleges will be able to identify those who responded or not responded the survey.

Completion of this survey will take approximately 15 minutes.

https://www.surveymonkey.com/r/Pain_Canada

2). Medical Council of Canada (MCC)

As a result of the Assessment Evolution project, changes to the MCC exams are occurring in 2018. The MCCEE will be phased out in 2018, with the final available session to write the MCCEE in November, 2018. The new enhanced MCCQE I, based on the new blueprint was launched in March, 2018. The new enhanced MCCQE II, based on the new blueprint will be launched in the fall of 2018.

Beginning in 2019, the MCCQE I will be delivered in Canada and internationally in over 80 countries up to 5 times per year. MCCQE II will be delivered in Canada up to 4 times per year.

This spring the MCC launched a new MCCQE I practice test within the Practice Test Portal of the website. This test is the Multiple Choice Questions (MCQ) Practice Test. A new Clinical Decision Making (CDM) Practice Test will be launched in the fall of 2018. This spring a new Webinar was also launched - "The New MCCQE II: What's in it for me?"

The NAC (OSCE) exam eligibility criteria have changed this spring. MCCEE is no longer an eligibility requirement to apply to the NAC exam. Eligible candidates will be able to challenge the NAC exam first or the MCCEE first-in the order that they prefer, or even in the same month. Candidates will be able to retake the NAC exam if they have a pass (or fail) result, for up to three attempts in all. The candidate's latest result will be the only valid result and will not expire. The new enhanced NAC exam, based on the new blueprint, will launch in the spring of 2019.

Beginning in 2019, the MCCQE I will be used for evaluating both Canadian trained and internationally trained candidates. Starting in 2019, all international candidates wanting to enter a residency position in Canada will need to pass both the MCCQE I exam and the NAC OSCE.

The National Assessment Collaboration (NAC) is an alliance of Canadian organizations streamlining the evaluation process for IMGs seeking a license to practice in Canada. NAC has developed a Pan-Canadian process, the NAC Practice Ready Assessment (NAC PRA), to assess IMGs' practice readiness. In 2018, the NAC PRA will be available for practice ready assessments (for conditional licensure) for IMGs in Family Medicine, Internal Medicine and Psychiatry. The NAC PRA will be a 12 week assessment and there will be a candidate fee of \$1750. PRA programs are available in British Columbia, Alberta, Saskatchewan, Manitoba, Quebec and Newfoundland. There is currently a national move to consider the use of this assessment tool as a standard tool across Canada for provisional licensure. In this way, an IMG seeking a conditional license to practice in Canada would need the MCCQE I and the NAC PRA. In addition, the majority of the NAC PRA programs in the various provinces also use the NAC (OSCE) exam as one of their tools for selection into their PRA program.

3). International Association of Medical Regulatory Authorities (IAMRA)

The biennial 13th IAMRA Conference on Medical Regulation will be held October 6-9, 2018, in Dubai, United Arab Emirates. IAMRA now has 112 member organizations from 48 countries around the world. The theme of this conference is "Empowering regulation with innovation and evidence". For more information on this conference go to <http://www.smartwebagency.co.uk/demo/iamra-2018/>

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Please look after your own health & well-being.

Healthy & happy physicians look after their patients competently and with compassion.

The College office will be closed JUNE 8-11, 2018 while staff attend the FMRAC AGM.

There is a mail slot at the front door of our building for those who wish to drop off anything when the office is closed in June.

The Council and the College office staff want to wish everyone a great summer!

We hope you take some time to enjoy it!