

Mass-gathering medicine: Educational opportunities

Hundreds of mass gatherings—triathlons, adventure races, parades, concerts, and music festivals—take place throughout BC each year and, for the most part, they are safe and enjoyable community events. However, attendees at these events can be isolated from access to regular emergency services and medical care,¹ and illness, injuries, and fatalities do occur. In 2014 at least four young Canadians died attending music festivals.^{2,3}

Mass gatherings require health and medical services, harm-reduction strategies, operational plans, and emergency contingency plans to be in place, and they offer a plethora of educational opportunities.

A mass gathering can be defined as any occasion that attracts sufficient people to strain the planning and re-

sources of the community, city, or nation hosting the event.⁴ Mass-gathering health is a young and rapidly evolving discipline with ties to emergency medicine, disaster medicine, and public health. Much of the literature refers to mass-gathering medicine (MGM), a subset of mass-gathering health, which focuses on emergency medical care at mass gatherings; however, mass-gathering health also encompasses broader contributors to health at mass gatherings including security and policing, water quality, food safety, health promotion, injury/illness prevention, and harm reduction.

Mass gatherings take place in dynamic environments. Planning and provision of health and emergency medical services is challenging. Patterns of injury and illness differ from those typically encountered in the

community.⁴ Medical responses are complicated by logistical challenges, such as weather extremes, crowding, site access, and communication difficulties.⁵⁻⁷

These unique challenges, along with increased rates of morbidity, mean that baseline 911 emergency services alone may not ensure the safety of attendees. As well, there is a growing awareness of the impact of mass gatherings on local communities and a requirement to avoid compromising baseline emergency services.⁸ Consequently, there is a shift away from a purely first-aid model of care and toward on-site multidisciplinary medical teams (e.g., nurses, physicians, paramedics) offering a higher level of care.

A learning environment

The diversity of patients, health care expertise, and environments at mass gatherings provides an abundance of learning opportunities for medical students and residents. The multidisciplinary nature of mass-gathering medical teams exposes learners to the roles and skills of allied health care professionals and allows opportunity to practise communication and collaboration skills. The range of patient presentations with variable acuity provides opportunities to hone clinical skills such as history taking, physical examination, first aid, acute treatment, and appropriate disposition of patients. Mass gatherings also expose students to the nuances of prehospital care, encouraging flexibility and adaptability in variable conditions and low-resource environments.

Evolution of mass-gathering medicine at UBC

The faculty, residents, and students at UBC have driven the field of mass-gathering medicine from a grass-roots level. The Mass Gathering Medicine

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Interest Group at UBC (<http://mgm.med.ubc.ca>) is made up of a multi-disciplinary team of professionals collaborating to expand the literature about mass gatherings and to contribute to the care and standards provided at these events. The group supports two types of formal learning opportunities.

MGM clinical learning

Learners began participating at mass gatherings during the 2008 Pemberton Music Festival, a 3-day event involving more than 40 000 attendees per day and a medical team of more than 160 providers. Learner opportunities were found subjectively to be extremely valuable, and involvement of medical learners grew from the grass-roots level. Between 2008 and 2013, a formal MGM elective hosted 61 residents and 126 medical students during 77 events, with overwhelmingly positive reviews.

MGM student club

The MGM club, launched in 2012 through the UBC Medical Undergraduate Society, attracts students with interests in emergency, wilderness, sport, and mass-gathering medicine. The club provides didactic workshops and access to clinical learning,

research, leadership, and education at large-scale community events. There are now chapters of the student club in Alberta and Quebec.

— Andrew Guy
(UBC Medicine, class of 2017)

— Rosie Earle, BSc
(UBC Medicine, class of 2016)

— Sheila A. Turriss, PhD

— Adam Lund, MD, MDE, FRCPC

References

Available at bcmj.org.

Changes to GPSC fee codes align and clarify requirements for accurate billing

The General Practice Services Committee (GPSC) recently introduced changes to its incentive fee codes, including some of the A GP for Me codes, to provide doctors with improved clarity about requirements to bill.

Effective 1 August, these changes seek to bring clarity, alignment, and coordination to the GPSC incentive fee codes. Key adjustments include:

- Clear documentation requirements for confirmed diagnoses and care plans.
- Documentation of timing requirements for face-to-face time with patients and complex care fees.
- Improved condition-based pay-

ments for chronic disease management regarding patient self-management to replace the requirement to provide flow-sheets and COPD Action Plans, the 12-month care requirement, and new codes for GPs who submit encounter codes. Note that the new CDM fee items for GPs who submit encounter records for their visits are effective retroactive to 1 January 2015. Please hold submission of claims until after 4 August 2015. For claims that are over 90 days from initial submission/rejection, you may use submission code “A.”

- Clarification change in patient eligibility for other GPSC incentives after G14063 billing and payment.

Details about these changes are available at www.gpsc.bc.ca.

Pulsimeter continued on page 278

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Continued from page 277

Grants for BC researchers recognize new prostate cancer discoveries

Three BC research teams have received Movember Discovery Grants from the Movember Foundation through Prostate Cancer Canada to build on innovative prostate cancer research projects covering a wide breadth of areas.

Dr Alexander Wyatt, Dr Kim Chi, and their team at the University of British Columbia and Vancouver Coastal Health Research Institute will build on their previous work, analyzing DNA from the blood of patients with advanced prostate cancer. They will determine whether the presence or absence of particular genetic changes can predict if and how patients will respond to treatment to help explain why some cancers are drug resistant, and they will guide the development of a test to help select the best treatment for individual patients.

Dr Cheryl Helgason and her team at the BC Cancer Agency in Victoria is focused on RNA that is not able to produce proteins. Dr Helgason's team discovered that one such RNA (PCAT18) is present at much higher levels in metastatic prostate cancer, and they will assess this RNA to determine whether disabling it blocks the growth of cancer cells, and whether measuring its presence can be used as a diagnostic tool to complement or replace PSA testing.

Dr Julian Lum, Dr Brad Nelson, and their team at the BC Cancer Agency in Victoria will focus on immunotherapy. The treatment for high-risk cases of prostate cancer is often hormone therapy paired with radiation treatment. The team has discovered that 30% of patients treated this way develop an immune response, and 71% of these patients have a shorter time-to-cancer relapse. This finding suggests that hormone therapy and radiation can lead to det-

rimental immune responses that may result in an earlier relapse. The team will explore how and why hormone and radiation therapy cause detrimental immune responses and test immunotherapeutic approaches that are able to reverse this outcome.

Eleven additional research teams working out of a number of universities and health care institutions across Canada also received the grant. Each grant is worth up to \$200 000.

For more information about the Movember Foundation, visit <https://ca.movember.com>. For more information about Prostate Cancer Canada visit <http://prostatecancer.ca>.

Dr Leavitt wins annual report draw prize

Every year Doctors of BC includes an online survey with its annual report (annualreports.doctorsofbc.ca) to gather information for future improvements. This year's draw—for a night in one of the Pan Pacific



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Hotel's exclusive Pacific Club Harbour rooms—was won by Dr Jennifer Leavitt. Congratulations Dr Leavitt!

The 2014–15 annual report includes the following stories:

- Redesigning the way we treat hip fractures
- Reducing polypharmacy reduces risks and improves lives
- Innovative approach mentors students toward rural medicine
- Building healthy communities by supporting healthy choices
- First-of-its-kind initiative to support

facilities-based physicians

Readers will also find financial highlights, the audited financial statements, and reports from all Doctors of BC committees in the White Report. The report will remain online at annualreports.doctorsofbc.ca all year.

Canada's largest-ever health-data portal opens to researchers

The Canadian Partnership Against Cancer is launching the largest cancer research portal of its kind in Canada,

the Canadian Partnership for Tomorrow Project.

The portal contains data from more than 300 000 Canadians aged 35 to 69 who have volunteered to share information about their health, lifestyle, environment, and behavior that will allow researchers to dig into the factors that contribute to cancer and other chronic diseases. Nearly half of participants have also provided a biological sample. The portal is designed to track participants for 20 to

Continued on page 280

Doctors of BC Postsecondary Scholarship Fund winners

The Doctors of BC scholarship is awarded annually to two children of Doctors of BC members who display outstanding scholastic achievement, remarkable volunteer contributions, and well-rounded extracurricular interests. Each recipient receives a \$1000 scholarship toward postsecondary education and a certificate of achievement. Winners are selected by Doctors of BC committee members through an anonymous process. This year's winners were selected from more than 45 applicants, all of whom possessed a well-balanced list of academic, extracurricular, and volunteer achievements.



Julia De Pieri, Vancouver, BC

Ms Julia De Pieri, who graduated with first-class honors with distinction from Crofton House School, has been actively engaged in her community as a member and captain of the track and field team; member of the volleyball team, as well as scorekeeper and referee;

peer tutor; and volunteer in various capacities, including through Sunday School and as a camp counselor.

Ms De Pieri also participated in a 2-week service trip to Kenya with her high school, which was coordinated to help build teacher accommodations in a small African village.

In addition to being named senior athlete of the year and recipient of the Margot Thompson Cup for her high level of commitment, participation, and skill throughout the school's athletics program, Ms De Pieri plays piano and viola, speaks French fluently, and has studied Spanish, Italian, and Swahili.

Next year Ms De Pieri will be attending the University of Ottawa in the honours bachelor of science with specialization in human kinetics program, and competing on the university's varsity track and field team. After graduation she hopes to study medicine with a specialization in sport medicine.



Hailey Phillips, Victoria, BC

Ms Hailey Phillips graduated from the challenge and French immersion programs at Esquimalt High School. She contributed to numerous community services through her school as a peer tutor in math and science, president of her school's Interact Club (a high

school link to Rotary International), and a volunteer in various social justice and planning clubs.

Ms Phillips has played violin since she was 5 years old and won the position of concertmaster of the Greater Victoria Youth Orchestra this year. She regularly volunteers at concerts, fundraisers for the BC Cancer Agency and other charities, and the Sunrise Lodge seniors' home. She has played soccer for 10 years with the Bays United Football Club and was named co-captain of her team and captain of the defensive line this year.

In 2012 Ms Phillips was chosen to be the BC delegate on the Peacebus—a 5-week road trip across Canada with 10 other students that focuses on community service. At the age of 11 she traveled to Africa with her mother as a Canada-Africa Community Health volunteer.

Ms Phillips will be attending Queen's University next year in the bachelor of science honours program and is considering medicine as a career.

Continued from page 279

30 years, and the data can be used to conduct long-term population health studies.

The BC Generations Project, one of five provincial partners involved in the portal from across Canada, has enrolled over 29 000 people to date, and aims to enroll up to 40 000 British Columbians this year. Participants can be in good health, or have health problems or disabilities—the goal is to recruit a diverse group of people from all walks of life. To learn more about the BC Generations Project visit www.bcgenerationsproject.ca.

For more information about the Canadian Partnership for Tomorrow Project, its coordinating partners, the data, and how to access the portal visit www.partnershipfortomorrow.ca.

Nominate your colleagues for a Doctors of BC award

Doctors of BC is accepting nominations for members in good standing for the following awards.

Don B. Rix Award for Physician Leadership

Candidates for this award may have achieved distinction for:

- Supporting lifelong learning opportunities

- Promoting excellence in medical education
- Providing leadership for new initiatives in business and clinical practice
- Providing leadership and service to the general community or province either by direct support or through philanthropy
- Building consensus among physicians and groups of physicians

Doctors of BC Silver Medal of Service

Criteria for nominees include:

- Long and distinguished service of Doctors of BC
- Outstanding contributions to medicine or medical/political involvement in British Columbia or Canada or
- Outstanding contributions by a layperson to medicine or to the welfare of the people of BC or Canada.

The closing date for nominations is 30 November 2015 at 11:59 p.m. For more information visit www.doctorsofbc.ca/resource-centre/awards-scholarships.

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Specialist Referral Clinic 272

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College of Physicians and
Surgeons of BC 311

General Practice Services
Committee—Visioning 273,
274, 275, 277, 307, 317, 320

MedSleep 315

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Sea Courses Cruises 312

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How owning a clinic changes your insurance needs

What should you consider when opening your own clinic or joining a partnership?

Proper income and expense protection

Most physicians carry some form of disability insurance to protect their personal income in the event of an illness or injury. Did you know that insurers use your net income to calculate how much insurance to issue? For clinic owners, business expenses often mean that your net income is significantly lower than your gross income. Unless you separately insure your clinic's overhead expenses you may need to use personal disability benefits to fund clinic expenses in the event of a disability. This could result in significantly lower personal income replacement than intended during a disability.

The solution to this is professional expense or office overhead insurance. In the event of a disability, this policy specifically reimburses those business expenses that continue, such as rent, MOA salaries, equipment leases, or utilities. This type of policy usually has a very short waiting period (often only 14 or 30 days before you can begin remitting expenses) and the benefit period is usually only 12 to 24 months. It provides you the flexibility to keep your office running in the short term. If you are off work for more than 6 months, you will likely be finding a successor or closing your practice.

Funding buy-sell agreements

Most partnerships draft buy-sell agreements so that shareholders know what will happen if a partner dies or becomes disabled. It's important to explore whether your buy-sell agreement is adequately funded. Using life insurance, disability buy-sell insurance, or both is an excellent way to insure that partners will have the necessary funds to fulfill their obligations

in the event the buy-sell agreement is triggered by a death or disability.

Property and liability insurance

Have a qualified general insurance broker review any lease agreements to ensure that your property and liability insurance fully covers your obligations as a tenant. As well, ensure you have adequate business interruption insurance for any loss of revenue in case a fire, flood, or other disaster damages your business premises.

Health and dental benefits for employees

It is very common for physicians to carry health and dental policies for themselves, and to own the policies through their corporation, since health and dental plan premiums are tax deductible. A caveat to being able to deduct the premiums is that the corporation must offer similar benefits to

all eligible full-time employees of the corporation. If you have full-time employees working more than 20 hours per week and you have a health and dental plan for yourself, you likely need to offer benefits to your employees. If you do not offer these benefits and the CRA audits your corporation, it could deem the health and dental plan as a shareholder benefit and void the tax deductions. Employee benefit plans also attract good employees, boost employee loyalty, and encourage your employees to be proactive about their own health.

Owning a clinic has many rewards, and it is important to do your insurance homework so your business is properly protected.

For a complimentary, comprehensive insurance review, contact Ms Erin Higgins, insurance advisor at Doctors of BC, at ehiggins@doctorsofbc.ca.

Pulsimeter continued on page 282

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Pulsimeter continued from page 281

Doctors of BC Excellence in Health award winners

The 2015 winners of the Excellence in Health award are a Kelowna-based nonprofit that is teaching kids about water safety and a Victoria clinic providing women's health care services to its local community. The award is presented in recognition of actions or initiatives that exemplify creativity and ingenuity to improve and protect the health and safety of British Columbians, and results that have brought about measurable change with potential for positive, long-term improvement. To submit a nomination for the 2016 awards, visit www.doctorsofbc.ca/resource-centre/awards-scholarships/health-promotion-awards.

Nonprofit category:

Across the Lake Swim Society

Formed in 2009 and based in Kelowna, the Across the Lake Swim Society is committed to preserving the annual Interior Savings Across the Lake Swim and developing skills and awareness in open-water swimming in children and adults. Thanks to the society's efforts, every year 1400 grade 3 kids from Peachland to Lake Country receive free swimming lessons to develop their safety skills and empower them to experience the benefits of regular activity. Because the majority of drowning deaths may be prevented if the victim can swim, the society is committed to funding swimming lessons to help reduce the number of preventable drowning deaths. To learn more about the society's initiatives visit acrossthelakeswim.com.

Corporate category:

Vancouver Island Women's Clinic

For 10 years the Vancouver Island Women's Clinic (VIWC) has offered reproductive health care to women on the Island. The clinic provides onsite ultrasounds, blood tests, contraception, abortion services, and management of miscarriage and menopause. In addition to providing care locally—reducing the need for referrals to hospitals and specialists—the clinic offers training to nurses, medical students, family practice residents, nurse practitioners, and midwives, and participates in research that benefits women's care. VIWC is accredited by the National Abortion Federation and the College of Physicians and Surgeons of BC.

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