

Physician-computerphiles

I enjoyed PMR's editorial and exhortation to do a history and physical ["Back to basics," *BCMJ* 2007;49:530]. Her description of a "young emergency physician" who did not examine any patients for 3 to 4 hours whilst remaining in front of a computer filled me with envy. I did not know there were any such jobs on the ground floor of hospitals.

This editorial may change the face of emergency medicine and the computerphiles who lazily go about their work in the soothing atmosphere of their local ER. Or shall I say the waiting rooms and hallways of the emergency department?

We do not, at present, have any computers in our waiting room or hallway, nor do we routinely do rectal exams there, but I am sure that techno-loving bureaucrats and graduates of leadership seminars could come up with some cash to fix this problem, after, of course, the requisite extensive and lengthy study of the issue.

—Michael Dettman, MD
Emergency physician, VGH

In Memoriam notices wanted

The *BCMJ* depends on you for the In Memoriam department. Please include birth and death dates, full name and the name the deceased was best known by, name of spouse and children (if any), key hospital and professional affiliations, and relevant biographical data. Photos cannot be published; notices should be less than 300 words and e-mailed to journal@bcma.bc.ca.

Members spoke—and we heard you

In order for an association to effectively represent its members, it is necessary to know exactly what its members want. The best way to do this is to ask, so we did.

In January 2008, national polling firm Ipsos Reid conducted an extensive survey on behalf of the BCMA that covered virtually all aspects of the organization. All practising BCMA members were invited to participate, and 2016 members completed the survey, giving it an impressive 24% response rate.

The full results are enclosed in this issue of the *BCMJ*, and I encourage you to read them. On the members' side of the BCMA web site (www.bcma.org) you can find all questions and responses from members should you wish to view them.

Overall members gave the Association positive marks on many issues. However, members have also said there are specific areas where the BCMA needs to do better. Some of the key findings are:

- The majority of members said they have a favorable impression of the BCMA, support its overall direction, and feel they are getting good value for their fees.
- A clear majority said the BCMA is doing a good job of keeping them informed on BCMA matters, including decisions of the Board of Directors.
- Members consistently rated their interactions with BCMA staff as very positive.
- GPs indicated their overwhelming support for the GPSC and the improvement it is having on their daily lives. Specialists indicated they desire similar programs for them in the future.
- Members told the BCMA that we need to do a better job at represent-

ing matters that are important to individual physicians.

- You also told us that you want the BCMA to make decisions faster and act more quickly on matters that affect practising members.

These last two concerns may be addressed with the implementation of the proposed governance model.

The Association takes these results very seriously and is considering the best course of action.

The Association takes these results very seriously and is considering the best course of action. The survey provides clear evidence of what works, and what areas members are asking us to focus on. In the coming months you will hear of a number of efforts focusing on these important issues and we look forward to providing them.

Thank you to everyone who participated; your efforts have been very worthwhile. You have been heard.

—Geoffrey Appleton, MB
BCMA President