

College's mission

- 1 Advance the art and science of medicine**
- 2 Discuss medical and scientific problems**
- 3 Organise post-graduate courses and encourage participation by family physicians**
- 4 Teach family medicine to undergraduate and post-graduate students**
- 5 Promote and maintain standards in family medicine**
- 6 Encourage and assist young people in preparing and establishing themselves in family practice**
- 7 Preserve the right of family physicians to engage in procedures that they are qualified to do**
- 8 Provide and support academic posts and programmes in family medicine**
- 9 Bestow accreditations in recognition of proficiency in family medicine**

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Corporate Information

Members of the 19th Council (2003 – 2005)

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Honorary Treasurer	: Dr Yii Hee Seng
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	: Dr Lim Fong Seng
	: Dr Wong Weng Hong
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	: Dr Tan See Leng
	: Dr Tan Yew Seng
Honorary Editor	: Dr Matthew Ng Joo Ming

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Censors	: A/Prof Chan Nang Fong
	: Dr Lau Hong Choon
	: Dr Tan Chee Beng
GDFM representative	: Dr Matthew Ng Joo Ming
Advisors	: A/Prof Cheong Pak Yean
Secretary	: Ms Emily Lim Shu Mui

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Senior Administrative Executive	: Ms Emily Lim Shu Mui
Accounts Officer	: Ms Ng Mun Feng
IT Officer	: Ms Jace Phang Pei Shan
Senior Administrative Assistant	: Ms Katy Chan Yuet Wah
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	: Ms Belinda Fok

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Mr Lim Chor Pee

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	: Dr Lee Kheng Hock
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Membership Committee

Chairman	: Dr Yii Hee Seng
Members	: Dr Tan Chee Beng : Dr Tan See Leng : Dr Tay Ee Guan

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Ex-Officio	: A/Prof Cheong Pak Yean
Administrative support	: Ms Ng Mun Feng

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: Dr Ajith Damodaran

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: Dr Tan Yu Sing Lucienne
I.T. Resource Chairman : Dr Tan Sze Wee
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: Dr Ng Chee Lian Lawrence
: Dr Wong Chiang Yin
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Project Manager : Ms Emily Lim Shu Mui
Chief Editor : A/Prof Goh Lee Gan
Editorial Board members : A/Prof Cheong Pak Yean
: A/Prof Lim Lean Huat
: A/Prof Chan Nang Fong
: Dr Tan Chee Beng
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: Dr Swah Teck Sin
: Dr Paul Goh
: Dr Cheong Seng Kwing
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: Dr Lee Soon Seng
: Dr Seng Sheh Ling Joyce
: Dr Soon Shok Wen Winnie
: Dr Tan Kim Eng
: Dr Tan Kok Leong
: Dr Tan Ngiap Chuan
: Dr Wong Tack Keong Michael

Special Interest Groups:

SIG – Elderly Care : Dr Tan Boon Yeow (Chairman)
SIG – Mental Health : Dr Tan Yew Seng (Chairman)

Report of The 19th Council

For The Period 1 April 2003 - 31 March 2004

The work year of 2003 began in the thick of the SARS outbreak. The College with its team of volunteer members sprang into action. Many daring and innovative initiatives were taken. Very often the College found itself alone and at the forefront of the neglected primary care frontline. With the support of our members we were glad to have played our part in our country's fight against SARS. As primary care doctors we are all too familiar with the unglamorous but vital tasks of prevention. As the dust of the battle settles, we are just grateful that we have prevented casualties amongst our colleagues in primary care and the scourge of SARS was kept out of our community.

The remainder of the year, post battle, was a time of reconstruction and repair of our academic activities. We are glad to report that things are back on an even keel. God willing, we are once again ready to scale new heights in the development of family medicine in the coming year.

The Council and the various Standing Committees are pleased to report the highlights of the activities of the College in the year ending 31 March 2004.



A/Prof Cheong Pak Yean
President



Dr Arthur Tan Chin Lock
Vice-President



A/Prof Goh Lee Gan
Censor-in-Chief



Dr Lee Kheng Hock
Honorary Secretary



Dr Yui Hee Seng
Honorary Treasurer



Dr Cheng Heng Lee
Council member



Dr Matthew Ng Joo Ming
Honorary Editor



Dr Goh Jin Hian
Council member



Dr Lim Fong Seng
Council member



Dr Pang Sze Kang Jonathan
Council member



Dr Tan See Leng
Council member



Dr Tan Yew Seng
Council member



Dr Wong Weng Hong
Council member

Academic Programmes

Graduate Diploma in Family Medicine

The Graduate Diploma in Family Medicine programme has become de rigueur standard of essential training in the discipline of family medicine. It is jointly organized by the College of Family Physicians Singapore and the Division of Graduate Medical Studies, National University of Singapore. It is a comprehensive 2-year programme that is divided into 8 modules of studies, 32 workshops, 5 clinical courses and 8 tutorials.

July 2003 saw the induction of the 4th intake of trainees. The numbers of trainees admitted into the programme stands at 51.

The GDFM examination was conducted over a 2-day period on 16 & 17 August 2003. There were 17 candidates of which 14 passed and 3 failed the examinations. 5 trainees did not apply for examinations.

The examinations consist the following:

- | | |
|---|-----|
| • A 2-hour multiple choice question paper | 25% |
| • A 1-hour key feature problem theory paper | 25% |
| • A 2-hour Objective Structured Clinical Examination (OSCE) | 50% |

The College would like to congratulate the following doctors for successfully completing the programme and attaining the GDFM (Singapore) qualification which is recognised by the Singapore Medical Council as a registrable and displayable additional medical qualification.

Recipients of GDFM (Singapore):

Dr Chiang Wing Chiong
Dr Lee Biing Ming Simon
Dr Leong Choon Kit
Dr Murali Dharan Palanisamy
Dr Ow Chien Koon
Dr Pushparanee Somasundram
Dr Puvanendran Rukshini

Dr Sharon Kaur Minhas
Dr Teoh Tsu Ping Kieron
Dr Wong Ern Ling Helena
Dr Wong Kin Chan
Dr Yap Soo Kor Jason
Dr Mohamed Ghazali
Dr N Meenambikai



GDFM recipients and College council members.

The College would like to express our appreciation to the following doctors who had contributed to the success of this programme.

Examiners of the Graduate Diploma in Family Medicine:

A/Prof Chan Nang Fong	Dr Tan Yu Sing, Lucienne
A/Prof. Cheong Pak Yean	Dr Tay Ee Guan
A/Prof. Goh Lee Gan	Dr Yii Hee Seng
A/Prof Lim Lean Huat	Dr Lim Kah Choo, Carol
Dr Cheong Seng Kwing	Dr Lim Liang Boon
Dr Damodaran, Ajith	Dr Lok Ying Fang
Dr Ee Guan Liang, Adrian	Dr Wong See Hong
Dr Goh Choon Kee, Shirley	Dr Khemani Neeta Parshotam
Dr Goh Soo Chye, Paul	Dr Chang Tou Liang
Dr Kurup Bina	Dr Chow Mun Hong
Dr Kwan Yew Seng	Dr Goh Chin Ai Moira
Dr Lee Kheng Hock	Dr Kang Aik Kiang
Dr Lim Lee Kiang, Julian	Dr Khairul B Abdul Rahman
Dr Low Mun Heng, Gerard	Dr Low Chee Wah Mark
Dr Low Sze Sen	Dr Ng Chyi Yoke Elisa
Dr Moti Vaswani	Dr Ng Joo Ming Matthew
Dr Siaw Tung Yeng	Dr Phang Siung King Jonathan
Dr Swah Teck Sin	Dr Shah Mitesh
Dr Tan Chee Beng	Dr Sim Choon Seng
Dr Tan Heng Kwang	Dr Soh Hun Beng Lawrence

Invigilators of the Graduate Diploma in Family Medicine:

Dr Chong Chung Hon	Dr Wong Yu Yi
Dr Lim Hui Ling	Dr Yeo Kwee Kee
Dr Loke Kam Weng	Dr Tan Kee Wang (Chief Invigilator)
Dr Tan Boon Yeow	

Tutors of the Graduate Diploma in Family Medicine Programme:

Dr Cheong Seng Kwing	Dr Lim Mien Choo Ruth
Dr Chia Tee Hien	Dr Loke Kam Weng
Dr Chin Swee Aun	Dr Loong Tze Wey
Dr Chow Mun Hong	Dr Low Chee Wah Mark
Dr Chua Chi Siong	Dr Low Mun Heng Gerard
Dr Colin Ngeow	Dr Low Sze Sen
Dr Ee Guan Liang Adrian	Dr Ng Chung Wai
Dr Goh Choon Kee Shirley	Dr Pang Sze Kang Jonathan
Dr Goh Khean Teik	Dr Shah Mitesh
Dr Goh Soo Chye Paul	Dr Siaw Tung Yeng
Dr Ho Han Kwee	Dr Soon Shok Wen Winnie
Dr Kalaimamani D/O Kanagasabai	Dr Swah Teck Sin
Dr Kang Aik Kiang	Dr Tan Choon Seng Gilbert
Dr Khemani Neeta Parshotam	Dr Tan Kee Wang
Dr Koh Choon Huat Gerald	Dr Tan Kim Eng
Dr Koh Kheng Keah Philip	Dr Tan Ngiap Chuan
Dr Kwan Yew Seng	Dr Tan See Leng
Dr Kwong Kum Hoong	Dr Tan Yu Sing Lucienne
Dr Lam Wai Khin	Dr Tay Ee Guan
Dr Lee Soon Seng	Dr Theng Thiam Seng Colin
Dr Leong Soh Sum Helen	Dr Thng Lip Mong Barry
Dr Lew Yii Jen	Dr Tse Wan Lung Derek
Dr Lim Fong Seng	Dr Wong Tack Keong Michael
Dr Lim Hui Ling	Dr Yung Charlotte

Many exciting new developments are in the pipeline for the development of the GDFM. The new year will see the GDFM gaining greater recognition as a mark of a well-trained family doctor.

Award of The Collegiate Membership of The College of Family Physicians Singapore (MCFPS)

The MCFP(S) is a prestigious academic award bestowed by the College on well trained family physicians in recognition of their academic achievement and professional development. Criteria for admission to the collegiate membership include:

1. member of the College of Family Physicians for at least two years
2. possess MMed (FM) Singapore
3. active in attending CME and has been certified by SMC for the past two years
4. is actively involved in teaching Family Medicine and College activities (e.g. postgraduate training, undergraduate teaching in Family Medicine) for at least a year and willing to tutor in the Graduate Diploma In FM Programme.
5. approve after an interview with the Board of Censors

For year 2003, 15 members of the College were awarded the MCFP(S). We would like to congratulate the following members for achieving this honour:

Dr Ang Choon Kiat Alvin
Dr Ho Han Kwee
Dr Koh Kheng Keah Philip
Dr Lok Ying Fang
Dr Loke Kam Weng
Dr Ong Jin Ee
Dr Seow Hoong Wei Gabriel
Dr Shah Mitesh

Dr Tan Beng Teck
Dr Tay Guan Yu Jeff
Dr Wee Chee Chau
Dr Wong See Hong
Dr Wong Ted Min
Dr Yee Jenn Jet Michael
Dr Yu Wai Hong



MCFP recipients & Council members(Not in picture: Dr Ho Han Kwee)

Award of Fellow of The College of Family Physicians Singapore (FCFPS)

The Fellowship Award by assessment is the highest academic qualification for family physicians in Singapore. In 1998, the Fellowship by Assessment programme was started. Potential candidates for this award must successfully complete a demanding 2-year assessment programme and an exit viva voce examination. This year saw the 3rd cohort of successful candidates successfully completing the programme. The following members were conferred with the Fellowship on 16 November 2003.

List of FCFPS recipients:

Dr Cheong Seng Kwing	Dr Tan Kim Eng
Dr Ee Guan Liang Adrian	Dr Tan Kok Leong
Dr Kwong Kum Hoong	Dr Tan Ngiap Chuan
Dr Lee Soon Seng	Dr Wong Tack Keong Michael
Dr Pang Sze Kang Jonathan	Dr Koh Choon Huat Gerald
Dr Seng Sheh Ling Joyce	Dr Ngeow Colin
Dr Soon Shok Wen Winnie	Dr Tan Boon Yeow



New fellows and College council members (Not in picture: Dr Koh Choon Huat Gerald)

Institute of Family Medicine And The Development of An Independent Academic Department of The Family Medicine In The University

At the year 2001 annual general meeting, the idea of forming an Institute of Family Medicine within the College was mooted. The Council is pleased to announce that the Institute of Family Medicine had been created. In August 2002, A/Prof Goh Lee Gan was appointed as the Consultant to the Institute of Family Medicine. He is assisted by our Executive Director, Dr Lee Kheng Hock. The role of the IFM is to develop the academic programmes of the College.

The development of an independent Department in Family Medicine once again encountered uncertainty as the National University of Singapore is undergoing re-structuring. The latest concept is to create a functionally independent unit within the present structure that will focus on family medicine research. This new research unit will be formed by additional adjunct staff.

Teaching Faculty of Family Medicine Fellowship Programme

Resource persons: A/Prof Goh Lee Gan
A/Prof Cheong Pak Yean
Dr Lee Kheng Hock

Supervisors: Dr Goh Soo Chye Paul
Dr Swah Teck Sin
Dr Ong Chooi Peng

Assistant Supervisors: Dr Goh Choon Kee Shirley
Dr Wong Tack Keong Michael

Teaching Faculty of Graduate Diploma In Family Medicine

Programme Director: A/Prof Cheong Pak Yean

FMMC Director: A/Prof Goh Lee Gan

Deputy Directors: Dr Chow Mun Hong
Dr Ng Joo Ming Matthew

Tutors:

- Dr Cheong Seng Kwing
- Dr Chia Tee Hien
- Dr Chin Swee Aun
- Dr Chow Mun Hong
- Dr Chua Chi Siong
- Dr Colin Ngeow
- Dr Ee Guan Liang Adrian
- Dr Goh Choon Kee Shirley
- Dr Goh Khean Teik
- Dr Goh Soo Chye Paul
- Dr Ho Han Kwee
- Dr Kalaimamani D/O Kanagasabai
- Dr Kang Aik Kiang
- Dr Khemani Neeta Parshotam
- Dr Koh Choon Huat Gerald
- Dr Koh Kheng Keah Philip
- Dr Kwan Yew Seng
- Dr Kwong Kum Hoong
- Dr Lam Wai Khin
- Dr Lee Soon Seng
- Dr Leong Soh Sum Helen
- Dr Lew Yii Jen
- Dr Lim Fong Seng
- Dr Lim Hui Ling
- Dr Lim Mien Choo Ruth
- Dr Loke Kam Weng
- Dr Loong Tze Wey
- Dr Low Chee Wah Mark
- Dr Low Mun Heng Gerard
- Dr Low Sze Sen
- Dr Ng Chung Wai
- Dr Pang Sze Kang Jonathan
- Dr Shah Mitesh
- Dr Siaw Tung Yeng
- Dr Soon Shok Wen Winnie
- Dr Swah Teck Sin
- Dr Tan Choon Seng Gilbert
- Dr Tan Kee Wang
- Dr Tan Kim Eng
- Dr Tan Ngiap Chuan
- Dr Tan See Leng
- Dr Tan Yu Sing Lucienne
- Dr Tay Ee Guan
- Dr Theng Thiam Seng Colin
- Dr Thng Lip Mong Barry
- Dr Tse Wan Lung Derek
- Dr Wong Tack Keong Michael
- Dr Yung Charlotte

Continuing Professional Development Activities

Continuing Medical Education

Compulsory Continuing Medical Education introduced in 2003 is now well accepted by doctors in Singapore. Initial misgivings and anxiety about the difficulty of fulfilling requirements and the shortage of CME programmes had proved to be unfounded. The year saw an increase in the number of CME events being organised.

The College is represented in the SMC CME Co-ordinating Committee and works closely with the Singapore Medical Council to ensure that the quality of the CME events is acceptable.

The College's system of monitoring, evaluating and accrediting of CME activities had helped to ensure that standards are maintained in CME events. Good programmes that have special relevance to the practice of family medicine are accorded Core CME points.

E-Learning

As was reported in the last annual general meeting, the College is developing an e-learning programme which was expected to be ready in 2003. Dr Lee Kheng Hock was appointed the Director of the Programme. Ms Emily Lim, our Senior Administrative Executive is the programme's Project Manager. A credible team of College members had been formed to develop content for the programme.

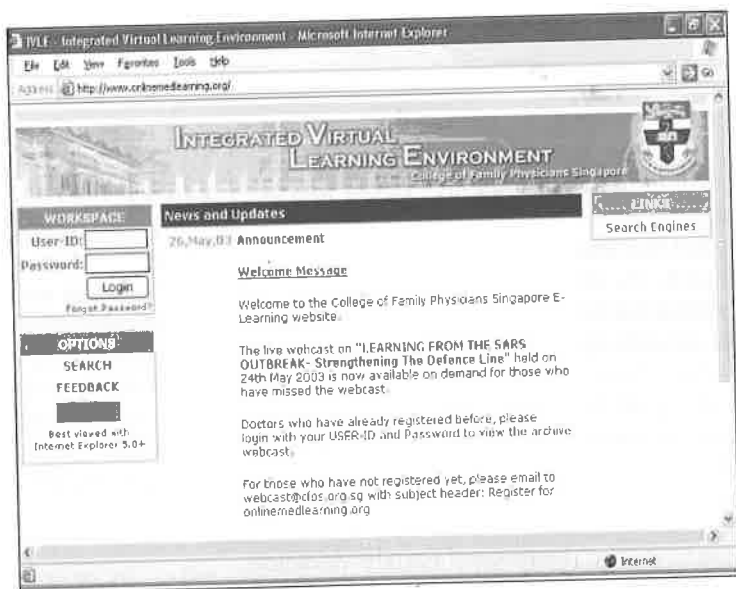
We are pleased to report that the e-learning programme is on track and four modules had been launched as of 31 March 2004:

Module 1: Disease Transmission & Counselling Skills

Module 2: Adolescent & Child Health

Module 3: Principles & Practice

Module 4: Communication & Counselling



College E-learning website: <http://www.onlinemedlearning.org>

Participants who successfully complete a module will be able to gain 5 core FM CME points. The programme's emphasis is on active learning where participants are motivated to participate as an active learner. Assimilation of knowledge is reinforced with the platform's ability to interact with the learner and prompt for decision making.

Family Practice Skills Course

Since 2003 the College has taken on the role of evaluating and accrediting CME programmes. We have since stopped co-organising and providing nominal sponsorships to events organised by healthcare service providers and commercial organisations. The College had also stopped organising ad-hoc events and instead focused on structured courses that are crafted to meet the needs of practising family physicians. The Family Practice Skills Courses was developed for such a purpose and since its introduction last year, it had been very well received.

The initial plan was to develop two courses per calendar year. This had been increased to four per year.

Components of the Course:

- Distance learning course – six units
- Two Seminars
- One Clinical Teaching Session
- Reading papers: A Selection of 10 papers will be presented. Course participants are advised to choose up to five for self-study.

The components may vary from course to course according to requirements.

As of 31 March 2004, the following family practice skills courses have been organised:

- Basic Home Health Care
- Asthma
- Hypertension
- Musculoskeletal
- Hyperlipidemia
- Men's Health
- Pain Management

Community Service Activities

College SARS Workgroup

In the very early days of the SARS outbreak, when even the causative agent was still not fully known, the College recognised the danger that SARS posed to the community and the need for all family physicians to work together to contain the threat. It was decided that there was a need to co-ordinate the ongoing informal exchange of information and preventive strategies. By 28 March 2003, the College SARS Workgroup was officially formed and sprang into action. Members of the Workgroup came from different clusters and sectors, united by the common cause of forming a defence perimeter at the primary care level. The members of the College SARS workgroup were:

A/Prof Chan Nang Fong
Consultant Family Physician
Peace Medical Clinic

A/Prof Cheong Pak Yean
President
College of Family Physicians Singapore

A/Prof Shanta Emmanuel
Chief Executive Officer
NHG Polyclinics

A/Prof Goh Lee Gan
Consultant
Institute of Family Medicine

Dr Khor Chin Kee
Medical Director
Healthway Medical Group

Dr Lee Kheng Hock
Executive Director
College of Family Physicians Singapore

Dr Jonathan Pang Sze Kwang
Senior Family Physician
Everhealth Family Clinic

Dr Arthur Tan Chin Lock
Vice-President
College of Family Physicians Singapore

Dr Tan Chee Beng
Chief Executive Officer
SingHealth Polyclinics

Dr Jason Yap Soo Kor
Deputy Medical Director
Shenton Medical Group

Dr Yii Hee Seng
Deputy Medical Director
Raffles Medical Group

Dr Tan See Leng
Chief Operations Officer
BUPA Healthcare Singapore

Dr Lawrence Ng Chee Lian
Senior Family Physician
Family Medicine Clinic

Dr Cheng Heng Lee
Director
Health Maintenance Office Pte Ltd

The group quickly evolved into a clearinghouse of information from the ground as well as from the Ministry of Health, forming a vital link between policy, information and feedback. The dynamic situation and frantic pace of activity was illustrated by the fact that one day after the formation of the workgroup, the first interim advisory for prevention of transmission of SARS crafted and disseminated by the 29 March 2004. This was among first comprehensive advisory for primary care clinics issued in the world and was disseminated by some other countries.

SARS Advisory And Posters



SARS Advisory



SARS Poster

At the outbreak of SARS, there was great confusion on the ground with regard to personal protective equipment and preventive measures to take at the primary care clinics. The Ministry of Health was busy trying to contain the initial outbreak at the hospitals. There was concern that primary care clinics may be the weak link in the cordon that may be breached. The first interim advisory was issued by the College on 29 March 2004 and widely distributed to all primary care clinics in Singapore. As experience and knowledge of the virus increased, a series of updates was posted.

SARS Posters urging the public to self declare symptoms were printed and made available to all doctors in Singapore. In the interest of containing the outbreak, the posters were also given to non-members, our dental colleagues and even our specialist colleagues.

Making provisions to meet the expenses of all activities related to the fight against SARS, the Council set aside S\$50,000 in a College SARS Operation Fund.

One member told the College that the next day after he received the College SARS Advisory and instituted the preventive measures, he saw a patient whom subsequently turned out to be a confirmed SARS case.

Live Webcast: Learning from the SARS Outbreak



Doctors viewing the live webcast from the College's lecture room



Live Webcast: *The Panelists*

The SARS outbreak prevented the gathering of large numbers of health care workers. Yet there was an urgent need to disseminate information and rally doctors many of whom felt isolated and increasingly stressed. The College therefore decided to organise a live webcast on the 24 May 2003 to rally doctors and encourage them to keep vigilant. A panel of physician leaders was formed to discuss lessons learned and answer questions posed in real time by viewers. The panelists were:

Prof Tan Chorh Chuan
Director Medical Services, Ministry of Health

Dr Lily Neo
Chairperson, Government Parliamentary Committee on Health

Dr Tan Cheng Bock
Member of Parliament

Dr Leo Yee Sin
Communicable Disease Centre, Tan Tock Seng Hospital

A/Prof Cheong Pak Yean
President, College of Family Physicians Singapore

A/Prof Goh Lee Gan
Family Medicine Division, National University of Singapore

Dr Lee Kheng Hock
Executive Director
College of Family Physicians Singapore

The event was sponsored by Merck Sharp & Dohme (I.A.) Corp, Singapore Branch, Starhub and ST Teleport. It was estimated that more than 1000 doctors logged on to watch this historic first live webcast for doctors.

E-learning Module on SARS (Screenshots from E-learning Module)



At the outbreak of SARS, the e-learning programme was still on the drawing board. During the time all CME events were cancelled because of the concern that a chain of infection that occurs during a CME event will result in large numbers of doctors being quarantined. The development of the e-learning programme was therefore accelerated and pressed into service. The module on prevention of disease transmission became the first module of the programme and was launched together with the webcast on 24 May 2003. Participants were taken through case scenarios that test their clinical decision making skills. They can also watch skills videos on preventive measures to take in the fight against SARS. The SARS advisory was also provided on-line.

Hotline for Frontline: Phone Support of GPs in the Frontline

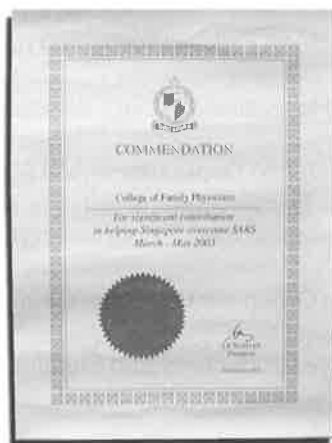


In the midst of the SARS outbreak, feedback from doctors on the ground revealed the difficulty of translating recommendations and directives into actual practice. Much of the problem was due to the fact that they were developed with the hospitals and polyclinics in mind. The College therefore decided to set up a hotline to fill the information gap. It also served as a sounding board to help doctors implement directives and to provide moral support to the doctors in the frontline which was how the service got its name: Hotline for Frontline. A total of 239 doctors called the line within the first 8 weeks of service.

Training of Trainers for SARS Preventive Measures Course for Medical and Dental Clinics

The College assisted the Ministry of Health in the conduct of the SARS Preventive Measure Course. Overall about 1800 doctors attended the course.

Commendation from the President of the Republic of Singapore



In recognition of the College's contribution to the fight against SARS, the College received a Commendation from our President S. R. Nathan on the 9 October 2003.

Representation In National Committees And Programme

As the body representing family medicine in Singapore, the College plays an important consultancy role to many community and grass root organizations. We were often called upon to provide information to the media, various organizations and even members of the public.

In the past year the College had been invited to participate and send representatives to many workgroups and committees, including the following:

- MOH Workgroup on Transforming Primary Care
- MOH Workgroup on Safeguarding Medical Standards
- SMC CME Co-ordination Committee (A/Prof Cheong Pak Yean and Dr Lee Kheng Hock)
- Family Life Ambassador Programme, Ministry of Community Development and Sports
- National Cervical Cancer Screening Programme, Health Promotion Board (Dr Bina Kurup)
- Dialogue Session on the Proposed Factories and other Workplaces Act, Ministry of Manpower (Dr Tan Chee Beng)
- Clinical Practice Guidelines on Anxiety Disorders Workgroup (A/Prof Goh Lee Gan)
- Clinical Practice Guidelines on Hormone Replacement Therapy Workgroup (Dr Ling Yee Kiang)
- Clinical Practice Guidelines on Hypertension Review Workgroup (Dr Ruth Lim Mien Choo)
- Clinical Practice Guidelines on Stroke Review Workgroup (Dr Kalaimamani d/o Kanagasabai)
- Clinical Practice Guidelines on H. Pylori Infection Review Workgroup (Dr Jonathan Pang)
- Clinical Practice Guidelines on Obesity Workgroup (Dr Tan Kok Leong)
- Clinical Practice Guidelines on Coronary Syndromes Workgroup (Dr Tan Kim Eng)
- Clinical Practice Guidelines on Colorectal Cancer Workgroup (Dr Kang Aik Kiang)
- Clinical Practice Guidelines on Diabetic Retinopathy Workgroup (A/Prof Cheong Pak Yean)
- Clinical Practice Guidelines on Diabetic Glaucoma Workgroup (Dr Wong Ted Min)
- Clinical Practice Guidelines on Health Screening Workgroup (A/Prof Cheong Pak Yean)
- Clinical Practice Guidelines on Heart Failure Workgroup (Dr Tan Boon Yeow)
- Clinical Practice Guidelines on Non-valvular Atrial Fibrillation Workgroup (Dr Wong Ted Min)
- Clinical Practice Guidelines on Opiate Dependence And Abuse Workgroup (Dr Tan Yew Seng)
- Workgroup on Elder Abuse Prevention SAGE Counselling Centre
- Breastfeeding Mothers' Support Group (Dr Charlotte Yung)
- Standards Committee, Singapore Productivity and Standards Board

College Activities

Convocation 2003

The annual convocation and dinner was held on the 16 November 2003. The Guest of Honour was Dr Lily Neo, Chairperson of the Government Parliamentary Committee on Health and Member of Parliament. In her keynote address, Dr Neo outlined the important roles that family physicians play in preventive, long-term and step down care in the context of the whole healthcare system. Dr Tan Cheng Bock and Dr Arthur Tan were conferred Fellowship by election for their outstanding contributions to family medicine and to the society at large. The convocation dinner was attended by more than 300 members, friends and family.

College Insignia and Academic Dress Code By-Laws



In recognition of the academic achievements and to encourage participation in structured vocational training, the College instituted the use of academic insignia and passed the by-law governing their use.

The Academic Insignia prescribed to be worn by the several categories of members of the College shall be as follows:

1. By Ordinary Members:
A circular badge bearing the green cross with the caduceus and the open book superimposed.
2. By Ordinary Members with the qualification of the graduate diploma in family medicine or its equivalent as accepted by the College:
A circular badge bearing the green cross with the caduceus and the open book superimposed. The badge is further distinguished by a blue border.
3. By Collegiate Members:
A circular badge bearing the green cross with the caduceus and the open book superimposed. The badge is further distinguished by a green border.
4. By Fellows:
A circular badge bearing the green cross with the caduceus and the open book superimposed. The badge is further distinguished by a red border.

All academic insignia must be produced with the authorisation of the College Council and worn in the prescribed manner.

Delegation to the Royal Australian College of General Practitioners Meeting in Hobart October 2003

A/Prof Cheong Pak Yean was invited to attend 2003 Annual Meeting of the Royal Australian College of General Practitioners by our Australian colleagues. A/Prof Goh Lee Gan was conferred the Honorary Fellowship of the RACGP in recognition for his contribution to development of family medicine in the Asia Pacific region as well as the close working relationship between the Singapore College and the Australian College.

The CFPS and the RACGP have had excellent relations since the founding of the College. Our Australian colleagues will always be warmly remembered for the support they gave us in the early years of our College and the assistance that they rendered when we started the first MCGP examinations.

WONCA Beijing 2003 Conference (4 November – 11 November 2003)

The College sent a delegation to support the Chinese Society of General Practice when they held the WONCA Asia Pacific Regional Conference in Beijing from the 4 November to 11 November 2003. The delegation took the opportunity to network with the delegates and to promote the WONCA World Conference which will be hosted by the College in 2007.

Activities of The Standing Committees

Please see respective reports.

College Membership

The College of Family Physicians Singapore is the national body representing all family physicians in matters pertaining to standards and professional development. Membership is voluntary and is recognized as a mark of commitment to the family medicine fraternity and the ideals of family medicine.

Admission to higher grades of membership such as ordinary membership, collegiate membership and fellowship are accorded only to family physicians who had satisfied strict requirements of professional experience and academic achievements.

Membership List

(As of 31 March 2004)

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5. Dr Kwa Soon Bee
6. Dr Lam Sian Lian
7. Datuk (Dr) Lim Kee Jin
8. Professor Lim Pin
9. Dato (Dr) R Balasundaram
10. Dr Rajakumar M K
11. Dr Syed Mahmood Bin Syed Hussain
12. Professor Tock Peng Chong Edward

FELLOWS

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2. Dr Chan Swee Mong Paul
3. Dr Chang Ming Yu James
4. Dr Cheong Seng Kwing
5. Dr Chong Phui-Nah
6. Dr Chow Mun Hong
7. A/Professor Cheong Pak Yean
8. Dr Ee Guan Liang Adrian
9. Dr Goh Choon Kee Shirley
10. Dr Goh Khean Teik
11. A/Professor Goh Lee Gan
12. Dr Goh Soo Chye Paul
13. Dr Hanam Evelyn
14. Dr Koh Choon Huat Gerald
15. Dr Koh Eng Kheng
16. Dr Kwan Yew Seng
17. Dr Kwong Kum Hoong
18. Dr Lau Hong Choon
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20. Dr Lee Kheng Hock
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24. Dr Leong Vie Chung
25. Dr Lim Fong Seng
26. Dr Lim Kim Leong
27. A/Professor Lim Lean Huat
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30. Dr Ngeow Colin
31. Dr Ng Joo Ming Matthew
32. Dr Ong Chooi Peng
33. Dr Pang Sze Kang Jonathan
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37. Dr Soon Shok Wen Winnie
38. Dr Swah Teck Sin

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42. Dr Tan Chin Lock Arthur
43. Dr Tan Kok Leong
44. Dr Tan Kim Eng
45. Dr Tan Ngiap Chuan
46. Dr Tan See Leng
47. Dr Tay Ee Guan
48. Dr Thng Lip Mong Barry
49. Dr Vaswani Moti Hassaram
50. Dr Wong Heck Sing
51. Dr Wong Kum Hoong
52. Dr Wong Tack Keong Michael
53. Dr Yeo Peng Hock Henry

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69. Dr Wee Sip Leong Victor
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74. Dr Wong Song Ung
75. Dr Wong Ted Min
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430. Dr Ong Bee Sim
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435. Dr Ong Kian Giap Daniel
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523. Dr Tan Gek Hua
524. Dr Tan Gek Young
525. Dr Tan Ju Hock
526. Dr Tan Kee Chong
527. Dr Tan Keng Chiew
528. Dr Tan Keng Wah Jerry
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530. Dr Tan Kia King
531. Dr Tan Kia Yong Paul
532. Dr Tan Kian Yong
533. Dr Tan Kiat Piah
534. Dr Tan Kiaw Kuang
535. Dr Tan Kim Kiat
536. Dr Tan Kok Hian
537. Dr Tan Kok Liang
538. Dr Tan Kok Pin
539. Dr Tan Kok Soo
540. Dr Tan Kok Ying
541. Dr Tan Kong Chin
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543. Dr Tan Lay Wee
544. Dr Tan Lea Khim
545. Dr Tan Lean Beng

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554. Dr Tan Soo Liang
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581. Dr Tey Colin
582. Dr Tham Kok Wah
583. Dr Tham Pak Onn
584. Dr Tham Tat Yean
585. Dr Thein Myint Myint
586. Dr Thevathasan Ivor Gunaseelan
587. Dr Thor Guat Ngoh
588. Dr Toh Kok Thye
589. Dr Toh Thiam Kiat
590. Dr Toh Wai Keong
591. Dr Tok Choo Beng Vincent
592. Dr Tong Chuan Hong
593. Dr Tong Jia Jong Stephen
594. Dr Tong Thean Seng Reginald
595. Dr Tow Siang Phang
596. Dr Tse Wan Lung, Derek
597. Dr Tseng Seong Pheng William
598. Dr Tsou Yu Kei Keith
599. Dr Ung Eugene
600. Dr Unnikrishnan Saira
601. Dr Vasawala Farida Fakhrudin
602. Dr Vengadasalam Sarojini
603. Dr Virabhak Chayansak
604. Dr Virabhak Nai Karin
605. Dr Waller Patricia Babara
606. Dr Wee Bee Poh Diana
607. Dr Wee Ian Lin Karen
608. Dr Wee Joo Ling Mary
609. Dr Wee Kang Cheng Paul
610. Dr Wee Kien Han Andrew
611. Dr Wong Chiang Yin
612. Dr Wong Ern Ling Helena
613. Dr Wong Ern Mei Celina
614. Dr Wong Fook Poh
615. Dr Wong Hon Wai Wicky
616. Dr Wong Kai Peng
617. Dr Wong Lai Lin Patrina
618. Dr Wong Liang Fu
619. Dr Wong Mee Soong
620. Dr Wong Mei Ling Gladys
621. Dr Wong Ming
622. Dr Wong Nai Ming
623. Dr Wong Seung Tang
624. Dr Wong Toon Kwok
625. Dr Wong Weng Hong
626. Dr Wong Weng Yew
627. Dr Wong Yik Mun
628. Dr Wong Yoke Cheong
629. Dr Wong Yu Mei Joyce
630. Dr Wong Yu Yi
631. Dr Woon Chee Hong
632. Dr Wu Dah Wei David
633. Dr Wu Eu Heng
634. Dr Yam Pei Fang Jacqueline
635. Dr Yang Chien Pai
636. Dr Yang Chyan Han Jasper
637. Dr Yang Chyan Yeow Aylwin
638. Dr Yang Hong Ping
639. Dr Yann A Meunier
640. Dr Yao Cheng John
641. Dr Yao Wan Hwa Mary
642. Dr Yap Boh Wei
643. Dr Yap Chee Lip
644. Dr Yap Chiew Fah Ivy
645. Dr Yap Eng Chew
646. Dr Yap Lee
647. Dr Yap Siong Yew Mark
648. Dr Yap Soei Kiat
649. Dr Yap Soo Kor Jason
650. Dr Yap Soon Boon Raymond
651. Dr Yap Thiam Koon
652. Dr Yap Tiong Toh
653. Dr Yeap Eng Hooi
654. Dr Yeo Chye Luan
655. Dr Yeo Chye Neo Angeline
656. Dr Yeo Khee Hong
657. Dr Yeo Khian Kiat
658. Dr Yeo Kim Hai
659. Dr Yeo Kwee Kee
660. Dr Yeo Kwan Ching
661. Dr Yeo Lock Peow Peter
662. Dr Yeo May Lene Esther
663. Dr Yeo Ngan Meng
664. Dr Yeo Pheng Nam
665. Dr Yeo Siew Lin Jennifer
666. Dr Yeo Swee Lee
667. Dr Yeo Thoont Kiat

- 668. Dr Yeow Mong Oon Batty
- 669. Dr Yew Woon Wah
- 670. Dr Yik Chor Yeong
- 671. Dr Yim Fu Chuen Benjamin
- 672. Dr Yim Jean
- 673. Dr Yim Sow Tuck Andrew
- 674. Dr Yip Mang Meng
- 675. Dr Yong Bo Ling
- 676. Dr Yong Oi-Si Elsie
- 677. Dr Yong Thiam Look Peter
- 678. Dr Yoong It Siang
- 679. Dr Yun Kok Onn

ORDINARY MEMBERS

Malaysia

- 1. Dr Hong Ching Ye
- 2. Dr Neo Chun Huat
- 3. Dr Varghese Joseph
- 4. Dr Woo Yam Kwee

ORDINARY MEMBERS

Other Countries

- 1. Dr Ling Mun Kin
- 2. Dr McKay A Breck

ASSOCIATE MEMBERS

Singapore

- 1. Dr Abdullah Amir Adhha
- 2. Dr Akahoshi Midori
- 3. Dr Anbumalar Ramiah
- 4. Dr Aung Gyi @ Du Jean Min
- 5. Dr Ang Lay Teng
- 6. Dr Aung Thein
- 7. Dr Beattie Stroma
- 8. Dr Beh Chong Teck Peter
- 9. Dr Chan Chee Leong Marvin
- 10. Dr Chan Heang Kng Calvin
- 11. Dr Chan Kok Yew
- 12. Dr Chan Kong Hon
- 13. Dr Chan U-Jyn Kevin
- 14. Dr Chang Wan Ern
- 15. Dr Chay Wai Mun Jason
- 16. Dr Cheng Geok Min Ruby
- 17. Dr Cheng Kah Ling Grace
- 18. Dr Cheong Yan Yan
- 19. Dr Cheong Yin Phoon Karen
- 20. Dr Chew Him Lim Madeline
- 21. Dr Chia Hong Chye Vincent
- 22. Dr Chiang Wing Chiong
- 23. Dr Chin Wai Meng Andrew
- 24. Dr Chng Woei
- 25. Dr Chong Chin Kwang

- 26. Dr Chong Shih Tsze
- 27. Dr Choo Chee Hoe Ivan
- 28. Dr Choo Chin Yeng
- 29. Dr Chua Kim Ghee Vincent
- 30. Dr Chua Sing Hue Eunice
- 31. Dr Chua Thiam Eng
- 32. Dr Dang Simrit Kaur
- 33. Dr Ek Jen Lih
- 34. Dr Eng Soo Kiang
- 35. Dr Eu Chin Yuan David
- 36. Dr Eu Tieng Juoh Wilson
- 37. Dr Gan Theng Yeow Daniel
- 38. Dr Gn Hoong Khee Christopher
- 39. Dr Goh Chee Hwei
- 40. Dr Goh Jin Hian
- 41. Dr Goh Lay Hoon
- 42. Dr Goh Shu Huey
- 43. Dr Gouw Janet
- 44. Dr Gwee Shou-Yi Rachel
- 45. Dr Han Mei Lan
- 46. Dr Haridas Sonia
- 47. Dr Heng Soo Hng Joyce
- 48. Dr Hoe Wan Sin
- 49. Dr Hor Oi Lin
- 50. Dr Howe Wen Li
- 51. Dr Ikehara Yasuhiko
- 52. Dr K Palaniappan
- 53. Dr Kao Chin Yu @ Chit Oo
- 54. Dr Kao Wei Hsing
- 55. Dr Kay Aih Boon Erwin
- 56. Dr Kesavaraj Jayarajasingam
- 57. Dr Khera Paramjeet
- 58. Dr Khi Yue Ling, Audrey
- 59. Dr Khin Naing Naing Htut
- 60. Dr Khoo Chooi Yong
- 61. Dr Ko Hong Beng Gregory
- 62. Dr Koh Amanda @ Aye Aye Maw
- 63. Dr Koh Thuan Wee
- 64. Dr Koh Wee Boon Kelvin
- 65. Dr Lai Tien Yew Jeffrey
- 66. Dr Lau Teh Yee
- 67. Dr Lau Vi Hok Don
- 68. Dr Lee Biing Ming Simon
- 69. Dr Lee Cheng San Kenneth
- 70. Dr Lee Chian Chau
- 71. Dr Lee Heow Yong
- 72. Dr Lee Kah Wai
- 73. Dr Lee Khai Weng, Michael
- 74. Dr Lee Mei Kam Irene
- 75. Dr Lee Swee Meng Kelvin
- 76. Dr Lee Yah Leng
- 77. Dr Lee Yu Ming
- 78. Dr Lee Chiew
- 79. Dr Leong Chee Hao Lester
- 80. Dr Leong Kwai San Sebastian
- 81. Dr Leong Tyng Tyng
- 82. Dr Leong Wai Hoe Justin
- 83. Dr Leow Cheng Gek
- 84. Dr Lester Julie Anne
- 85. Dr Liao Kah Han
- 86. Dr Lie Lily

87. Dr Lim Eng Koon
88. Dr Lim Heuk Yew
89. Dr Lim Lee Min Dale
90. Dr Lim Ying
91. Dr Loh Cher Zoong
92. Dr Loh Seow Faan
93. Dr Loke Mun Choy Eugene
94. Dr Low Chai Ling
95. Dr Low Siew Teong
96. Dr Low Wye Mun
97. Dr Lye Tin Fong
98. Dr Meyer Bernard Charles
99. Dr Mok Chuang Chih Danial
100. Dr Nakada Takeo
101. Dr Nam Min Fern Alvina
102. Dr Nahid Tofail Iftekhar
103. Dr Neo Chong Shin Gary
104. Dr Ng Delvin
105. Dr Ng Keng Loong Gideon
106. Dr Ng Seo Peng Christine
107. Dr Norkhalim Bin Dalil
108. Dr Nyi Nyi Tun
109. Dr Oh Guat Leng
110. Dr Ong Chon-Kin Fabian
111. Dr Ong Eu Jin Roy
112. Dr Ong Lan Fang Rebecca
113. Dr Ong Li Ling Karen
114. Dr Ong Ming Jiunn
115. Dr Ow Chien Koon
116. Dr Poh Chern Loong Andy
117. Dr Radiah Bte Salim
118. Dr Seah Chiew Wan
119. Dr Somasundram Pushparanee
120. Dr Sng Gek Khim Judy
121. Dr Tam Tak Chuen
122. Dr Tan Chee Keong
123. Dr Tan Ching Wah
124. Dr Tan Gek Ngor
125. Dr Tan Kay Seng Tommy
126. Dr Tan Li Mei Joanna
127. Dr Tan Mei Ling Penelope
128. Dr Tan Peng Wee
129. Dr Tan Siang Hon
130. Dr Tan Yew Weng David
131. Dr Tan Yong Hui Colin
132. Dr Tang Wen-Yu Gavin
133. Dr Teo Boon See
134. Dr Teo Kah Yeen Dana
135. Dr Teo Yi Jin
136. Dr Teoh Yee Leong
137. Dr Teoh Tsu Ping Kieron
138. Dr Tiah Seow Hwee Jane
139. Dr Tjang Tjung-Fa Francis
140. Dr Tng Wei Chiang
141. Dr Toh Sheng Cheong
142. Dr Tung Yew Cheong
143. Dr Von Senden Sheryn-Kaye
144. Dr Wang Joon Leong
145. Dr Wang Shi Tah
146. Dr Whey Poh Yee Elizabeth
147. Dr Wong Chung Pheng Melvyn

148. Dr Wong Hoong-Wai
149. Dr Wong Khai Hong
150. Dr Wong Kin Chan
151. Dr Wong Li Lian Lilian
152. Dr Wong Mun Chong
153. Dr Wong Ruei Chian
154. Dr Wong Teck Boon Lawrence
155. Dr Wong Wei Mon
156. Dr Woodworth Belinda Ann
157. Dr Yap Kian Sung
158. Dr Yap Yew Chong Bernard
159. Dr Yeo Wee Shung Yehudi
160. Dr Yong, Molly
161. Dr Yuen Heng Wai

OVERSEAS MEMBERS

1. Dr Chia Sze Foong
2. Dr Lim Ein Lai
3. Dr Robin Elizabeth Clare

RETIRED MEMBERS

1. Dr Aaron Alfred Oliver
2. Dr Arumugam Nalachandran
3. Dr Attaree Razia
4. Dr Caldwell George Yuille
5. Dr Chan Kai Poh
6. Dr Chan Mei Li Mary
7. Dr Chan Tuck Kim
8. Dr Chee Phui Hung
9. Dr Chee Tiang Chwee Alfred
10. Dr Chee Toan Yang Diana
11. Dr Chew Kew Kim
12. Dr Chew Li Foon Angela
13. Dr Chelliah Helen
14. Dr Chen Jan Thye
15. Dr Chew Wan Heong Ivy
16. Dr Chong Poh Choo Lilian
17. Dr Chua Bee Koon
18. Dr Chua Chong Tee
19. Dr Ho Leong Kit
20. Dr Ho May Ling
21. Dr Hoe Jack William
22. Dr Howe Kah Chong
23. Dr J Charan Singh
24. Dr Khatoon Zubeda
25. Dr Koh Eng Soo
26. Dr Kuldip Singh Wasan
27. Dr Kumarapathy Subramaniam
28. Dr Lai Chan Sze
29. Dr Leela Varma
30. Dr Leow On Chu
31. Dr Lim Ban Siong
32. Dr Lim Kian Tho Jerry
33. Dr Lim Kim Loan Connie
34. Dr Lim Toan Keng
35. Dr Lim Toan Kiaw Irene
36. Dr Lim Whye Geok
37. Dr Low Guat Siew Theresa
38. Dr Low Yee Shih

- | | | | |
|-----|-----------------------------|-----|--------------------------------|
| 39. | Dr Lu Jean | 56. | Dr Tan Eng Seng |
| 40. | Dr Marcus Colin | 57. | Dr Tan Kheng Khoo |
| 41. | Dr Menon Indira Ravidranath | 58. | Dr Tay Leng Kong, Moses |
| 42. | Dr Menon K P Ravidranath | 59. | Dr Teo Chew Seng |
| 43. | Dr Ng Ban Cheong | 60. | Dr Thevathasan Victor M Samuel |
| 44. | Dr Neo Eak Chan | 61. | Dr Trythall David |
| 45. | Dr Ng Chiau Gian | 62. | Dr Varughese Mary |
| 46. | Dr Ng Shok Fong Margaret | 63. | Dr Viegas Claire Maria |
| 47. | Dr Ong Caroline | 64. | Dr Wan Fook Kee |
| 48. | Dr Ong Cheng Yue | 65. | Dr Williams SAR |
| 49. | Dr Ong Sin Eng Steven | 66. | Dr Wong Toan Lien Patricia |
| 50. | Dr Powell David Clarke | 67. | Dr Wu San San |
| 51. | Dr Rajan Uma | 68. | Dr Yeo Yee Tuan Eric |
| 52. | Dr Sarma Sundari Lily | 69. | Dr Yeoh Gueh Kwang |
| 53. | Dr Sayampanathan S R | 70. | Dr Yeoh Peng Cheng |
| 54. | Dr Sheng Nam Chin | 71. | Dr Yong Lee Lee |
| 55. | Dr Tan Bang Liang | 72. | Dr Yung Siew Muay |

Acknowledgements

The College would like to express our appreciation to all College members for their commitment to improving the standards of family medicine in Singapore. None of the achievements this year would have been possible without the moral support of members and dedication of volunteers who serve selflessly in the Council, in the committees and in the various publications and programmes of the College.

We would also like to acknowledge the support of the Ministry of Health in all our activities.

The very successful programmes that we had this year would not have been possible without the sponsorship, funding and goodwill of the following friends of the College:

Pfizer Pte Ltd
 Sanofi-Synthelabo Singapore Pte Ltd
 Bristol-Myers Squibb Company
 Merck Sharp & Dohme (I.A.) Corp. Singapore Branch
 Infocomm Development Authority of Singapore
 StarHub
 ST Teleport

All the ideas and programmes that were conceived would not have been possible without the dedication and hardwork of our staff at the College Secretariat:

Ms Emily Lim Shu Mui
 Ms Jace Phang
 Ms Ng Hai Yan
 Ms Ng Mun Feng
 Ms Katy Chan
 Mdm Ong Siew Hong
 Ms Belinda Fok

On behalf of the Council and all our members, I would like to thank them for another year of excellent service to the College.

Dr Lee Kheng Hock
 Honorary Secretary
 19th Council
 College of Family Physicians Singapore

Report of The Board of Censors

1 April 2003 - 31 March 2004

Censor-in-Chief: A/Prof Goh Lee Gan
Censors: A/Prof Chan Nang Fong
Dr Lau Hong Choon
Dr Tan Chee Beng



INTRODUCTION

Important events in the College calendar for the year under review were the Commencement of the Academic Year in June; the Second Examination for the Graduate Diploma in Family Medicine (GDFM) in July; the Fellowship by Assessment Interview in September; the MMed(Family Medicine) Examination in October; and the College Convocation also in November 2003.

MEMBERSHIP

The membership stands at 1074 as of March 2004, the first time to pass the 1000 mark in the history of the College. Membership grew by 20% in the year under review. There are 72 retired members. The distribution by grade of membership for the last three years are also shown below:

Membership Category	31 st March of			
	2001	2002	2003	2004
Honorary Fellows	12	12	12	12
Fellows	18	26	37	53
Collegiate Members	69	75	80	88
Ordinary Members	481	538	546	685
Associate Members	85	82	120	161
Overseas Members	3	3	3	3
Retired Members	62	70	75	72
Total	730	806	873	1074

COMMENCEMENT OF THE FM ACADEMIC YEAR

The commencement of the FM academic year took place at the auditorium, Ministry of Health(MOH) on 28 June 2003. The Guest of Honour was Dr Lee Suan Yew, President of the Singapore Medical Council.

THE GRADUATE DIPLOMA OF FAMILY MEDICINE (GDFM) EXAMINATION

The number of doctors who sat for the Second GDFM Diplomate Examination was 17. There was a 82.4% pass rate for the GDFM examination 2003. The following were successful in the Examination:

1. Dr Chiang Wing Chiong
2. Dr Lee Biing Ming Simon
3. Dr Leong Choon Kit
4. Dr Murali Dharan Palanisamy
5. Dr Ow Chien Koon
6. Dr Pushparanee Somasundram
7. Dr Puvanendran Rukshini
8. Dr Sharon Kaur Minhas (*GDFM Book Prize recipient*)
9. Dr Teoh Tsu Ping Kieron
10. Dr Wong Ern Ling Helena
11. Dr Wong Kin Chan
12. Dr Yap Soo Kor Jason
13. Dr Mohamed Ghazali
14. Dr N Meenambikai

THE 13th MASTER OF MEDICINE (FAMILY MEDICINE) EXAMINATION

The 13th Master of Medicine (Family Medicine) Examination was held from 13 to 19 October 2003. The External Examiners were Professor Wes Fabb and Professor Lewis Ritchie. Of the 20 candidates who sat for the examination, 15 were successful. They were:

- | | |
|--------------------------------|-------------------------------|
| 1. Dr Cheah Soon Min, Benjamin | 9. Dr Ong Wah Ying |
| 2. Dr Chew Sze Mun | 10. Dr Tan Kok Heng, Adrian |
| 3. Dr Chong Yeang Chern | 11. Dr Tee Siow Fang, Jenny |
| 4. Dr Goh Tiong Jin | 12. Dr Tong Jia Jong, Stephen |
| 5. Dr Gwee Shou Yi, Rachel | 13. Dr Tung Yew Cheong |
| 6. Dr Ho May San, Karen | 14. Dr Wong Mun Chong |
| 7. Dr Hwang Siew Wai | 15. Dr Tan Yong Hui, Colin |
| 8. Dr Lee Chiew | |

As of 31 March 2004, there were a total of 195 doctors in Singapore with the MMed FM qualification.

THE AWARD OF MCFP(S) TO MMed (FM) HOLDERS WHO FULFIL CRITERIA

In 2003, 15 applicants who are MMed(FM) holders were awarded the MCFP(S). The criteria for the award were as follows:

- Members of the College for two years
- Active in CME and have achieved the 25 points in the SMC CME or equivalent if they do not have the certificate
- Actively involved in undergraduate or postgraduate teaching

The MCFP(S) were awarded to the following members:

- | | |
|------------------------------|-----------------------------|
| 1. Dr Ang Choon Kiat Alvin | 9. Dr Tan Beng Teck |
| 2. Dr Ho Han Kwee | 10. Dr Tay Guan Yu Jeff |
| 3. Dr Koh Kheng Keah Philip | 11. Dr Wee Chee Chau |
| 4. Dr Lok Ying Fang | 12. Dr Wong See Hong |
| 5. Dr Loke Kam Weng | 13. Dr Wong Ted Min |
| 6. Dr Ong Jin Ee | 14. Dr Yee Jenn Jet Michael |
| 7. Dr Seow Hoong Wei Gabriel | 15. Dr Yu Wai Hong |
| 8. Dr Shah Mitesh | |

The Censors Board has also recommended and approved by the College Council to introduce the MCFP By Assessment with effect from year 2004. Details can found in Appendix A.

FELLOWS OF THE COLLEGE OF FAMILY PHYSICIANS

The following were successful Fellows by assessment and received their Fellowship Conferment in 2003 (3rd cohort).

- | | |
|------------------------------|--------------------------------|
| 1. Dr Cheong Seng Kwing | 8. Dr Tan Kim Eng |
| 2. Dr Ee Guan Liang Adrian | 9. Dr Tan Kok Leong |
| 3. Dr Kwong Kum Hoong | 10. Dr Tan Ngiap Chuan |
| 4. Dr Lee Soon Seng | 11. Dr Wong Tack Keong Michael |
| 5. Dr Pang Sze Kang Jonathan | 12. Dr Koh Choon Huat Gerald |
| 6. Dr Seng Sheh Ling Joyce | 13. Dr Ngeow Colin |
| 7. Dr Soon Shok Wen Winnie | 14. Dr Tan Boon Yeow |

This third cohort of Fellows was assessed on 16 & 24 October 2003 by an Exit Panel comprising an external interviewer Professor Wes Fabb from Australia and the Censors Board. Professor Wes Fabb's report commended the new Fellows for their excellent standards and performance.

THE CONFERMENT OF THE FCFP(S) AND THE MCFP(S)

The Conferment of the FCFP(S) and the MCFP(S) took place at the College Dinner in conjunction with the College Convocation dinner on 16 November 2003. The Guest of Honour at the College Dinner was Dr Lily Tirtasana Neo, Chairperson, Government Parliamentary Committee for Health, and Member of Parliament, Republic of Singapore.

ACKNOWLEDGEMENTS

Members of Censor's Board met on numerous occasions to plan the various academic activities, the GDFM examination and the MMed (Family Medicine) examination. Thanks are due to the members of the Board of Censors, and our Advisor, President A/Prof Cheong Pak Yean for their contributions and dedication. Thanks and appreciation are also due to the College Secretariat team consisting of Miss Emily Lim as the Head, Miss Katy Chan, Miss Jace Phang, Miss Ng Mun Feng, and Miss Ng Hai Yan. Together, they form a formidable team and provided excellent and dependable office support. Finally, appreciation is due to the College Council for the support given to the Censors' Board in its deliberations and decisions.

A/Prof Goh Lee Gan
Censor-in-Chief

Report of The Administration Committee

1 April 2003 - 31 March 2004

Chairman : Dr Arthur Tan Chin Lock
Members : A/Prof Cheong Pak Yean
: Dr Lee Kheng Hock
: Dr Yii Hee Seng



The College Secretariat had an exciting year with lots of innovative programmes on her platter under the baton of our Executive Director Dr Lee Kheng Hock, who has also paralleled as Creative Director.

The infrastructure has remained the same, with only 4 administrative staff producing and executing an extraordinarily large volume of output. Ms. Emily Lim remained the Senior Administrative Executive who manages the Secretariat office and administration, assisted by an equally efficient and creative Administrative Officer, Ms. Jace Phang who also provides the IT expertise. There was a change of Accounts Executive as Ms. Han Hai Yan left, and was replaced by Ms. Ng Mun Feng on 1st November 2003 as Accounts Officer. Ms. Katy Chan has remained as Senior Administration Assistant. Our four-staff team together provide all the administrative and secretariat support for the College and the Institute of Family Medicine (IFM), including all in-house publications, CME programmes, both journal and IT based distance learning, GDFM, MMed and FCFP courses.

Associate Professor Goh Lee Gan has remained as the Consultant for the IFM.

With more exciting future developments, especially as we work towards the organisation of WONCA 2007, the Committee will have to react constantly to an increasing administrative work-load, and ensure that we continue our policy of maximizing resources with prudent cost containment.

Dr Arthur Tan Chin Lock
Chairman
Administration Committee

Report of The Continuing Medical Education Committee

1 April 2003 - 31 March 2004

Chairman : A/Prof Cheong Pak Yean
Vice Chairmen : Dr Lee Kheng Hock
: Dr Tan Chee Beng
: Dr Tay Ee Guan
Members : Dr Goh Khean Teik
: Dr Kwan Yew Seng



The members of the College CME Assessors' Board (CCAB) and the Accredited FM CME advisors are listed in the appendix to this report.

Two major restructuring of the College's CME were undertaken in 2002/2003. Firstly, the College has assumed new roles as CME is made compulsory by the Singapore Medical Council (SMC) from January 2003 and secondly, the launch of the Family Practice Skills Courses.

COLLEGE'S ROLE IN SMC-CME SCHEME

The College supports the SMC CME programme by participating in the SMC CME committee and advising on the CME needs/standards of family physicians in particular.

Its recommendations for CME to be accredited as core for FM are:

Category	Criteria for Core FM
1A	• Organised by Approved FM Training Centres only. Organisations who wish to apply for the ATC status are to enquire with the Singapore Medical Council.
2A	• All Wonca-organised conferences
1B	• CME must be of direct relevance to the family physicians (refer to the FM Matrix) and assess/recommended by a FM CME Advisor
3A	• peer-reviewed and cited in the index medicus; and published by a FM institution
3B	• Organisation that have been accredited by SMC-CME Committee as a category 3B CME non-core event may seek core FM status for the event by applying to the College CME Assessors' Board (CCAB). The organisers must be FM ATC.

COLLEGE'S ROLE AS FM CME ASSESSOR

From May 2002, College has been designated by the Singapore Medical Council to assess the FM CME event applications for core and non-core FM CME points. A two-step system for accrediting FM CME was set up, with the CME event organiser first crafting the programme with the advice of accredited FM CME advisor and then submits the application for assessment by the College CME Assessors' Board (CCAB).

UPDATES:

Category 1A

To date, besides the College, the other accredited FM Approved Training Centres (ATC) are NHG Polyclinic Centre, SingHealth Polyclinic Centre, NUS Family Medicine Centre and Graduate Family Medicine Centre. Organisations who wish to apply for the ATC status are to enquire with the Singapore Medical Council.

Category 1B

From January 2003 to December 2003, a total of 676 Category 1B CME applications were received. 461 applications were recommended for core FM CME, 205 applications were recommended for non-core FM CME and 10 applications were rejected.

The process of applying CME for Category 1B events has also been further streamlined. CME organisers only need to submit the hard copy of the application forms to the College, either by snail mail or by hand. Electronic copies are no longer required.

With effect from March 2004, the College will only evaluate applications applying for core FM CME. All non-core applications would be handled directly by the Singapore Medical Council.

Category 1B Applications:

	For Year 2003												
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
CORE	40	33	51	32	19	4	44	52	52	60	61	13	461
NON CORE	7	21	21	8	3	10	25	37	26	20	22	5	205
REJECT	0	0	0	3	0	0	1	1	0	5	0	0	10
Total Applications	47	54	72	43	22	14	70	90	78	85	83	18	676

Review of Category 1B Applications For The Month of October 2003

	Analysis For The Month of October 2003			
	Core FM	Non-core FM	Rejects	Reasons For Rejection
Pharmaceutical Companies	20	10	4	• No speaker's CV, Speaker employed by Funder • Product launch need to view detailed detailed programmes • No learning objectives, late submission
Restructured Hospitals	33	4	0	-
Societies	1	0	1	• Event conducted overseas. Does not qualify under Cat 1B
Private Groups/Hospitals	5	6	0	-
MOH	1	0	0	-
Total	60	20	5	

COLLEGE'S ROLE AS CME PROVIDER

The FPSC system is formulated to meet the increasing need for relevant skill courses and increased interest in CME when it was made compulsory in 1 January 2003. The FPSC is a quality CME mark of the College. It would meet the needs of three groups of doctors:

- Those who attend certain components of the FPSC for Core FM CME. This is likely to be the biggest group;
- Those who attend all the components of an FPSC to qualify for skills certification; and
- Those enrolled in the GDFM who attend it as their mandatory elective skills course.

Each FPSC may comprise a mixture of the following components:

1. Distance Learning with verification
2. Lectures
3. Workshops
4. Small group activities including clinical attachments, tutorials, ward-rounds
5. Assessments which can be written, oral, demonstration and/or clinical

The FPSC for this year are:

- Hypertension
- Musculoskeletal
- Hyperlipidemia
- Men's Health
- Pain Management

On 27th October 2002, the College has successfully launched its first Family Practice Skill Course (FPSC) on basic home health care. Coupled with a distance-learning module of 30 multiple-choice questions, a total of 343 answer-sheets were submitted for marking. 339 doctors passed the test and will be awarded with six FM CME points.

No. of Doctors Attempted/ Attended:			
	Distance Learning	Seminars/workshops 1	Seminars/workshops 2
Home Healthcare	343 -338 passed -5 failed	Workshop 1: 47	Workshop: 39
Asthma Management	504 -501 passed -3 failed	1st run: Seminar 1: 64 Workshop 1: 65 2nd run: Seminar 1: 87 Workshop 1: 87	1st run: Seminar 2: 62 Workshop 2: 62 Seminar 2: 91 Workshop 2: 91
Hypertension	623 -617 passed -6 failed	Seminar 1: 110 Workshop 1: 79	Seminar 2: 108 Workshop 2: 79
Musculoskeletal	498 -497 passed -1 failed	Seminar 1: 106 Workshop 1: 63	Seminar 2: 113 Workshop 2: 33
Hyperlipidemia	406 -406 passed	Seminar 1: 113 Workshop 1: 82	Seminar 2: 104 Workshop 2: 28
Men's Health	356 -356 passed	Seminar 1: 112 Workshop 1: 62	Seminar 2: 94 Workshop 2: 23
Pain Management	390 -389 passed -1 failed	Seminar 1: 92 Workshop 1: 56	Seminar 2: 94 Workshop 2: 52

Because of the SARS epidemic, the in persons attendance segments of the Hypertension course had to be postponed.

E-Learning

The College's e-learning website (<http://www.onlinemedlearning.org>) has since rolled out 4 modules:

Module 1: Disease Transmission & Counselling Skills

Module 2: Adolescent And Child Health

Module 3: Principles & Practice

Module 4: Communication & Counselling

Typically, each module comes with 2 case scenario, 1 role-playing exercise, reading materials, multimedia clips, and a set of MCQ questions. Doctors who have attempted all components of the module including passing the MCQ test would be able to gain 5 core FM CME points.

A/Prof Cheong Pak Yean

Chairman, CME Committee /

Assessor-in-Chief, Board of CME Assessors

Report on The Family Medicine Teaching Programme

1 April 2003 - 31 March 2004



The Family Medicine Training Programme is a staple of the Graduate Diploma and MMed(Family Medicine Programmes). In the year under review, Modules 4, 5, 6 and 7 were completed. Each module continues to consist of 8 sessions of distance-learning materials sent to the participants by e-mail and also posted on the College e-learning website (<http://www.onlinemedlearning.org>). Four workshops on case studies for each module were conducted to consolidate the learning.

The notes for the modules are on the College's elearning website and can be downloaded by the Family Medicine trainees. By having them online has the added advantage that they can be referred to twenty-four hours a day.

The modules are attended by the GDFM trainees, the PPS trainees and MOH trainees as requirements for their courses. In the year under review, the number of doctors enrolled on the course is shown in the table below.

Module	Period	GDFM Trainees	PPS Trainees	MOH Trainees	TOTAL
4	14 Jun – 21 Jun 2003	88	11	35	134
5	2 Aug – 30 Aug 2003	119	8	41	168
6	2 Nov – 22 Nov 2003	119	8	41	168
7	7 Feb – 29 Feb 2004	119	8	39	166

Thanks are due to the Chairmen and Resource Persons for their contributions in the teaching programme.

Module 4:

14 Jun '03- Stroke and rehabilitation, Dr Sitoh Yi Yeow; Ageing, Fitness, and Assessment, Dr Chan Kin Ming; Prescribing For The Elderly, Dr Tan Thai Lian; The Frail Elderly, Dr Ee Chye Hua; Chairperson: Dr Matthew Ng Joo Ming

21 Jun '03 -Common Psychiatric Problems (1), Dr Douglas Kong; Common Psychiatric Problems (2), Dr Tan Hao Yang; Common Psychiatric Problems (3), Dr Brian Yeo; Computer Use In The Clinic, A/Prof Cheong Pak Yean; Chairperson: Dr Matthew Ng Joo Ming

Module 5:

2 Aug '03 - Human Behaviour And Beliefs, A/Prof Goh Lee Gan; The Family In Health And Illness, /Prof Goh Lee Gan; Chairpersons: A/Prof Goh Lee Gan, Dr Chan Nang Fong

16 Aug '03 - Public Health Disease Control And Immunisation, Dr Ooi Peng Lim; Preventive Medicine In General Practice, Dr Matthew Ng; Chairpersons: Dr Matthew Ng, Dr Lee Kheng Hock

23 Aug '03 - Acne, Pigment, Nail And Hair Disorders, Dr Tham Siew Nee Nee Wong; Standard of Care, Managed Care And Infamous Conduct, A/Prof Goh Lee Gan; Chairpersons: A/Prof Goh Lee Gan, Dr Kwong Kum Hoong

30 Aug '03 - Approach & Non-Infective Dermatoses, Dr Tham Siew Nee Nee Wong; Infective Dermatoses, Dr Tham Siew Nee Nee Wong; Chairpersons: Dr Matthew Ng, A/Prof Cheong Pak Yean

Module 6:

2 Nov '03 - Occupational Health: An Overview, Dr Chan Chung Tsing Gregory; Workplace Hazards & Occupational Diseases, Prof David Koh Soo Quee; Chairpersons: Dr Winnie Soon Shok Wen, Dr Jonathan Pang

8 Nov '03 - Emergency Care & Housecall, Dr Shirley Ooi Beng Suat; Travel Medicine, A/Prof Lim Lean Huat; Chairpersons: A/Prof Cheong Pak Yean, Dr Michael Wong Tack Keong

15 Nov '03 - Fitness To Work: Return To Work, Dr Lee Lay Tin; Rheumatic, Bone & Joint Disorders, Dr Seow Kang Hong; Chairpersons: Dr Lee Soon Seng, Dr Lim Fong Seng

22 Nov '03 - Sports & Accidental Injuries, Dr Teh Kong Chuan; Setting Up Practice, Mr Christopher Chong; Chairpersons: Dr Cheong Seng Kwing, Dr Wee Chee Chau

Module 7:

7 Feb '04 – STD, HIV & AIDS, Dr T Thirumorthy; Common Gynaecological Disorder, Dr Yap Lip Kee; Chairpersons: Dr Matthew Ng Joo Ming, Dr Ng Chung Wai Mark

14 Feb '04 – Gynaecological Cancers, Dr Chieng Kai Hieng Roland; Family Planning & Infertility, Dr Chan Kong Hon; Chairpersons: Dr Matthew Ng Joo Ming, A/Prof Goh Lee Gan

22 Feb '04 – Common Neurological Disorders, Dr Lim Tock Han; Eye Disorders, Dr Chong Piang Ngok; Chairpersons: Dr Lew Yii Jen, A/Prof Goh Lee Gan

29 Feb '04 – Financial Management: accounting perspective, medical perspective, Dr Tan See Leng; Ear, Nose & Throat Disorders, Dr Chew Chuan Tieh; Chairpersons: Dr Loke Wai Chiong, Dr Ling Yee Kiang

Associate Professor Goh Lee Gan

Course Director

Family Medicine Teaching Programme

Report of The International Committee

1 April 2003 – 31 March 2004

Chairman : A/Prof Goh Lee Gan
Members : A/Prof Cheong Pak Yeap
: Dr Lau Hong Choon
: Dr Lee Kheng Hock
: Dr Tan See Leng



TERMS OF REFERENCE

This Committee was set up in July 2001 with the following terms of reference:

1. To advise the College Council on developments in Family Medicine in the international scene;
2. To implement activities decided by WONCA World & WONCA Asia Pacific Region;
3. To implement bilateral activities in Family Medicine teaching, research and practice

KEY ACTIVITIES IN THE YEAR UNDER REVIEW

The International Committee plays a facilitating role in activities of the College that impact on bilateral, regional and the global family medicine world. With the clearance of SARS from May 2003 onwards in both Singapore and the Asia Pacific, there were catch up activities.

In the year under review, the following were the key activities:

- The College continues to have a firm relationship with the WONCA World Secretariat located in the College premises. Opportunities were made of the close geographical proximity for information exchange and interaction between College Council members and WONCA visitors.
- The College is represented on WONCA by Dr Matthew Ng Joo Ming, our Council Member.
- The College hosted a study team of 13 doctors and administrators from Vietnam headed by Prof Nguyen Thi Kim Chuc. The team members were: Hoang Cong Dac, Quang Van Tri, Nguyen Van Thang, Le Van Khang, Dang Thi Kim Oanh, Nguyen Thi Thuy, Nguyen Quoc Hung, Trinh Xuan Trang, Tran Tien Manh, Phan Thi Bich Thao, Tran Quy Tuong, and Nguyen Thi Thuy. They were in Singapore to study the development of the Family Medicine programme for both undergraduate and postgraduate levels. Their visit was documented in the College Mirror (2004 March, Volume 30(1):15).
- The College sent a study team to Glasgow to study the transformation of primary care in the West of Scotland. The study was facilitated by the University of Glasgow Department of Postgraduate Education. The comprehensive programme covered various aspects of practice and service delivery, training, and research. There were also field visits to the Scottish practices. The team was also briefed on the recent developments in professional standards and summative assessment programmes of the Royal College of General Practitioners. Professor Lewis Ritchie, the Professor of General Practice in Aberdeen made the





special trip from Aberdeen to give an afternoon presentation on undergraduate training and departmental research programme in his University. There were several booklets of useful resource materials given by Professor Stuart Murray and his postgraduate education team of the West of Scotland and Professor Lewis Ritchie. Special thanks are due to Professor Stuart Murray and the West of Scotland Region for a sponsorship of 8,000 sterling pounds towards this study trip.

- A team of 8 College members attended the Wonca Beijing Regional Conference held from 3 to 7 November 2003.
- The Wonca 2007 Host Organising Committee headed by Dr Tan See Leng has been active in laying the groundwork for the 2007 Wonca World conference.



PLANS IN THE COMING YEAR

- The College will be sending a delegation to the WONCA 17th World Conference which will be held from 13-17 October 2004 at the Orange County Convention Center, Orlando, Florida, USA. The Theme of the Conference is Family Medicine – Caring for the World.
- The College will be sending delegates to participate in the Workshop Research Network Development for WONCA Asia Pacific Region Jointly Organized By The General Practitioners /Family Physicians Association, Thailand, The College of Family Physicians of Thailand and WONCA Asia-Pacific Region. The dates are 10-12 July 2004.

INVITATION TO PARTICIPATE

The International Committee invites all College members to participate in its activities planned for the coming year.

A/Prof Goh Lee Gan
Chairman
International Committee

Report of The Membership Committee

1 April 2003 – 31 March 2004

Chairman : Dr Yii Hee Seng
Members : Dr Tan Chee Beng
 : Dr Tan See Leng
 : Dr Tay Ee Guan



The membership of the College increased from 873 on 1st April 2003 to 1074 on 31st March 2004.

Our Membership Committee has continued to work to enhance the value of College Membership through training and CME programmes. The College is fully aware that Family Physicians have to work long hours and yet keep up with their CME. Hence we are always looking at ways to allow our members to achieve their training and required points as efficiently as possible.

This year, we introduced e-learning, in addition to the quarterly modules that are sent together with The Singapore Family Physician. The costs of producing these modules have been defrayed by generous donations from various pharmaceutical partners and grants from the Infocomm Development Authority of Singapore.

Members can now login to the College's e-learning website: <http://www.onlinemedlearning.org> for CME training modules. Doctors who successfully complete a module will be able to gain 5 core FM CME points which will be accredited accordingly.

Dr Yii Hee Seng
Chairman
Membership Committee

Report of The Publications Committee

1 April 2003 – 31 March 2004

The Singapore Family Physician

Chairman & Honorary Editor : Dr Matthew Ng Joo Ming
Administrative Editor : Ms Ng Mun Feng
Section Editors : A/Prof Goh Lee Gan
: Dr Shivcharan Kaur Gill
: Dr Goh Khean Teik
: Dr Julian Lim Lee Kiang
: Dr Tan Chee Beng
: Dr Michael Wong
Ex-Officio : A/Prof Cheong Pak Yean



The College Mirror

Editor : Dr Ong Jin Ee
Editorial Board Members : Dr Seah Chiew Wan
: Dr Shiau Ee Leng
: Dr Yvette Tan
Advisors : A/Prof Cheong Pak Yean
: A/Prof Goh Lee Gan
: Dr Lee Kheng Hock
Editorial Executive : Ms Jace Phang

The Singapore Family Physician journal will continue on its emphasis on providing a distance-learning package for our members and all family physicians to achieve their target of compulsory CMEs.

The Journal will be a platform for delivery of quality programmes with an emphasis on clinical problems related to family practice. In the forth-coming issues themes such as communication and counselling and diabetes will be emphasized.

The editorial board has a new Editorial Assistant, Ms Ng Mun Feng on Board.

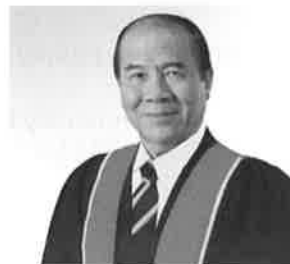
The College Mirror has also underwent a facelift with the Mirror now running as a standalone publication. The College Mirror is currently led by Dr Ong Jin Ee, as its editor, and Drs Seah Chiew Wan, Shiau Ee Leng and Yvette Tan as its editorial board members. The group is also supported by A/Prof Cheong Pak Yean, A/Prof Goh Lee Gan and Dr Lee Kheng Hock as its advisors, and an editorial executive, Ms Jace Phang, assisting in the editorial layout.

Thanks to all in the editorial board and especially the College administrative executives, the journal has been delivered on time to the members.

Dr Ng Joo Ming Matthew
Chairman & Honorary Editor
Publications Committee

Report of The Undergraduate Teaching Committee

1 April 2003 – 31 March 2004



Chairman : A/Prof Lim Lean Huat
Members : A/Prof Goh Lee Gan
: Dr Ajith Damodaran

The 4-week Family Medicine posting was ran smoothly except for Batch A which was interrupted by the SARS outbreak. The make-up will be held in May this year.

In the four-week posting, two weeks were spent in the GP setting and the second two weeks in the Polyclinic setting. In addition, the students were given a one day teaching and clinical exposure on palliative care. The students had a one-day attachment in pairs to a private paediatrician. For each week there were departmental teaching sessions to give the students a headstart on the knowledge and skills to be acquired for the week. There were also joint teaching sessions hosted by the COFM Departmental FM staff, full-time and part-time, and the Polyclinic staff.

The continuous assessment is also provided by the GP tutors and the Polyclinic tutors. The four case write-ups and a written end-of-posting test also add to the total continuous assessment mark.

The posting would not have been possible without the contribution of some 40 GP tutors per batch and some similar number of polyclinic tutors. Then there are also the 13 teachers in palliative care as well as the 11 private paediatricians. Their names are given on the next two pages.

On behalf of the University and the College of Family Physicians, the College's Undergraduate Committee is grateful for the support and appreciates the efforts of one and all in making the posting useful, meaningful and interesting to the students.

LIST OF GP TUTORS – 2003/2004

Names

Dr Ajith Damodaran	Dr Loong Tze Wey
Dr Ang Boon Kiang, Steven	Dr Low Chee Wah, Mark
Dr Ang Choon Kiat, Alvin	Dr Low Kee Hwa
Dr Bina Kurup	Dr Mao Fong Hao
Dr Chan Swee Mong, Paul	Dr Omar bin Saleh Talib
Dr Chang Tou Liang	Dr Pang Sze Kang, Jonathan
Dr Cheong Wei Kok, Bernard	Drs Ang Wui Chi, Jason/ Ho Jee Meng
Dr Chia Swee Hoong, Daniel	Dr Seow Hoong Wei, Gabriel
Dr Chiang Wing Chiong	Dr Siaw Tung Yung
Dr Chong Poh Heng	Dr Shiau Ee Leng
Dr Chow Yew Choong, Vincent	Dr Soh Eng Liong, Lawrence
Dr Chui Peng Leong	Dr Tan Beng Teck
Dr Dairanathan, Justina	Dr Tan Kee Wang
Dr Gan Tek Kah	Dr Tan Kok Eng
Dr Goh Ming Kiong	Dr Tan Teck Hong
Dr Goh Chin Ai, Moira Clare	Dr Tan Tze Lee
Dr Gong Swee Choo	Dr Tan Yew Seng
Dr Ho Jee Meng	Dr Tan Yu Sing, Luciene
Dr Hui Keem Peng, John	Dr Tay Guan Yu, Jeff

Dr Hui Meng Tong, Jasmine
 Dr Kang Aik Kiang
 Drs Kevin Koh & Koh Eng Kheng
 Dr Koh Kheng Keah, Philip
 Dr Kwang Kum Hoong
 Dr Lai Kok Wei
 Dr Lee Chon Sham
 Dr Lee Kheng Hock
 Dr Ler Teng Noh, Diana
 Dr Lim Chien Wei
 Dr Lim Erk Meng
 Dr Lim Jit Biaw, Benny
 Dr Lim Lee Kiang, Julian
 Dr Lok Ying Fang
 Dr Lim Siew Hong, Priscilla
 Dr Loo Choo Woon, Daniel

Dr Tsou Yu Kei, Keith
 Dr Thio Yauw Leng, Bernard
 Dr Tsou Yu Kei, Keith
 Dr Wong Kum Hoong
 Dr Wong Ming
 Dr Wong See Hong
 Dr Wong Ted Min
 Dr Wong Weng Yew
 Dr Wee Chee Chau
 Dr Yap Siong Yew, Mark
 Dr Yap Soo Kor, Jason
 Dr Yeo Pheng Nam, Charles
 Dr Yee Jenn Jet, Micheal
 Dr Yeo Peng Hock, Henry
 Dr Yii Hee Seng
 Dr Yun Kok Onn

LIST OF POLYCLINIC TUTORS 20/2004 – NATIONAL HEALTHCARE GROUP

Names

Dr Chin Swee Aun
 Dr Chong Phui Nah
 Dr Chua Hwee Ling, Angelia
 Dr Leong Soh Sum, Helen
 Dr Lew Yii Jen
 Dr Lim Chee Kong
 Dr Lim Fong Seng
 Dr Ng Ming Yann, Karen
 Dr Ong Chooi Peng
 Dr Tan Suan Leng, Elaine
 Dr Tang Wern Ee,
 Dr Tung Yew Cheong

Polyclinic

Bukit Batok
 Toa Payoh
 Yishun
 Choa Chu Kang
 Jurong
 Yishun
 Choa Chu Kang
 Toa Payoh
 Jurong
 Hougang
 Toa Payoh
 Woodlands

LIST OF POLYCLINIC TUTORS 2003/2004 - SINGHEALTH

Names

Dr Ang Su Lin, Vivien
 Dr Chow Mun Hong
 Dr Chua Chi Siong
 Dr Goh Sing Hong
 Dr Adrian Ee
 Dr Goh Soon Chye, Paul
 Dr Ho Chih Wei, Sally
 Dr Hwang Siew Wai
 Dr Lim Hwee Boon
 Dr Lim Mien Choo, Ruth
 Dr Ling Yee Kiang
 Dr Lo Yoke Hew, Penny
 Dr Loke Wai Chiong
 Dr Ng Lai Peng
 Dr Ong Chin Fung
 Dr Ong Wah Ying
 Dr Sim Kok Peng
 Dr Soh Ling Ling
 Dr Shah Mitesh
 Dr Ng Chung Wai
 Dr Swah Teck Sin

Polyclinic

Bedok
 Queenstown
 Tampines
 Tampines
 Outram
 Tampines
 Geylang
 Marine Parade
 Marine Parade
 Marine Parade
 Pasir Ris
 Bedok
 Bukit Merah
 Tampines
 Bedok
 Marine Parade
 Geylang
 Geylang
 Geylang
 Outram
 Bedok

Dr Tan Chee Beng
Dr Tan Choon Seng, Gilbert
Dr Tan Chieu Har, June
Dr Tan Kok Leong
Dr Tan Ngiap Chuan
Dr Tse Wan Lung, Derek
Dr Wee Kien Han, Andrew
Dr Wong Song Ung
Dr Wong Tack Keong, Micheal

HQ
Bukit Merah
Bukit Merah
Geylang
Pasir Ris
Tampines
Marine Parade
Queenstown
Bukit Merah

LIST OF PAEDIATRICIANS TUTORS

Dr Chan Kit Yee
Dr K Vellayappan
Dr Yip Yeng Yoong
Dr Sivasakaran Subramaniam
Dr Wong May Ling
Dr Ho Nai Kiong

Dr Ngiam Thye Eng
Dr William Yip Chin Ling
Dr Lee Bee Wah
Dr Gong Wei Kin
Dr Belinda Murugasu

LIST OF PALLIATIVE CARE TUTORS

Dr Akhlieswaran
Dr Angel Lee
Dr Cynthia Goh
Dr Ian Leong
Dr James Low
Dr Khin Khin Win
Dr Koh Nien Yue
Dr Kok Jaa Yang
Dr Koo Weng Hsin
Dr Lynette Ngo
Dr Noreen Vhan
Dr Pang Weng Sun
Dr Roslalie Shaw

Hospice Care Association
Tan Tock Seng Hospital
National Cancer Centre
Tan Tock Seng Hospital
Alexandra Hospital
Singapore Cancer Society
Tan Tock Seng Hospital
Dover Park Hospice
National Cancer Centre
Dover Park Hospice
National Cancer Centre
Alexandra Hospital
National Cancer Centre

LIST OF FULL AND PART-TIME DEPARTMENTAL STAFF FOR 2003/2004

Associate Professor Goh Lee Gan
Dr Jeanette Lee
Adj A/Prof Lim Lean Huat
Adj A/Prof Chan Nang Fong
Adj A/Prof Cheong Pak Yean
Dr Annelies Wilder-Smith

A/Prof Lim Lean Huat

Chairman

Undergraduate Teaching Committee

Report of The WONCA 2007 Host Organising Committee

1 April 2003 – 31 March 2004

Chairman	: Dr Tan See Leng
Vice-Chairman	: Dr Tan Chee Beng
Honorary Secretary	: Dr Matthew Ng Joo Ming
Honorary Treasurer	: Dr Wong Weng Hong
Scientific Chairman	: Dr Lee Kheng Hock
Scientific Co-chairmen	: Dr Tay Ee Guan
	: Dr Lim Fong Seng
I.T. Resource Chairman	: Dr Tan Sze Wee
Social & Cultural Chairwomen	: Dr Chng Woei
	: Dr Tan Yu Sing Lucienne
Members	: Dr Chan Boon Kheng
	: Dr Ng Chee Lian Lawrence
	: Dr Wong Chiang Yin
Advisor	: A/Prof Goh Lee Gan



The Wonca 2007 organizing committee conducted monthly meetings for the entire year and was able to put together a scientific programme for the conference in July 2007. Some members of the committee also attended the Wonca Regional Conference in Beijing in the first week of November 2003 to learn from the organisers of the regional conference as well as put up a publicity blitz for the world conference here in 2007. In addition to running a manned booth for three days, the Chairman also presented to the council members of the Asia Pacific region of Wonca inviting them to urge their country members to participate in the 2007 world conference here in Singapore.

The committee also held a series of three presentations for the executive committee of the College to decide on the choice of a Professional Conference Organiser(PCO) to help in the logistics of organising the world conference in 2007. The decision was unanimously taken in favour of Pacific World as they came in with the lowest bids and offered the most cost effective and value added proposal for the College's organising committee.

The committee will also be sending a team of up to 10 members to the Wonca world conference in October 2004 to publicise our conference in 2007. The expected turnout at this conference to be held in Orlando is approximately 1500 international delegates with some 8000 American delegates attending as well. It promises to be one of the largest conference turnouts in the history of medical conferences and will be an excellent opportunity for our committee to promote the 2007 Wonca World Conference.

For the last financial year ended 31st March 2004, the total expenditure incurred amounts to S\$20,845.00.

Dr Tan See Leng

Chairman

WONCA 2001-2008 Committee

Report of The Finance Committee

1 April 2003 – 31 March 2004

Chairman: Dr Yii Hee Seng
Members: A/Prof Cheong Pak Yean
Dr Arthur Tan Chin Lock
Dr Lee Kheng Hock



The College Finances remain healthy, with total income of S\$777,936 and expenditure totaling S\$539,965, resulting in a surplus of S\$237,971 for the last financial year ending 31st March 2004. We have been prudent in keeping costs low. This had allowed us to have a healthy surplus for the year.

All along, the College has been using a Cash based system of accounting. This does not give us a good idea of how we are balancing income versus expenditure on a month to month basis. Since the Council meets once a month, it is crucial for our accounts to reflect the true state of our financial health. The current Cash based system gives rise to a “feast or famine” phenomenon, where income is recognized in full during the month that the income is earned e.g. when a member pays his subscription fee, 100% of this fee is recognized as income for that month. Likewise, when participants pay course fees, that entire fee is recognized for that month, while expenses are incurred over the next few months.

The Accrual system will allow us to apportion income over the length of time that the income is going to be expensed. As an example, the annual subscription fee paid by a member will be recognized over 1 year instead of 1 month. Hence the accounting system will reflect 1/12 of that fee every month. For course fees, the fee paid will be recognized over the duration of the course. Likewise, expenses are recognized as they are incurred.

This system also allows us to track the surplus/deficit incurred in organizing courses and programs more accurately. It is important for the long term financial health of the College, to be able to recoup costs of each and every course or program we organize. The College can decide to provide subsidies for some programs, especially for college members, but we must know the quantum we are spending, and be accountable for every dollar spent.

Listed below is a table showing the income and expenditure of the 4 main programmes organized by the College in the last financial year.

ACTIVITY	INCOME	EXPENDITURE	BALANCE
FMTP Modular Course	\$26,333	\$1,495	\$24,838
FMFP programme	\$30,731	\$1,610	\$29,121
Graduate Diploma in FM	\$65,804	\$22,200	\$43,604
Continuing Medical Education	\$253,072	\$16,225	\$236,847

We are also prudently tracking costs and expenses, especially manpower costs, to ensure we keep costs low and achieve high productivity. This will allow us to maximize value for our members. We are pleased to report that manpower costs amounted to 17% of our annual income, which is acceptable compared with commercial organisations.

Dr Yii Hee Seng
Honorary Treasurer

APPENDIX A

College Professional Development Programme for the Award of MCFP(Singapore)

INTRODUCTION

There is a need to upgrade the present criteria for the award of the Collegiate membership to bring it in line with international standards and the global trend of award by objective assessment and validation. The **College Professional Development Programme (CPDP)** seeks to fulfill this need by introducing a training programme as well as a summative assessment process.

ENTRY REQUIREMENTS

The minimum entry requirements are:

- GDFM or recognized equivalent
- Professional good standing
- Ordinary Member of the CFPS for at least 2 years.

PROGRAMME

The programme consists a course of three modules, each with a summative assessment. The order for the modules may be completed in any order. The normal duration is two years but completion within a year is allowed.

Module	Course title and learning methods	Summative Assessment
1	Effective clinical consultation skills course – Follows the format of the family practice skills course and its components (i.e. 6 distance learning units with assessment by MCQs, seminars and workshops over 2 days. In addition there are 2 tutorial sessions using video recording of consultation as a learning tool.	Pass in video consultation assessment. Candidates will be required to submit 6 video consultations for assessment within the 2-year training period.
2	Clinical quality course – Follows the format of the family practice skills course and its components* (i.e. 6 distance learning units with assessment by MCQs, seminars and workshops over 2 days. In addition there are 2 practical sessions on the application of knowledge in significant events analysis and the conduct of a audit programme in a clinic.	Pass in clinical quality project assessment. Candidates will be required to submit 3 case studies of significant events analysis OR conduct an audit project in his or her clinic of practice.
3	Professional development project under supervision – A project to be completed under the supervision of an assigned mentor. The candidate are allowed to choose one of the following projects (a)The organization and conduct of a modular CME course or other teaching programmes. (b)Publish a paper in a medical journal such as the Singapore Family Physician or its equivalent. (c)Other professional development projects approved by the College Council**.	A satisfactory supervisor's report. A pass in the candidate's report of the professional development project.

* The distance-learning course will follow a 6 unit study format with 30 MCQs; 2 seminars and a workshop on skills development activities

** This is an apprenticeship activity and relevant training will be provided by the supervisor. The CFPS will provide the resources and logistic support for the projects.

AWARD

The successful completion of the summative assessment of all the three modules will satisfy the conditions for award of the MCFP, Singapore.

COST

SGD \$1500. (Includes administration, the above 2 skills courses, workshops & tutorials. Upon successful completion, the trainee would be awarded the MCFP(S) in the FM Convocation. The prevailing MCFP entrance and initiation fee applies.)

APPENDIX B

COLLEGE CME ASSESSORS' BOARD (CCAB)

Chairperson : A/Prof Cheong Pak Yean
Members : A/Prof Goh Lee Gan
Dr Arthur Tan Chin Lock
Dr Chan Nang Fong
Dr Goh Khean Teik
Dr Lim Fong Seng
Dr Lim Lee Kiang Julian
Dr Tay Ee Guan
Dr Yii Hee Seng

	<u>Accredited FM CME Advisor</u>	<u>Organisation</u>
1	Dr Kalaimamani D/O Kanagasabai	Ang Mo Kio Hospital Limited
2	Dr Henry Yeo	Bedok Medical Centre
3	Dr Khemani Neeta Parshotam	Chai Chee Clinic & Surgery
4	Dr Chang Ming Yu James	Chang Clinic
5	Dr Chang Tou Liang	Chang Clinic
6	A/Prof Lim Lean Huat	Dr Lim Lean Huat & Associates Pte Ltd
7	Dr Paul Chan	LIM & CHAN Clinic
8	Dr Justina Dairianathan	Drs Bain & Partners
9	Dr Wong See Hong	Healthcare Medical Centre
10	Dr Siaw Tung Yeng	Healthway Clinic & Surgery
11	Dr Tan Yu Sing Lucienne	Healthway Eastern Clinic
12	Dr Huan Meng Wah	Huan Clinic
13	Dr Lok Ying Fang	King George's Medical Centre
14	Dr Low Mun Heng Gerard	L & L Family Medicine Clinic
15	Dr Chong Phui-Nah	National Healthcare Group Polyclinics
16	Dr Lim Carol	NHG Polyclinics - Choa Chu Kang
17	Dr Cheong Seng Kwing	NHG Polyclinics - Ang Mo Kio
18	Dr Goh Khean Teik	National Healthcare Group
19	Dr Kurup Bina	Raffles Medical Group
20	Dr Kwan Yew Seng	Raffles Medical Group
21	Dr Loh Wee Tiong Alfred	Raffles Medical Group
22	Dr Ajith Damodaran	Serangoon Garden Clinic & Dispensary
23	Dr Tan Chee Beng	Singhealth Polyclinics
24	Dr Swah Teck Sin	Singhealth Polyclinics - Bedok
25	Dr Tan Ngiap Chuan	Singhealth Polyclinics - Pasir Ris
26	Dr Goh Soo Chye Paul	Singhealth Polyclinics - Tampines
27	Dr Tan Boon Yeow	St Luke's Hospital

APPENDIX C

PROPOSAL FOR THE GRADUATE DIPLOMA IN FAMILY MEDICINE(GDFM) AS THE NATIONAL STANDARD FOR FAMILY DOCTORS IN SINGAPORE

Presented to the Ministry of Health from the College of Family Physicians Singapore on 3rd June 2004

1 INTRODUCTION

- 1.1 **The Ministry of Health has set several objectives for primary care in Singapore.** The role of the family doctor should be to promote healthy living focused on health promotion and disease prevention and to provide more than just episodic outpatient care. It is a national goal that every Singaporean should have a good family doctor.
- 1.2 **The College proposes that a minimum vocational standard for family doctors to be the Graduate Diploma In Family Medicine (GDFM).** The College perceives that maintaining vocational standards and raising the level of professionalism in family doctors are essential pre-requisites to the achievement of the stated goals. The GDFM is developed and conducted by the College with examinations by the National University of Singapore. This programme has been benchmarked against the Australian and United Kingdom national standards of primary care. Since its launch in 2000, it has proven to be relevant and of a standard achievable by practicing doctors.
- 1.3 **The vision is to train at least 90% of family doctors to reach the level of the GDFM in 8 to 10 years.** Presently only 20% of doctors in Singapore have received some form of vocational training in primary care (See Annex A).

2 WHY IS TRAINING IN FAMILY MEDICINE NECESSARY?

- 2.1 **Undergraduate education is not enough.** In the United Kingdom, a vocational certificate of training is required to be a principal in general practice. In the US, primary care doctors are board certified in family medicine or general internal medicine. In Australia, they must hold the FRACGP to be principals (See Annex B). In Singapore, a registered medical practitioner presently does not need any vocational training in family medicine/general practice to practice as a GP. This is an anomaly that must be urgently addressed.
- 2.2 **The increasing numbers of chronic medical problems and geriatric patients in developed countries require a model for patient-centred and community based continuing care.** The present community based care in Singapore is more episodic and acute in nature. Vocational training is needed to empower family doctors to focus on continuing and elderly care.
- 2.3 **Medical specialization and sub-specialisation have created the need for community based, generalist doctors** who are able to fill in the gaps of care and to integrate the management of the patient. Vocationally trained family doctors are the community based, generalist doctors needed in Singapore.

3 WHAT ARE THE BENEFITS OF BETTER TRAINING OF FAMILY DOCTORS?

- 3.1 **Freeing up costly resources.** Well-trained primary care doctors will be able to manage conditions without wasteful and unnecessary referrals to hospitals thereby freeing up the costly resources to provide better care to patients managed in the wards and in the specialist outpatient clinics (SOC). The national emphasis on prevention and management of risk factors will also help to keep people healthy and minimize the use of expensive interventional care.
- 3.2 **Implementing national health care policies and quality assurance initiatives.** A primary care that is staffed by well-trained doctors who are committed to the values of family medicine will be more effective in carrying out national health policies and quality assurance initiatives.

3.3 Imparting principles and values of family medicine. Besides skills and knowledge, vocational training imparts the principles and values of family medicine. The emphasis on communication, preventive care, continuing care and patient centeredness will promote personalized primary care.

3.4 Nurturing functional groups and teamwork. A national training structure will provide opportunities to form functional groups and encourage co-operation and peer interaction. This builds social capital and enables quality improvement activities that require peer review and peer support. It will also promote co-operation between clusters and between sectors.

4. ARE THERE POSSIBLE NEGATIVE EFFECTS?

4.1 Would cost of primary care go up? Fees are unlikely to go up as these are determined primarily by market forces and not FM degrees or training. Family physicians with Mimed. or GDFM now in practice are not charging higher or significantly higher in giving better service. In fact having more vocationally trained family doctors will bring down the overall cost of healthcare with better and more expert care.

4.2 Would better training necessarily translate to better care? The strategy is to have training that emphasizes practical application of skills, knowledge and promote evidence based, cost-effective interventions for better care. This strategy is found in the Graduate Diploma in Family Medicine as it emphasizes practical skills and knowledge.

4.3 Would the training disrupt service delivery? The GDFM program allows practicing doctors to work and study at the same time. Training is held outside normal office hours. It is IT-enabled distance learning, augmented by face-to-face workshops, skills courses and small group tutorials. The present cohorts working in hospitals, polyclinics and GP clinics have been able to complete training without any disruption in service delivery.

5. WHAT RESOURCES WILL BE REQUIRED FOR TRAINING 150 TO 200 DOCTORS PER YEAR TO GDFM LEVEL?

5.1 We will need greater and more sustainable training resources to meet the training of 150 to 200 doctors per year. To meet this challenge **we must pool together all available primary care training resources and co-ordinate all the training activities in family medicine.** So far, the College managed to put together the resources needed to train up to 50 to 60 doctors a year. The College will have to work with the clusters for effective implementation as most non-trainee doctors who end up as GPs will serve their 5-year bond in the clusters. Hence, the clusters will need to be mandated to channel the training of such doctors into the approved Family Medicine training programme, which is the proposed GDFM programme. The programme is not onerous and is benchmarked to the Australian and UK Family Medicine training.

5.2 Some indication of the resources needed are listed below:

- *Small group teaching.* Five trainees to each trainer, for 200-300 trainees for two years' cohort (150 X 2), we would require 80 trainers.
- *Big group teaching.* These workshops are held quarterly. We need 4-8 venues with class size of 50 each class for the two cohorts at any one time.
- *OSCE Examination held once a year.* We need 40 examiners for every 50 candidates for each cohort.

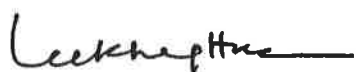
6. ACTIONS REQUIRED

6.1 We propose that the Ministry of Health adopt the GDFM as the minimum required vocational standard for independent primary care practice. The Ministry of Health can specify an achievable time frame and to exempt some groups of doctor who are already in practice.


6.2 We propose that a Joint Committee of Family Medicine Training be set up to mobilise all the available training resources. This will have representation from MOH, NUS and CFPS. The Committee will be given the clout to ensure that the objectives are met.

- 6.3 **We propose that MOH mandate non-specialist trainee doctors be trained in Family Medicine so that in effect a young doctor chooses either to be a specialist trainee or a Family Medicine trainee.** Family Medicine traineeship will not be onerous as the aim is to equip the doctor to practise good Family Medicine. Hence, they will be trainees at the GDFM level. The few who wish to do the MMed (FM) can do so after GDFM as the GDFM is an entry criterion.

Submitted on behalf of Council, College of Family Physicians, Singapore



Dr Lee Kheng Hock
Hon Gen Sec CFPS



A/Prof Goh Lee Gan
Censor-in-Chief CFPS



A/Prof Cheong Pak Yean
President, CFPS

Enclosure: Annex A & Annex B

ANNEX A

WHAT IS THE SITUATION OF FAMILY MEDICINE TRAINING IN SINGAPORE?

INTRODUCTION

The College has since 2000 turned its attention to develop the Graduate Diploma in Family Medicine (GDFM) programme, aimed at training the majority of primary care doctors to an enhanced level of family doctors.

Since the MMed (Family Medicine) programme was introduced in 1993, a total of 195 family physicians have graduated. These trained doctors presently fulfil the functions of family medicine trainers, consultant family physicians, CEOs and healthcare administrators. The existing MMed (FM) will now be a GDFM plus to achieve the desired standards for the said enhanced roles. The entry requirements for MMed (FM) are: (a) The GDFM, and (b) required clinical experience – 2 years of accredited hospital posting or 4 years accredited GP experience for the GPs.

THE GRADUATE DIPLOMA IN FAMILY MEDICINE (GDFM)

The GDFM is a two-year modular course consisting of 8 distance-learning modules, face-to-face case study workshops, practical skills courses, quarterly small group tutorials, and a summative assessment leading to the Diploma. See Table 1.

Year of intake (Y)	2000	2001	2002	2003	2004	Total
Number	48	22	67	51	34	226
Graduated (Y+2)	40	14	Exam Due Jul 04	Exam Due Jul 05	Exam Due Jul 06	54

ANNEX B

MINIMUM STANDARDS FOR GP PRACTICE IN DEVELOPED COUNTRIES

Australia. The Australian vocational training programme for family doctors is the FRACGP programme. Non-holders cannot register with the Government as vocationally trained GPs and will have a lower payment rate compared to the holders of the FRACGP. The GDFM programme is comparable in content to the Australian programme. The GDFM OSCE and Key Features problems are modelled after the FRACGP examination.

United Kingdom. The British national vocational training programme for family doctors/GPs is the summative assessment programme. A pass enables the family doctor to practice independently. Some 60% of these doctors take the MRCGP. Our GDFM has the similar training content and examination and has the edge of having a clinical examination compared to the British programme. They assess clinical consulting skills by a video assessment of cases.

United States. In the US, there is a board certification standard. This is a process of examination and ongoing maintenance of competency, which is conducted every seven years and is administered by the American Board of Family Practice. Between 80 to 90% of FPs meet this standard. There are practice restrictions for those who are not board certified. For example it is almost impossible to have an academic position without it. Also most hospitals require board certification although this is variable around the country. Also some insurance plans require it and it is certainly much harder to get a salaried job without certification.

APPENDIX D

POSITION STATEMENTS OF THE COLLEGE OF FAMILY PHYSICIANS SINGAPORE ON THE MANAGEMENT OF OPIATE DEPENDENCE WITH OPIOID REPLACEMENT THERAPY IN GENERAL PRACTICE

Presented to the National Workgroup on Guidelines on Opiate Dependence and Abuse on 5th April 2004.

Executive summary

The Council of the College of Family Physicians sees it important to provide clear guidelines and professional boundaries with respect to the management of opiate dependence by general practitioners (GPs) in the community. The objective of these guidelines is to ensure the delivery of proper care and to maintain professional safety in opiate dependence management. As a forerunner of such guidelines, the College therefore issues the following position statements:

1. The GP's role in the management of opiate dependence in the community should be focused along early detection and referral, counselling, and coordination of health services for the patient under his/her care.
2. The singular use of opioid replacement therapy using agents such as Subutex in the absence of a holistic rehabilitation programme is unacceptable standard of care.
3. The GP should adopt a team approach in the management of opiate dependence. We recommend early and continuing close collaboration with colleagues in the Institute of Mental Health.
4. The GP is responsible for referring any difficult cases that are beyond the scope of his capabilities in his practice to colleagues in the Institute of Mental Health.
5. Specific subgroups of patients namely, difficult cases or patients, those with recurrent abusive patterns, difficulty in maintaining therapeutic alliance, poorly controlled poly-pharmacy abuse, poor adherence to management, poor social support and co-morbid psychiatric problems should not be managed by the GP.
6. The GP clinic should preserve its identity as a clinic for general medical practice and not become a drug treatment centre and as such, each clinic should have no more than five cases of opiate dependence at any one time.
7. All GPs and their patients should be registered with the Ministry of Health.
8. All GPs who participate in opiate dependence management must be willing to be subject to surveillance of his practice records by the Ministry of Health.
9. The College proposes that the Ministry of Health, being the highest body of medico-legal opinion, be the body that provides the clinical governance necessary by keeping all doctors informed of the rules that govern appropriate practice, the penalties expected in the event of a breach of such rules, and to set in place an warning mechanism to keep all doctors informed of the initiation of any breaches.

Preamble

Opiate dependence is a complex condition with psychological, social, family, and medical dimensions. The opiate addict also tends to have dysfunctions of relationships that are both cause and effect of the addiction. As such, many family physicians have chosen not to be involved in the management of opiate dependence. Consequently, the small numbers of doctors who do not mind handling such cases are inevitably faced with the need to service disproportionately large numbers of patients, usually with limited resources. This situation exposes participating doctors, even those with noble intentions, to professional and personal risks as they grapple with the problem under suboptimal conditions.

Opioids, such as buprenorphine (Subutex®) or methadone are currently used to rehabilitate opiate dependence.

To ensure the proper patient consumption of the prescribed opioid, the Council of the College of Family Physicians (which will be referred to in this document as the "College") sees it important to provide clear guidelines and professional boundaries with respect to the management of opiate dependence by general practitioners (GPs) in the community. The objective of these guidelines is to ensure the delivery of proper care and to maintain professional safety in opiate dependence management. As a forerunner of such guidelines, the College therefore issues the following position statements. These statements are applicable to doctors who practices at GP clinics, and who use opioids as a form of treatment.

Position Statements

- 1. The GP's role in the management of opiate dependence in the community should be focused along early detection and referral, counselling, and coordination of health services for the patient under his/her care.**

The concepts of opiate dependence management, which include long-term care, holistic care, particularly in the context of the family are consistent with the comprehensive and continuity care concepts in family practice. The strengths of the GP are accessibility, continuity, and familiarity with the patient and his social/family structure, the ability to harness the community/specialist resources to rehabilitate the addict, and the ability to coordinate multi-disciplinary care. The College suggests that the role of the GP should be focused along his/her strengths to emphasize the aspects of early detection and referral, counselling, and coordination of health services.

- 2. The singular use of replacement therapy with opioids such as Subutex in the absence of a holistic rehabilitation programme is unacceptable standard of care.**

Pharmacotherapy must be considered as an adjunctive part of the GP's total armamentarium in the approach to opiate dependence. As with the management of any chronic and relapsing condition, pharmacotherapy per se without attention to the psychosocial domains is unlikely to result in long term clinical success. As such, the singular use of replacement therapy with opioids in the absence of a holistic rehabilitation programme is unacceptable standard of care.

- 3. The GP should adopt a team approach in the management of opiate dependence. We recommend early and continuing close collaboration with colleagues across the disciplines in the Institute of Mental Health.**

A team approach is crucial for the following reasons:

- a. The nature of drug dependence suggests the need for a multi-disciplinary approach, involving psychiatrists, counsellors, psychologist, therapists and social workers. The GP completes the medical link in the community.
- b. Initial interventions such as detoxification and stabilisation can be better performed at the tertiary setting, given the in-patient capabilities and para-medical support.
- c. Information and resource sharing avoids wastage of resources and time.
- d. Collaboration of clinical input within a predetermined protocol ensures that the management does not veer from the intended direction.

- 4. The GP is responsible for referring any difficult cases that are beyond the scope of his capabilities in his practice to psychiatrists in this instance, in the Institute of Mental Health.**

As with the management of any medical condition, the difficulties can fluctuate in the course of treatment. The GP must use his clinical judgement and direct the patient to the appropriate level that has adequate standard of care and adequate resources. The total management, particularly in difficult cases of opiate dependence, which requires a multidisciplinary team that comprise the specialist, counsellors, social workers, psychologists and psychotherapists, must prevail over individual management.

5. **Specific subgroups of patients namely, difficult cases or patients, those with recurrent abusive patterns, difficulty in maintaining therapeutic alliance, poorly controlled poly-pharmacy abuse, poor adherence to management, poor social support and co-morbid psychiatric problems should not be managed by the GP.**

It is important for the GP to recognise his/her limits in terms of training, clinical experience, facilities and paramedical support in opiate dependence management. Specific subgroups of patients namely, difficult cases or patients, those recurrent abusive patterns, difficulty in maintaining therapeutic alliance, poorly controlled poly-pharmacy abuse, poor adherence to management, poor social support and co-morbid psychiatric problems require specialist management. This list is not meant to be exhaustive and will no doubt be further amended as experience with opiate dependence management becomes available in the future.

6. **The GP clinic should preserve its identity as a clinic for general medical practice and not become a drug treatment centre and as such, each clinic should have no more than five cases of opiate dependence at any one time.**

The GP clinic should preserve its identity as a clinic for general medical practice and not become a drug treatment centre. Apart from the professional and moral hazards of being identified as drug treatment centre by opiate addicts, an excessive number of opiate dependence cases will also preclude satisfactory care to the opiate dependence patients and the other medical patients due to time constraints in general practice. As such, we recommend that a clinic should have no more than FIVE cases at any one time. This will allow the doctor enough time to adequately counsel and manage his patients.

7. **All GPs and their patients should be registered with the Ministry of Health.**

The GP should register his participation in opiate dependence management, his patient's particulars and the prescription with the Ministry of Health. This aids practice by:

- a. Maintaining an 'above-the-board' practice and hence preserving professional safety.
- b. Dispelling misconceptions by lay persons regarding the intentions of the GP.
- c. Discouraging addicts who are not keen for rehabilitation from abusing the GP system by doctor-hopping for opioids such as Subutex or methadone.

To lend credibility to the register, the GP will be maintained on the register so long that he fulfils criteria as set out by the Ministry, such as monthly returns and the provision of acceptable standards of care.

8. **All GPs who participate in opiate dependence management must be willing to be subject to surveillance of his practice records by the Ministry of Health.**

To ensure the clear boundaries of practice and to ensure the professional safety of doctors participating in opiate dependence management, surveillance based on transparent parameters will be necessary by the Ministry of Health. In addition, the surveillance process ensures conformity to the acceptable clinical practices.

9. **The College proposes that the Ministry of Health, being the highest body of medico-legal opinion, be the body that provides the clinical governance necessary by keeping all doctors informed of the rules that govern appropriate practice, the penalties expected in the event of a breach of such rules, and to set in place a warning mechanism to keep all doctors informed of the initiation of any breaches.**

Opiate dependence is a complex condition with psychological, social, family, and medical dimensions. The opiate addict also tends to have dysfunctions of relationships that are both cause and effect of the dependence. As such, more than the usual clinical governance is necessary to ensure professional safety and the standard of care of patients with opiate dependence problems. The College therefore proposes that the Ministry of Health, being the highest body of medico-legal opinion, be the body that provides the clinical governance necessary by keeping all doctors informed of the rules that govern appropriate practice, the penalties expected in the event of a breach of such rules, and to set in place an warning mechanism to keep all doctors informed of the initiation of any breaches.

APPENDIX E

College's SARS Diary and Quotes

Year 2003	Activities
28 Mar	College's SARS Workgroup Formed
29 Mar	Interim Advisory On SARS For Doctors Practising In A Primary Care/Family Practice Setting In Singapore (1st Advisory) 2nd Advisory issued 3 April 3rd Advisory issued 12 April 4th Advisory issued 5 June (See Fig. 1) SARS Resource set-up within CFPS Website SARS Posters On Self Declaration of Symptoms (in four languages) (See Fig. 2)
1 April	SARS - Self Declaration of Symptoms Form (English Version) Revised 12th May
25 April	SARS - Self Declaration of Symptoms (Chinese Version) (See Fig. 3)
29 April	College Meeting With Senior Minister of State, Dr Balaji and Director of Medical Services, Prof Tan Chornh Chuan "On Curbing The Spread of SARS In The Community"
7 May	Hotline for Frontline launched A GP helpline manned by doctors for doctors
12 May	Letter To Certify No Evidence of SARS
14 May	Press Release: Affordable SARS Insurance Package For Healthcare workers Train The Trainers Session: SARS Preventive Measure Courses
17-25 May	SARS Preventive Measure Courses For Doctors In conjunction with the Singapore Medical Association and the Academy of Medicine Singapore
24 May	Live Webcast – "Learning From The SARS Outbreak: Strengthening The Defence Line" First interactive CME webcast (See Fig. 4) in Singapore watched by more than 1000 doctors
14 Jun	CME Distance Learning Module Launch: Severe Acute Respiratory Syndrome/ Counseling Skills

"GPs deserve praise and government help too."

"While the Tan Tock Seng Hospital doctors and nurses rightfully deserve the cheesecakes, roses and accolades piled on them, let us not forget the unsung heroes, the humble general practitioner (GP) and his clinic assistants. No less at the front line, they face increasing isolation as they grapple with a falling patient load and increase in overheads (masks, bleaches and antiseptic washes don't come any cheaper to them) amid fears that they themselves may become infected by SARS".

Letter by reader to Straits Times' forum on 17 Apr '03(11)

"...many of the frontlines of battle were also out there in the primary care clinics."

"... following a symposium organised by the College of Family Practitioners and the Ministry of Health, the "Interim Advisory on SARS for doctors practising in primary care and family practice settings in Singapore" was issued. The College SARS Workgroup was spearheading this effort to equip our frontline doctors with knowledge, skills and protective gear."

by Prof Chee Yam Cheng, Chairman Medical Board, TTSH in SMJ Editorial "Heros and Heroines of the War on SARS" Vol 44 Issue 5 2003

SARS Paraphernalia



Figure 1. SARS Advisory



Figure 2. SARS poster



Figure 3. Self Declaration of SARS symptoms



Figure 4. SARS webcast in CD-rom

Notes